CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

MAILING ADDRESS Change of Address Shince, T. 77994 AREA CODE PHONE NUMBER EXTENSION OFFICEHOLDER PHONE Shince, T. 77994 AREA CODE PHONE NUMBER EXTENSION EXTENSION BY Receipt # Amount \$ Date Processed Date Imaged Date Imaged TREASURER ADDRESS TO 4 CR. 335 Shince TY. 77994 Receipt # Amount \$ Date Imaged Date Imaged TY. 77994 AREA CODE TREASURER ADDRESS AREA CODE PHONE NUMBER EXTENSION FIRST MI NICKNAME LAST Date Imaged TX. 77994 TY. 77994	The C/OH Instruction	Guide explains ho	w to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages	filed:
4 CAMPAIGN TREASURER ADDRESS CAMPAIGN TREASURER ADDRESS (Residence or Business) 5 CAMPAIGN TREASURER ADDRESS (Residence or Business) 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) 7 CAMPAIGN TREASURER ADDRESS (Residence or Business) 8 CAMPAIGN TREASURER ADDRESS (Residence or Business) 9 REPORT TYPE 3 January 15 3 January 15 3 Open day before election Reporting Limit THROUGH	OFFICEHOLDER	MR. NICKNAME	Kenny	W	Date Received	
S CAMPAIGN TREASURER NAME	OFFICEHOLDER MAILING ADDRESS Change of Address 5 CANDIDATE/ OFFICEHOLDER	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1643 CR. 342 Shinger, Tk. 77984 AREA CODE PHONE NUMBER EXTENSION			JAN 18 2024 Tenia Hydson	
TREASURER ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE TREASURER ADDRESS (Residence or Business) 1 70 4 CR 335 Shuce TX. 77984 AREA CODE PHONE NUMBER EXTENSION TREASURER PHONE 3 AREA CODE PHONE NUMBER EXTENSION TREASURER PHONE 9 REPORT TYPE January 15 Soth day before election Runoff breasurer appointment (Officialoliser Only) 10 PERIOD COVERED Month Day Year Month Day Year THROUGH TIST TYPE Month Day Year Month Day Year THROUGH TIST TYPE Month Day Year Special 12 OFFICE OFFICE DECTION DATE ELECTION TYPE Month Day Year Special Special THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL PROMOTIVES TO SUPPORT THE CANDIDATE'S OR OFFICEMOLERS NOTICE OF SUCH EXPENDITURES MADE BY POLITICAL COMMITTEE TO SUPPORT COMMITTEE TYPE COMMITTEE TYPE COMMITTEE TYPE COMMITTEE TYPE COMMITTEE TYPE COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER NAME	6 CAMPAIGN TREASURER	MS/MRS/MR MRS/ NICKNAME	JO ANN	MI) SUFFIX	Receipt # Date Processed	Amount \$
AREA CODE PHONE NUMBER EXTENSION AREA CODE PHONE NUMBER EXTENSION	TREASURER ADDRESS	STREET ADDRESS	(NO PO BOX PLEASE); APT / SL	JITE #; CITY;		ZIP CODE
Separator Sepa	8 CAMPAIGN TREASURER	AREA CODE	PHONE NUMBER	EXTENSION	/×.	(1484
Month Day Year Month Day Year Month Day Year	9 REPORT TYPE	January 15	30th day before el	ection Runoff Exceeded Modified	(Officehol	appointment der Only)
## ELECTION DATE Month Day Year Primary Runoff Other Description		Month		Month	, , .	
COMMITTEE TYPE Additional Pages Commissioner Pct. 3 Siame Siame This box is for notice of political contributions accepted or political expenditures made by political conmittees to support the candidate / officeholder: these expenditures may have been made without the candidate's or officeholder's knowledge or committee type Committee type Committee type Committee name General Committee address Committee campaign treasurer name	11 ELECTION	222 Mario 200 Ma	Year Primary	Runoff Other Description	13, 8	
14 NOTICE FROM POLITICAL COMMITTEES OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR COMMITTEE TYPE COMMITTEE NAME Additional Pages THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR COMMITTEE TYPE COMMITTEE NAME COMMITTEE TYPE COMMITTEE NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME	12 OFFICE	0.	D1 3	_	1	
SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME	POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTI THE CANDIDATE / OFFI CONSENT. CANDIDATE COMMITTEE TYPE	CE OF POLITICAL CONTRIBUTIONS A CEHOLDER. THESE EXPENDITURES S AND OFFICEHOLDERS ARE REQUIRE COMMITTEE NAME	CCEPTED OR POLITICAL EXPENDITURES MA	ADE BY POLITICAL, GO IDATE'S OR OFFICENC MEY RECEIVE NOTICE (DIMMITTEES TO SUPPORT LIDER'S KNOWLEDGE OR OF SUCH EXPENDITURES.
	agos	SPECIFIC				

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	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER TH PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	IAN \$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOAN	us) \$ 🔿
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 0
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE I OF REPORTING PERIOD	LAST DAY \$
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS LAST DAY OF THE REPORTING PERIOD	S OF THE \$
	Please complete either option belo	ow:
(1) Affidavit NOTARY STAMP/SEA		
Sworn to and subscribed	before me by this ti	he,
20, to certify	which, witness my hand and seal of office.	
Signature of officer administer (2) Unsworn Declaration	ALICE STRUCKER AND STRUCKER OR THE OR	Title of officer administering oath
My name is Kerun My address is 164	3' CR. 342 , Shiver	TX. 77984 LAVACA.
Executed in LAVAC		(state) (zip code) (country)
	Signature of Car	ndidate/Officeholder (Declarant)