

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: 2

**3 CANDIDATE/
OFFICEHOLDER
NAME**

MS/MRS / MR FIRST MI
MRS LEAH M
NICKNAME LAST SUFFIX
KING

OFFICE USE ONLY

Date Received

Received by Ellie Garcia
on Wednesday, January
14, 2026 4:21 PM

**4 CANDIDATE/
OFFICEHOLDER
MAILING
ADDRESS**

ADDRESS / PO BOX, APT / SUITE #, CITY, STATE, ZIP CODE

Change of Address

**5 CANDIDATE/
OFFICEHOLDER
PHONE**

AREA CODE PHONE NUMBER EXTENSION

Date Hand-delivered or Date Postmarked

**6 CAMPAIGN
TREASURER
NAME**

MS/MRS / MR FIRST MI
MS ROSA M
NICKNAME LAST SUFFIX
NAVEJAR

Receipt #

Amount \$

Date Processed

Date Imaged

**7 CAMPAIGN
TREASURER
ADDRESS**

STREET ADDRESS (NO PO BOX PLEASE), APT / SUITE #, CITY, STATE, ZIP CODE

(Residence or Business)

7524 JACK NEWELL BLVD S, FORT WORTH, TX 76118

**8 CAMPAIGN
TREASURER
PHONE**

AREA CODE PHONE NUMBER EXTENSION

(817) 345-7500

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 Day Year Month Day Year
7 / 9 / 25 THROUGH 1 / 15 / 26

11 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year ☐ Primary ☐ Runoff ☐ Other Description
☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any)

DIRECTOR - TRWD

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

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

GOTO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME LEAH M KING		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	\$ 7,000.26
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

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.

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 LEAH M. KING and my date of birth is _____

My address is _____ (street) _____ (city) _____ (state) _____ (zip code) _____ (country)

Executed in TARRANT County, State of TX, on the 14 day of JANUARY, 2026
(month) (year)

Leah M. King
Signature of Candidate/Officeholder (Declarant)