

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**FORM C/OH
COVER SHEET PG 2**

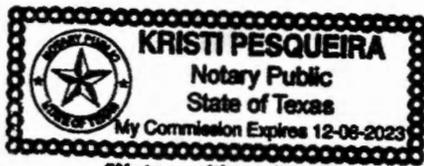
15 C/OH NAME		<i>Sherman Hatton Jr.</i>	16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	<i>0.00</i>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	<i>23,350</i>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$	<i>0.00</i>
	4. TOTAL POLITICAL EXPENDITURES	\$	<i>5,252</i>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$	<i>18,098</i>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	<i>0.00</i>

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 Sherman Hatton Jr. this the 15th day of July, 2022 to certify which, witness my hand and seal of office.

Kristi Pesqueira Kristi Pesqueira Notary
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____

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

Executed in _____ County, State of _____, on the _____ day of _____, 20____
(month) (year)

Signature of Candidate/Officeholder (Declarant)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <p style="text-align: center; font-size: 1.2em;">Sherman Atton Jr</p>		3 Filer ID (Ethics Commission Filers)
4 Date <p style="font-size: 1.2em;">1-28</p>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <p style="font-size: 1.2em; text-align: center;">Valerie Waddell</p>	7 Amount of contribution (\$) <p style="font-size: 1.2em; text-align: center;">500.00</p>
6 Contributor address; City; State; Zip Code <p style="font-size: 1.2em;">4800 Sugar Grove Blvd Sugarland TX 77449</p>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <p style="font-size: 1.2em;">1-28</p>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <p style="font-size: 1.2em; text-align: center;">Phil Klosowsky</p>	Amount of contribution (\$) <p style="font-size: 1.2em; text-align: center;">100.00</p>
Contributor address; City; State; Zip Code <p style="font-size: 1.2em;">14015 S.W. Fwy Suite 14 Sugarland TX</p>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <p style="font-size: 1.2em;">1-28</p>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <p style="font-size: 1.2em; text-align: center;">Alicia Klosowsky</p>	Amount of contribution (\$) <p style="font-size: 1.2em; text-align: center;">100.00</p>
Contributor address; City; State; Zip Code <p style="font-size: 1.2em;">14015 S.W. Fwy Suite 14 Sugarland TX</p>		
Principal occupation / Job title (See Instructions) <p style="font-size: 1.2em; text-align: center;">Attorney</p>		Employer (See Instructions)
Date <p style="font-size: 1.2em;">1-28</p>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <p style="font-size: 1.2em; text-align: center;">Rhonda Session</p>	Amount of contribution (\$) <p style="font-size: 1.2em; text-align: center;">500</p>
Contributor address; City; State; Zip Code <p style="font-size: 1.2em;">11601 Shadow Creek Pkwy ste. 111-206 Pearland TX 77584</p>		
Principal occupation / Job title (See Instructions) <p style="font-size: 1.2em; text-align: center;">Attorney</p>		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME <i>Sherman Hatton Jr.</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>1/27</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Michael Nussif</i>	7 Amount of contribution (\$) <i>500.00</i>
6 Contributor address; City; State; Zip Code <i>1446 N Medio River Circle</i>		
8 Principal occupation / Job title (See Instructions) <i>Attorney</i>		9 Employer (See Instructions)
Date <i>1/27</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jeffrey Carter</i>	Amount of contribution (\$) <i>500.00</i>
Contributor address; City; State; Zip Code <i>1806 Arcadia Sugarland TX 77498</i>		
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions)
Date <i>1/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Chelsi Hall</i>	Amount of contribution (\$) <i>100.00</i>
Contributor address; City; State; Zip Code <i>7803 Virgil St Houston TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>1/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jim Narvins</i>	Amount of contribution (\$) <i>2,500</i>
Contributor address; City; State; Zip Code <i>7324 South west #984 Freeway Houston TX 77074</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Sherman Hatton Jr.		3 Filer ID (Ethics Commission Filers)
4 Date 2-1	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deborah Brewer	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code P.O. Box 575 Wallis, TX 77495		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 2-1	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larry McDougal Sr.	Amount of contribution (\$) 200.00
Contributor address; City; State; Zip Code 530 Houston Street Richmond TX 77469		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

Date 2-1	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Grace NWAAGuma	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 211 A Houston St Richmond TX 77469		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

Date 2-1	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee D. Cox	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 201 S 11th Street Richmond TX 77469		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of contribution (\$)
2-1	Georgia Barker Contributor address; City: Katy State; Zip Code 10634 Western Pine TRC TX 77444	500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Attorney		
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
2-1	Paul F Tu Contributor address; City: Richmond State; Zip Code 51 Morington TX 77494	1,000
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Attorney		
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
2-1	Patrick McCann Contributor address; City: Houston State; Zip Code 7000 Louisiana St Ste 3950 Houston, TX 77002	1,000
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Attorney		
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
2-1	A Zum Low Contributor address; City: Houston State; Zip Code 9449 Briss onnet Houston TX 77006	2,500
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Attorney		
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME <i>Sherman Atton Jr.</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>2-01</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Chabil Hall</i>	7 Amount of contribution (\$) <i>500.00</i>
6 Contributor address; City; State; Zip Code <i>Memorial Dr. Suite F Houston TX</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>1-31</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Donnie Barber Lester</i>	Amount of contribution (\$) <i>200.00</i>
Contributor address; City; State; Zip Code <i>Acorn Ridge Missouri City TX 77469</i>		
Principal occupation / Job title (See Instructions) <i>Retiree</i>		Employer (See Instructions)
Date <i>1-29</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Pheobe Smith</i>	Amount of contribution (\$) <i>1,000</i>
Contributor address; City; State; Zip Code <i>77 Sugar Creek Center Sugarland TX 77469</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>1-28</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Eddrea McKnight</i>	Amount of contribution (\$) <i>1,000</i>
Contributor address; City; State; Zip Code <i>5444 Westheimer Rd Suite 100 TX 77095</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME <i>Sherman Hatton Jr.</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>2-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jason Winton</i>	7 Amount of contribution (\$) <i>100.00</i>
6 Contributor address; City; State; Zip Code <i>P.O. Box 88350 Houston Tx 77288</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
<i>Attorney</i>		
Date <i>2-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Carl Moerer</i>	Amount of contribution (\$) <i>500.00</i>
Contributor address; City; State; Zip Code <i>Richmond Tx 77469</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<i>Attorney</i>		
Date <i>2-3</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>J. Michael Lytle</i>	Amount of contribution (\$) <i>250.00</i>
Contributor address; City; State; Zip Code <i>2116 Thompsons Hwy Ste 116 Richmond Tx 77469</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<i>Attorney</i>		
Date <i>2-2</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Beverly Deadrick</i>	Amount of contribution (\$) <i>500.00</i>
Contributor address; City; State; Zip Code <i>1718 Lottre Moore Loop Richmond Tx 77469</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<i>Attorney</i>		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Sherman Hatton Jr.</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>5/31</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Michael Njoku</i>	7 Amount of contribution (\$) <i>1500</i>
6 Contributor address; City; State; Zip Code <i>515 Austin St Richmond TX 77469</i>		
8 Principal occupation / Job title (See Instructions) <i>Attorney</i>		9 Employer (See Instructions) —
Date <i>5/26</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Daniel Perez-Garcia</i>	Amount of contribution (\$) <i>2,000</i>
Contributor address; City; State; Zip Code <i>N/A</i>		
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions)
Date 2-28 <i>3-31</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Elizabeth B King</i>	Amount of contribution (\$) <i>500.00</i>
Contributor address; City; State; Zip Code <i>802 Foster Dr Richmond TX 77469</i>		
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions)
Date <i>3-21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>JAYOMA Law Firm</i>	Amount of contribution (\$) <i>250.00</i>
Contributor address; City; State; Zip Code <i>P.O. Box 711221 Houston TX 77271</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME <i>Sherman Hatton Jr.</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3-31</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Chakilla Robinson</i>	7 Amount of contribution (\$) <i>500⁰⁰</i>
6 Contributor address; City; State; Zip Code <i>Richmond TX 77406</i>		
8 Principal occupation / Job title (See Instructions) <i>Attorney</i>		9 Employer (See Instructions)
Date <i>1/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Kenneth Bryant</i>	Amount of contribution (\$) <i>11000</i>
Contributor address; City; State; Zip Code <i>77469</i>		
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions)
Date <i>1/15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>T Kay Terry</i>	Amount of contribution (\$) <i>100.</i>
Contributor address; City; State; Zip Code <i>905 Front St Richmond TX 77469</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Sherman Hatton</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>7/13</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Anthony Washington</i>	7 Amount of contribution (\$) <i>21000</i>
6 Contributor address; City; State; Zip Code <i>2601 Cartwright Rd Ste D 166 77459 Mrs Washington</i>		
8 Principal occupation / Job title (See Instructions) <i>Att</i>		9 Employer (See Instructions)
Date <i>7-05</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Lorenzo Williams</i>	Amount of contribution (\$) <i>250.00</i>
Contributor address; City; State; Zip Code <i>65588 Corporate Dr #200 Houston 77007 TX</i>		
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions)
Date <i>4/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Demetria Lopez</i>	Amount of contribution (\$) <i>100.00</i>
Contributor address; City; State; Zip Code <i>2651 Cedro Dallas TX</i>		
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions)
Date <i>3-14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jeffrey Strange</i>	Amount of contribution (\$) <i>500.00</i>
Contributor address; City; State; Zip Code <i>126 Conchola Ln.</i>		
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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.

1 Total pages Schedule F1:	2 FILER NAME Sherman Hatton Jr.	3 Filer ID (Ethics Commission Filers)
4 Date 1-27-2022	5 Payee name Weston Event Venues	
6 Amount (\$) 1,700.00	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Kick Off
	(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 Office sought Office held		

Date 1-27-2022	Payee name Weston Event Venues	
Amount (\$) 1,149.00	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food Beverage Expense	Description Kick Off
	<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		

Date 3-23-2022	Payee name Voters Contact.org	
Amount (\$) 536.00	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Print Pushcard
	<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 POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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 Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Sherman Hutton Jr.	3 Filer ID (Ethics Commission Filers)
4 Date 5-28-22	5 Payee name Campaign	
6 Amount (\$) 300.00	7 Payee address; City; State; Zip Code 100 Louisiana St Missouri City TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense/Gift Awards	(b) Description Campaign 13asketball Youth tournament- 3 on 3
	(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	Office sought Office held
Date 1-16-7-15	Payee name Stripe Fees	
Amount (\$) 1867.00	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting + Banking	Description Fees From Stripe Donations Stripe Banking Fees
	(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
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	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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