CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1	Filer ID (Ethics Commi	ssion Filers)		2 Total pages filed:				
				4		OFFICE USE ONLY		
3	CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Marina		мі А	Date Received		
	TV WIL	NICKNAME	 LAST		SUFFIX	•		
			Gavito					
4	ORIGINAL REPORT TYPE							
		8th Day Before Runoff Election				Date Hand-delivered or Date Postmarked		
						Receipt #	Amount \$	
5	ORIGINAL PERIOD COVERED	•	/ear ты	Month	Day Year	Date Processed		
	COVERED	4/27/2023 THROUGH 5/31/2023		51/2023	Date Imaged			
6	EXPLANATION OF CO	ORRECTION						
	The purpose of this included in-kind co		orrect the total	Contribution Balance ।	noted on CS2 wh	ich mistakenly		
7	AFFIDAVIT I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.							
			Check	ONLY if applicable:				
	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.						l that or	
* * * Electronica					ally Certified * * *			
Signature of Candidate or Officeholder AFFIX NOTARY STAMP / SEAL ABOVE								
	worn to and subscribe certify which, witness			A Gavito	this the 20th o	day of <u>June</u>	, 20 <u>23</u> ,	
_	Signature of officer adm	inistering oath	Printed n	ame of officer administering o	ath	Title of officer admir	nistering oath	

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

Revised 04/27/2015

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how to complete		(Ethics Commission Filers	2 Total pages f	iled:	
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST Marina		MI A	OFFICE USE ONLY		
NAME	NICKNAME LAS	ST vito	SUFFIX	Date Received 6/20/2023 11:55:	22AM	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	OFFICEHOLDER MAILING ADDRESS 1850 Fredericksburg San Antonio TX 78201					
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NU (210) 867-73		TENSION	Date Hand-delivered	d or Date Postmarked	
6 CAMPAIGN TREASURER	MS / MRS / MR FIR Ed		MI	Receipt #	Amount \$	
NAME	NICKNAME LAS		SUFFIX	Date Processed 6/20/2023 11:55:2	22AM	
	Ea Ga	ırza		Date Imaged		
TREASURER ADDRESS (Residence or Business) 8 CAMPAIGN TREASURER PHONE	1850 Fredericksburg San Antonio TX 78201 AREA CODE PHONE NUMBER EXTENSION () -					
9 REPORT TYPE						
	8th Day Before Runoff Election					
10 PERIOD	Month D	ay Year	Month	Day Year		
COVERED	4/27/2	2023 THRO	DUGH 5/	31/2023		
11 ELECTION ELECTION DATE ELECTION TYPE				<u> </u>		
	Month Day Year Primary X Runoff Other Description					
	6/10/2023	General Sp	pecial			
12 OFFICE	OFFICE HELD (if any) None	,	13 OFFICE SOUGHT Council Distr			
GO TO PAGE 2						

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME				15 Filer ID (Ethics Commission Filers)		
Marina A Gavito						
16 NOTICE FROM POLITICAL COMMITTEE(S)	TICAL THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE					
	COMMITTEE TYPE COMMITTEE NAME					
	GENERAL COMMITTEE ADDRESS		ss			
	SPECIFIC		WON TREASURED NAME			
Additional Pages		COMMITTEE CAMPA	NIGN TREASURER NAME			
		COMMITTEE CAMPA	AIGN TREASURER ADDRESS			
17 CONTRIBUTION TOTALS	1			\$ 1000.00		
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)			\$ 52325.00		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES.			\$ o		
	4. TOTAL POLITICAL EXPENDITURES			\$ 46930.69		
CONTRIBUTION BALANCE	F TOTAL DOLLTICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY			\$ 23886.58		
OUTSTANDING LOAN TOTALS	ļ .	CIPAL AMOUNT OF ALL C	\$ 2075.00			
18 AFFIDAVIT						
				perjury, that the accompanying report information required to be reported by		
* * * Electronically Certified * * *						
Signature of Candidate or Officeholder						
AFFIX NOTARY STAM	P/SEAL ABOVE					
Sworn to and subscribed before me, by the said <u>Marina A Gavito</u> . this the <u>20th</u> day of <u>June</u> , 20 <u>23</u> , to certify which, witness my hand and seal of office.						
or <u>June</u> ,	20 23 , to certify	wnich, withess my hand	a and seal of oπice.			
Signature of officer adm	ninistering oath	Printed name of	officer administering oath	Title of officer administering oath		

SUBTOTALS - COH

FORM C/OH COVER SHEET PG 3

19 FILER NAME Marina A Gavito 20 Filer ID (Ethics Co	mmission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 49825.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 2500.00
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$0
4. SCHEDULE E: LOANS	\$0
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 46930.69
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$0
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$0
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$0
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$0
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$0
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$0
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$0