

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers)		2 Total pages filed:		OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Kusumakar	MI	Date Received	
	NICKNAME	LAST Sooda	SUFFIX	Date Filed 10-7-26	
4 ORIGINAL REPORT TYPE	☐ January 15	☐ Runoff	☐ Final report	Date Hand-delivered or Date Postmarked	
	☐ July 15	☐ Exceeded modified reporting limit	Other (specify)	Receipt # <u> </u> Amount \$ <u> </u>	
5 ORIGINAL PERIOD COVERED	☒ 30th day before election	☐ 15th day after treasurer appointment (officeholder only)		Date Received Rebecca Huerta	
	☐ 8th day before election			City Secretary	
Month Day Year		Month Day Year		Date Imaged	
01 / 01 / 26		THROUGH 10 / 05 / 26			

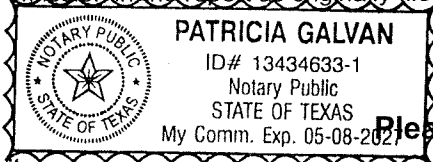
6 EXPLANATION OF CORRECTION

Amended Schedule A1

7 SIGNATURE I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:

- ☐ Semiannual reports: I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.
- ☒ Other reports: I swear, or affirm, that I am filing this corrected report not later than the 7th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.



Signature of Candidate/Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Kusumakar Sooda this the 7th day of October, 2026, to certify which, witness my hand and seal of office.

Signature of officer administering oath: Patricia Galvan Printed name of officer administering oath: Patricia Galvan Title of officer administering oath: Notary Public

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)

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

2026	KUSUMAKAR SOODA CAMPAIGN				
	CONTRIBUTORS (SCHEDULE A1)				
CONTRIBUTOR	AMOUNT	DATE	ADDRESS		CITY/STATE/ZIP
SCOTT GORRIE	\$100.00	9/1/26			CORPUS CHRISTI, TX 78411
ANA SALAZAR	\$100.00	9/1/26			CORPUS CHRISTI, TX 78414
ELOY SALAZAR	\$100.00	9/1/26			CORPUS CHRISTI, TX 78415
THOMAS ALEXANDER	\$100.00	9/1/26			CORPUS CHRISTI, TX 78412
MARIA ALEXANDER	\$100.00	9/1/26			CORPUS CHRISTI, TX 78412
FRANK ALVAREZ	\$100.00	9/1/26			CORPUS CHRISTI, TX 78414
SANDRA ALVAREZ	\$100.00	9/1/26			CORPUS CHRISTI, TX 78414
ZEBA LLC	\$100.00	9/1/26			CORPUS CHRISTI, TX 78463
YOLANDA FLOISSAC	\$100.00	9/1/26			CORPUS CHRISTI, TX 78412
ED CANTU	\$100.00	9/1/26			CORPUS CHRISTI, TX 78413
LILIA ARANDELA	\$100.00	9/1/26			CORPUS CHRISTI, TX 78411
DAVID BERLANGA	\$100.00	9/1/26			CORPUS CHRISTI, TX 78413
RUDY GARZA	\$250.00	9/1/26			CORPUS CHRISTI, TX 78401
ANDY TAUBMAN	\$100.00	9/1/26			PORT ARANSAS, TX 78373
TRISH BRUMMET	\$100.00	9/1/26			CORPUS CHRISTI, TX 78413
SHANA FULLER	\$100.00	9/1/26			CORPUS CHRISTI, TX 78414
LAL MENDON	\$2,000.00	9/1/26			CORPUS CHRISTI, TX 78413
REPORTING PERIOD TOTAL	\$3,750.00				