CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME: Letrice Ozuna

16 Filer ID (Ethics Commission Filers):

17 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS OR CONTRIBUTIONS MADE ELECTRONICALLY)	$
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 14291.47
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE	$
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 1013.24
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 13277.50
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0.

18 SIGNATURE: I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15 Election Code.

_____
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____, this the _____ day of _____,

20 _____, to certify which, witness my hand and seal of office.

_____ _____ _____
Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Letrice Ozuna, and my date of birth is 11/8/1966.

My address is 1584 mckinley, (street) San Antonio, (city) Tx (state) 78210 (zip code) USA (country).

Executed in Bexar County, State of Texas, on the 3 day of April (month), 20 25 (year).

_____
Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME	20 Filer ID (Ethics Commission Filers)
Leticia Ozuna	

21 SCHEDULE SUBTOTALS BY NAME OF SCHEDULE			SUBTOTAL AMOUNT
1	☑	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$ 1429.12
2	☐	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$
3	☐	SCHEDULE B: PLEDGED CONTRIBUTIONS	$
4	☐	SCHEDULE E: LOANS	$
5	☑	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$ 1013.24
6	☐	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	$
7	☐	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	$
8	☐	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	$
9	☐	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	$
10	☐	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	$
11	☑	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$ 150.72
12	☐	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS AND CONTRIBUTIONS RETURNED TO FILER	$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form

1 Total pages Schedule A1: 3

2 FILER NAME: Leticia Ozuna

3 Filer ID (Ethics Commission Filers):

4 Date	5 Full name of contributor	7 Amount of contribution ($)
2/11/2022	SA Kids First 6 Contributor address: 4007 McCullough #481 SA, Tx 78212	500.00

8 Principal occupation / Job title (See instructions): PAC

9 Employer (See instructions):

Date	Full name of contributor	Amount of contribution ($)
2/24/2025	SA Kids First Contributor address: 4007 McCullough #481 SA Tx 78212	1091.47

Principal occupation / Job title (See instructions): PAC

Employer (See instructions):

Date	Full name of contributor	Amount of contribution ($)
3/6/2025	Teresa Hudson Contributor address: 1816 Kane Houston Tx	1,000.00

Principal occupation / Job title (See instructions): Sr Dir of Security

Employer (See instructions): Planned Parenthood

Date	Full name of contributor	Amount of contribution ($)
2/28/2025	Gene Wright Contributor address: PO Box 598 Marble Tx 79813	5000.

Principal occupation / Job title (See instructions): Judge 112 District Ct

Employer (See instructions): State of Texas

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 13

2 FILER NAME: Leticia Ozuna

3 Filer ID (Ethics Commission Filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC (Y/N)	7 Amount of contribution ($)
3/17/2025	Walter & Lynette Embry	250.00
	6 Contributor address: 405 Wiltshire SA	City: TX	State:	Zip Code: 78209
8 Principal occupation / Job title (See instructions): founder	9 Employer (See instructions): Embry Real Estate	

Date	Full name of contributor ☐ out-of-state PAC (Y/N)	Amount of contribution ($)
3/17/2025	George Ozuna	50.00
	Contributor address: 630 W Woodlawn SA	City: TX	State:	Zip Code: 78212
Principal occupation / Job title (See instructions): retired	Employer (See instructions): retired	

Date	Full name of contributor ☐ out-of-state PAC (Y/N)	Amount of contribution ($)
	Contributor address:	City:	State:	Zip Code:
Principal occupation / Job title (See instructions):	Employer (See instructions):	

Date	Full name of contributor ☐ out-of-state PAC (Y/N)	Amount of contribution ($)
3/11/2025	Pat Frost	250.00
	Contributor address: 520 Genesco SA	City: TX	State:	Zip Code: 78209
Principal occupation / Job title (See instructions): Principal	Employer (See instructions): SAISD - Employed	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 3 3
2 FILER NAME: Leticia Ozuna	3 Filer ID (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)
3/17/2025	Rex Armini 1805 Broadway San Antonio Tx 78215	1000.00
8 Principal occupation / Job title (See Instructions): Founder	9 Employer (See Instructions): Say Energy	

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)
3/12/2025	Dr. Anne Cuellar 259 Alamosa SA, Tx 78212	250.00
Principal occupation / Job title (See Instructions): Director	Employer (See Instructions): ILSCA	

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)
3/8/2025	George A Ozuna 670 Constantia SA, Tx 78212	50.00
Principal occupation / Job title (See Instructions): Retired	Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense / Event Expense / Loan Repayment/Reimbursement / Solicitation/Fundraising Expense
Accounting/Banking / Fees / Office Overhead/Rental Expense / Transportation Equipment & Related Expense
Consulting Expense / Food/Beverage Expense / Polling Expense / Travel In State
Contributions/Donations Made By Candidate/Officeholder/Political Committee / Gifts/Awards/Memorials Expense / Printing Expense / Travel Out Of State
Credit Card Payment / Legal Services / Salaries/Wages/Contract Labor / Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1/1	2 FILER NAME: Leticia Ozuna		3 Filer ID (Ethics Commission Filers)
4 Date: 3/13/2025	5 Payee name: Prestige Printing		
6 Amount ($): 528.26	7 Payee address: 8 Burwood Ln	City: San Antonio, Tx	State: Zip Code: 78216
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule.): Printing Expense	(b) Description: Flyers	
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.	☐ Check if a public U.S. officeholder is being reported.	
9 Complete ONLY if direct expenditure to benefit (c)(4):	Candidate / Officeholder name:	Office sought:	Office held:
Date: 2/28/2025	Payee name: Texas Democratic Sale, VAN		
Amount ($): 485.00	Payee address: PO Box 15709	City: Austin Tx	State: Zip Code: 78761
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule.): Other	Description: voter roll	
	☐ Check if travel outside of Texas. Complete Schedule T.	☐ Check if a public U.S. officeholder is being reported.	
Complete ONLY if direct expenditure to benefit (c)(4):	Candidate / Officeholder name:	Office sought:	Office held:
Date:	Payee name:		
Amount ($):	Payee address:	City:	State: Zip Code:
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule.):	Description:	
	☐ Check if travel outside of Texas. Complete Schedule T.	☐ Check if a public U.S. officeholder is being reported.	
Complete ONLY if direct expenditure to benefit (c)(4):	Candidate / Officeholder name: Leticia Ozuna	Office sought:	Office held: ✓

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

If the requested information is not applicable, DO NOT include this page in the report.

The instruction Guide explains how to complete this form

1 Total pages Schedule I: 1/1	2 FILER NAME: Letica Ozuna			3 Filer ID (ethics Commission Filers)
4 Date: 7/16/2023 to 7/16/2025	5 Payee name: Frost Bank			
6 Amount ($): 104.00	7 Payee address: 1 Frost Bank Center	City: San Antonio	State: Tx	Zip Code: 78219
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories): Fees [$8 per month 13 months]	(b) Description (See instructions regarding type of information required): Frost Bank Account Fees		
Date: 3/6/2025	Payee name: Act Blue			
Amount ($): 37.23	Payee address: 366 Summer	City: Somerville	State: MA	Zip Code: 02144
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories): Fees	Description (See instructions regarding type of information required): Act Blue Fees for $1000.00		
Date: 3/12/2025	Payee name: Act Blue			
Amount ($): 9.48	Payee address: 366 Summer	City: Somerville,	State: MA	Zip Code: 02144
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories): Fees	Description (See instructions regarding type of information required): Fees for $250.00		
Date	Payee name			
Amount ($)	Payee address	City	State	Zip Code
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories)	Description (See instructions regarding type of information required)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 8

Field	Content	OFFICE USE ONLY
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR; FIRST: Leticia; MI; NICKNAME; LAST: Ozuna; SUFFIX	Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☑ Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE: 1534 McKinley San Antonio, TX 78210	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE; PHONE NUMBER; EXTENSION: (210) 704 7554	Date Hand-delivered or Date Postmarked; Receipt #; Amount $
6 CAMPAIGN TREASURER NAME	MS / MRS / MR: Mrs; FIRST: Sharon; MI; NICKNAME; LAST: Longoria; SUFFIX	Date Processed; Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE: 4226 Vantage View, San Antonio, TX 78228	
8 CAMPAIGN TREASURER PHONE	AREA CODE; PHONE NUMBER; EXTENSION: (210) 682 9959	

9 REPORT TYPE

- ☐ January 15
- ☑ 30th day before election
- ☐ Runoff
- ☐ 15th day after campaign treasurer appointment (Officeholder Only)
- ☐ July 15
- ☐ 8th day before election
- ☐ Exceeded Modified Reporting Limit
- ☐ Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month / Day / Year: 7 / 16 / 2022 THROUGH Month / Day / Year: 4 / 3 / 2025

11 ELECTION

ELECTION DATE — Month / Day / Year: 5 / 3 / 2025

ELECTION TYPE: ☐ Primary ☐ Runoff ☐ Other (Description) ☑ General ☐ Special

12 OFFICE

OFFICE HELD (if any): SAISD Trustee SMD 3

13 OFFICE SOUGHT (if known): Trustee, SMD

14 NOTICE FROM POLITICAL COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

☐ Additional Pages

COMMITTEE TYPE		
☑ GENERAL ☐ SPECIFIC	COMMITTEE NAME	SA Kids First
	COMMITTEE ADDRESS	4007 McCullough #481 San Antonio, TX 78212
	COMMITTEE CAMPAIGN TREASURER NAME	Sarah Harte
	COMMITTEE CAMPAIGN TREASURER ADDRESS	2034 W Kings Highway San Antonio TX 78228

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