UNSWOR	N DECLARATION	FORM UD	
Attach this unsworn declaration to the front of any campaign finance report or personal financial statement in lieu of a notarized signature. See Tex. Civil Practice and Remedies Code § 132.001.			=
1 FILER ID: (Ethics Commiss on filers)  2 NAME OF FILER PLEASE TYPE DEPRINT:	Roxanne Foraisd Ggmail com Roxanne I. Evalus		3131 22 11:15HM
3 TYPE OF FILER	CANDIDATE/ OFFICEHOLDER  JUDICIAL CANDIDATE/ OFFICEHOLDER  PERSONAL FINANCIAL STATEMENT  DIRECT CAMPAIGN EXPENDITURE	POLITICAL COMMITTEE  POLITICAL PARTY  STATE/COUNTY CHAIR	
4 TYPE OF REPORT 5 DUE DATE	8 day Report 10/31/2022		
My name is ROXANNE J. EVANS, and my date of birth is 6-6-52  My Address is 7300 Meadowood, Austin TX 78723 USA  (street)			
(street) (city) (state) (zip code) (country)  I swear or affirm, under penalty of perjury that the information in the attached report is in all things true and correct, and includes all information required to be reported by me under Title 15, Election Code, or Chapter 572, Government Code.			
Executed in IRav 15 County, State of Toyas on the 31 day of Oct 2022.  Signature of Filer/Committee Representative (Declarant)			

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

Revised 7/9/2020