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:

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR **Mr.** FIRST **Robert** MI	**OFFICE USE ONLY**
	NICKNAME **Bobby** LAST **Blount** SUFFIX **Jr.**	Date Received **RECEIVED** JAN 06 2026
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS — Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE ▮▮▮ TX 78▮▮▮	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE **(210)** PHONE NUMBER ▮▮▮ EXTENSION	BY: Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS / MRS / MR **Mrs.** FIRST **Sandra** MI	Receipt # Amount $
	NICKNAME LAST **Sandoval** SUFFIX	Date Processed
		Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; ▮▮▮ TX ▮▮▮	STATE; ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE **(210)** PHONE NUMBER ▮▮▮ EXTENSION	

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 **7** / Day **1** / Year **25** THROUGH Month **12** / Day **31** / Year **25**

11 ELECTION

ELECTION DATE — Month / Day / Year   /   /

ELECTION TYPE: ☐ Primary   ☐ Runoff   ☐ Other Description _____   ☐ General   ☐ Special

12 OFFICE — OFFICE HELD (if any) **NISD Trustee #4**

13 OFFICE SOUGHT (if known)

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.

COMMITTEE TYPE	COMMITTEE NAME
☐ GENERAL	COMMITTEE ADDRESS
☐ SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
(Additional Pages)	COMMITTEE CAMPAIGN TREASURER ADDRESS

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CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT

15 C/OH NAME	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)	$ 0.00
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 0.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	$ 0.00
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 0.00
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 257.00
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 15,817.50

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.
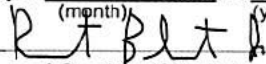
R T Blt A

_____
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 Robert Blount, Jr. _____, and my date of birth is ▮▮▮▮▮▮ _____.

My address is ▮▮▮▮▮▮▮▮▮▮▮ , San Antonio , Texas , 78253 , Bexar _____.
                (street)   (city)   (state)   (zip code)   (country)

Executed in Bexar _____ County, State of Texas _____, on the 6th day of January , 20 26 .
                                                (month)   (year)

R T Blt A

_____
Signature of Candidate/Officeholder (Declarant)