CORRECTION/AMENDMENT AFFIDAVIT
FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers)	**2** Total pages filed: 1	**OFFICE USE ONLY**

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR | FIRST: Chad | MI

NICKNAME | LAST: West | SUFFIX

Date Received

4 ORIGINAL REPORT TYPE

- [ ] January 15
- [X] July 15
- [ ] 30th day before election
- [ ] 8th day before election
- [ ] Runoff
- [ ] Exceeded $500 limit
- [ ] 15th day after treasurer appointment (officeholder only)
- [ ] Final report
- [ ] Other (specify) _____

Date Hand-delivered or Date Postmarked

Receipt # | Amount $

5 ORIGINAL PERIOD COVERED

Month 01 / Day 01 / Year 2020 THROUGH Month 06 / Day 30 / Year 2020

Date Processed

Date Imaged

6 EXPLANATION OF CORRECTION

Need to amend the filing to report that the campaign maintains $24,751.92 in "political contributions maintained"

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:

[X] **Semiannual reports:** I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

[ ] **Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

* * * Electronically Certified * * *

_____
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _Chad West_____, this the __13th__ day of __July_____,

20__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

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

Supplemental Report
Officeholder

FORM SR
Cover Sheet

1. CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Chad	2. Total Pages Filed: 1
	NICKNAME LAST SUFFIX West	3. Office Held Council District 1

4. SUPPLEMENTAL REPORT TYPE

- ◌ January 15
- ◌ 30th day before election
- ◌ Runoff
- ◌ 15th day after campaign treasurer appointment (officeholder only)
- ☒ July 15
- ◌ 8th day before election
- ◌ Exceeded $500 limit
- ◌ Final Report

5. PERIOD / COVERED

1/1/2020   THROUGH   6/30/2020

6. ELECTION

Month   Day   Year

◌ Primary   ◌ Runoff   ◌ General   ◌ Special   ☒ N/A

7. OFFICE-HOLDER	CONTRIBUTION TOTALS	1. TOTAL OFFICEHOLDER CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$0.00
		2. TOTAL OFFICEHOLDER CONTRIBUTIONS OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$46,150.00
	EXPENDITURE TOTALS	3. TOTAL OFFICEHOLDER EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$0.00
		4. TOTAL OFFICEHOLDER EXPENDITURES	$0.00
8. POLITICAL (Campaign)	CONTRIBUTION TOTALS	5. TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$0.00
		6. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$0.00
	EXPENDITURE TOTALS	7. TOTAL POLITICAL EXPENDITURES OF $100 OR LESS UNLESS ITEMIZED	$0.00
		8. TOTAL POLITICAL EXPENDITURES	$23,811.51
9. OFFICEHOLDER FUNDS USED FOR CAMPAIGN PURPOSES		9. TOTAL DOLLAR AMOUNT OF OFFICEHOLDER CONTRIBUTIONS USED FOR CAMPAIGN EXPENDITURES DURING THE REPORTING PERIOD	$0.00

10. AFFIDAVIT

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.

AFFIX NOTARY STAMP / SEAL ABOVE

ELECTRONICALLY CERTIFIED
_____
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said ___Chad West_____ , this the ___13th_____ day

of _____July_____ , 20__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