



# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

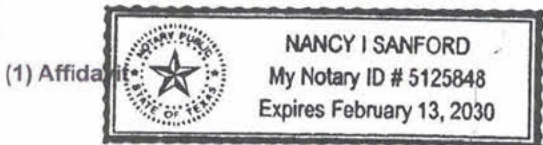
FORM C/OH  
COVER SHEET PG 2

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)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 798.42
	4. TOTAL POLITICAL EXPENDITURES	\$ 798.42
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 0
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

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.

*[Handwritten Signature]*  
Signature of Candidate or Officeholder

Please complete either option below:



NOTARY STAMP/SEAL

Sworn to and subscribed before me by Cassandra Caro this the 24<sup>th</sup> day of April

2026, to certify which, witness my hand and seal of office.

Nancy I. Sanford Signature of officer administering oath  
Nancy I. Sanford Printed name of officer administering oath  
Notary Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Cassandra Caro and my date of birth is 12-26-1994

My address is [Redacted] Kautman  
(street) (city) (state) (zip code) (country)

Executed in Kautman County, State of Texas, on the 24 day of April, 2026  
(month) (year)

*[Handwritten Signature]*  
Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 599.29
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 199.13
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4: <b>3</b>	2 FILER NAME <b>Cassandra Caro</b>	3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ <b>599.29</b>
5 CREDIT CARD ISSUER	Name of financial institution <b>Gateway Metro Federal Cu</b>	
6 PAYMENT	(a) Amount Charged <b>\$ 103.05</b>	(b) Date Expenditure Charged <b>4-8-26</b>
(c) Date(s) Credit Card Issuer Paid <b>April 23, 2026</b>		
7 PAYEE	(a) Payee name <b>Signage Systems</b>	(b) Payee address; City, State, Zip Code <b>7900 Ferguson Rd. Dallas TX 75228</b>
<input type="checkbox"/> Check if individual's residence address.		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <b>Campaign Signs</b>
<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Cassandra Caro</b>	Office Sought / Office Held <b>Talty City Council</b>
PAYMENT	(a) Amount Charged <b>\$ 60.02</b>	(b) Date Expenditure Charged <b>4-18-26</b>
(c) Date(s) Credit Card Issuer Paid <b>April 23, 2026</b>		
PAYEE	(a) Payee name <b>Signage Systems</b>	(b) Payee address; City, State, Zip Code <b>7900 Ferguson Rd Dallas TX 75228</b>
<input type="checkbox"/> Check if individual's residence address		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <b>Campaign Signs</b>
<input type="checkbox"/> Political <input type="checkbox"/> Non-Political		
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Cassandra Caro</b>	Office Sought / Office Held <b>Talty City Council</b>
PAYMENT	(a) Amount Charged <b>\$ 375.00</b>	(b) Date Expenditure Charged <b>4-19-26</b>
(c) Date(s) Credit Card Issuer Paid <b>April 23, 2026</b>		
PAYEE	(a) Payee name <b>ATC</b>	(b) Payee address; City, State, Zip Code <b>7713 Stony Creek Ct Fairfax Station VA 22031</b>
<input type="checkbox"/> Check if individual's residence address		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Campaign Messaging - Robo calls</b>	(b) Description <b>Campaign Messaging</b>
<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Cassandra Caro</b>	Office Sought / Office Held <b>Talty City Council</b>

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |

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USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4: <b>3</b>	2 FILER NAME <b>CASSANDRA CARO</b>	3 FILER ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ <b>599.29</b>
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5 CREDIT CARD ISSUER	Name of financial institution <b>Gateway Metro Federal CU</b>
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6 PAYMENT	(a) Amount Charged \$ <b>238.69</b>	(b) Date Expenditure Charged <b>3-25-26</b>	(c) Date(s) Credit Card Issuer Paid <b>April 23, 2024</b>
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7 PAYEE	(a) Payee name <b>Maniak</b>	(b) Payee address; City, State, Zip Code <b>11821 Classic Ln Forney TX 75126</b>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(b) Description <b>Signs</b>
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Cassandra Caro</b>	Office Sought <b>Talty City Council</b>	Office Held
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PAYMENT	(a) Amount Charged \$ <b>72.47</b>	(b) Date Expenditure Charged <b>3-21-26</b>	(c) Date(s) Credit Card Issuer Paid <b>April 23, 2026</b>
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PAYEE	(a) Payee name <b>Maniak Prints</b>	(b) Payee address; City, State, Zip Code <b>11821 Classic Ln Forney TX 75126</b>
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(b) Description <b>Signs</b>
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Cassandra Caro</b>	Office Sought <b>Talty City Council</b>	Office Held
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PAYMENT	(a) Amount Charged \$ <b>21.63</b>	(b) Date Expenditure Charged <b>4-8-26</b>	(c) Date(s) Credit Card Issuer Paid <b>April 23, 2026</b>
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PAYEE	(a) Payee name <b>Blanks USA</b>	(b) Payee address; City, State, Zip Code <b>BLANKS USA.com</b>
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(b) Description <b>Digital Door Hanger</b>
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Cassandra Caro</b>	Office Sought <b>Talty City Council</b>	Office Held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

If the requested information is not applicable, DO NOT include this page in the report.

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |

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USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4: <b>3</b>	2 FILER NAME: <b>Cassandra Caro</b>	3 FILER ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ <b>599.29</b>
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5 CREDIT CARD ISSUER	Name of financial institution <b>Discover Card</b>
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6 PAYMENT	(a) Amount Charged \$ <b>60.62</b>	(b) Date Expenditure Charged <b>4-16-24</b>	(c) Date(s) Credit Card Issuer Paid <b>April 23, 2024</b>
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7 PAYEE	(a) Payee name <b>Signage Systems</b>	(b) Payee address; City, State, Zip Code <b>7900 Ferguson Rd Dallas TX 75228</b>
	<input type="checkbox"/> Check if individual's residence address.	

8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) <b>Advertising Expen</b>	(b) Description <b>Signs</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Cassandra Caro</b>	Office Sought <b>Talty City Council</b>	Office Held
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PAYMENT	(a) Amount Charged \$	(b) Date Expenditure Charged	(c) Date(s) Credit Card Issuer Paid
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PAYEE	(a) Payee name	(b) Payee address; City, State, Zip Code
	<input type="checkbox"/> Check if individual's residence address.	

PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office Sought	Office Held
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PAYMENT	(a) Amount Charged \$	(b) Date Expenditure Charged	(c) Date(s) Credit Card Issuer Paid
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PAYEE	(a) Payee name	(b) Payee address; City, State, Zip Code
	<input type="checkbox"/> Check if individual's residence address.	

PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office Sought	Office Held
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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

**SCHEDULE G**

If the requested information is not applicable, DO NOT include this page in the report.

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: <i>1</i>	<b>2</b> FILER NAME <i>Cassandra Caro</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>4-11-20</i>	<b>5</b> Payee name <i>Howes</i>	
<b>6</b> Amount (\$) <i>184.13</i> <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address: City: State: Zip Code <i>howes.com</i>	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>Advertising expense</i>	<b>(b)</b> Description <i>Recruit Area Clearing for Campaign Signs</i>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <i>4-21-20</i>	Payee name <i>City of Dalry</i>	
Amount (\$) <i>15.00</i> <input type="checkbox"/> Reimbursement from political contributions intended	Payee address: City: State: Zip Code <i>9700 CR 213 Jones TX 75724</i>	
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Campaign</i>	Description <i>Permit Solicitation</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address: City: State: Zip Code	
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**