

UNSWORN 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.

OFFICE USE ONLY

Date Received

Method of Delivery

Date Processed

1 FILER ID:

(Ethics Commission filers)

2 NAME OF FILER

(PLEASE TYPE OR PRINT)

Leticia Caballero

3 TYPE OF FILER

CANDIDATE/ OFFICEHOLDER

POLITICAL COMMITTEE

JUDICIAL CANDIDATE/ OFFICEHOLDER

POLITICAL PARTY

PERSONAL FINANCIAL STATEMENT

STATE/COUNTY CHAIR

DIRECT CAMPAIGN EXPENDITURE

4 TYPE OF REPORT

Semi-annual / dissolution

5 DUE DATE

July 15, 2021

6 UNSWORN DECLARATION:

My name is Leticia Caballero, and my date of birth is 10/18/1973.

My Address is 2805 Onslow Dr., Austin, TX, 78748 Travis.
(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 Travis County, State of Texas, on the 11 day of July, 2021.


Signature of Filer/ Committee Representative
(Declarant)