CANDIDA	3N FINAN	ICE R	EPORT			<del></del>	COV	ER :	FORM C/OH SHEET PG 1
The C/OH Instruction		ow to comp	plete this form.	1 Filer II	D (Ethics Commiss	ision Filers)	2 Total	i pages	s filed:
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR		FIRST	<u> </u>	MI				
NAME	IVIF.	C	Charles	*********	K	ŀ	<u> </u>		CE USE ONLY
	NICKNAME	··	last <b>Mudd</b>	*****	SUF	FFIX	Date Ree	TEE!	D FOR REC
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BO				STATE: ZIP (	CODE	1	٠. <u>٠</u> ٠	_ יוסטוט ט מכיי
MAILING ADDRESS	PO Box 93i	D Box 936 Hallettsville, TX 77964				İ		JUL 18 2023	
Change of Address						Ĭ	ı El	entio <b>n</b> é	Amy Kloesel Administrator, Lavaci
5 CANDIDATE/ OFFICEHOLDER	AREA CODE	PHON	NE NUMBER		EXTENSION		Бу	y	14-
OFFICEHOLDER PHONE	(361)	777	2-2244		****	1	Date Hang	i-delivere	ed on Date Postmarked
6 CAMPAIGN	MS / MRS / MR		FIRST				Receipt #		Amount \$
TREASURER NAME	Mrs.	J	Joan		MI NA				Amount 9
NAME	NICKNAME	•••••••	LAST	•	M		Date Proces	assed	
		Ņ	LAST <b>Mudd</b>		SUFF	FIX	Date Image	ned	
7 CAMPAIGN	PETPEET ADDRESS								
TREASURER ADDRESS	104 E 5th S		x please).     apt / sun Hallettsville, T		CITY. 4		S	STATE:	ZIP CODE
(Residence or Business)									
CAMPAIGN TREASURER	AREA CODE	PHONE	NUMBER	E	EXTENSION				
PHONE	(361)	772	2-2355						
REPORT TYPE	lanuary 15			<del></del>					!
	January 15	<u> </u>	30th day before elec		Runoff		trea	5th day aft easurer ap officeholder	rfter campaign ppointment er Only)
0 PERIOD	July 15		8th day before election	on	Exceeded Mod Reporting Limi				ort (Attach C/OH - FR)
COVERED	Month	Day	Year			Month	Day	Year	(
-	1	. 1 .	23	THROUG	3H <b>f</b>	6	30	23	
ELECTION	ELECTION DA	ATE			·				
	Month Day	Year	Primary	Runoff	ELECTIO				J
	,				Descr	er oription			ļ
	11 / 8	Z 22	■ General	Special	·				
OFFICE	OFFICE HELD (if any)			13 0	THAT SOUGHT				
	County Judg			10	FFICE SOUGHT (	(if known)			
NOTICE FROM	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL CO THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHO CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF							CAL COM	MITTEES TO SUPPORT
COMMITTEE(S) -	COMMITTEE TYPE	COMMITTEE	HOLDERS ARE REQUIRED	TO REPORT THE	S INFORMATION O	ONLY IF THEY	/ RECEIVE NO	JTICE OF	ER'S KNOWLEDGE OR SUCH EXPENDITURES.
	OUNINH TEE TO	COMMITTEE	E NAME						
Additional Pages	GENERAL	COMMITTER	EE ADDRESS						
	SPECIFIC	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME							
		COMMITTEE CAMPAIGN TREASURER ADDRESS							
1									1

## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH

	THAITCE REPOR	<b>TI</b>		COVER	SHEET PO
15 C/OH NAME Charles K Mudd			10	6 Filer ID (Eth	ics Commission File
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLI PLEDGES, LOANS, OR GL CONTRIBUTIONS MADE E	TICAL CONTRIBUTIONS (OTHEI JARANTEES OF LOANS, OR LECTRONICALLY)	R THAN	\$	
***************	2. TOTAL POLITICAL CONT	TRIBUTIONS			
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLIT			\$	
	4. TOTAL POLITICAL EXPE	\$			
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIE OF REPORTING PERIOD	BUTIONS MAINTAINED AS OF TH	HE LAST D		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT LAST DAY OF THE REPORT	OF ALL OUTSTANDING LOANS ING PERIOD	AS OF TH	HE \$	2,600.0
S SIGNATURE I sv requ	vear, or affirm, under penalty of perjury uired to be reported by me under Title 15	, that the accompanying report , Election Code.	is true an	nd correct and	
		1/ (	2		
			V	4	
		Signature	of Candid	late or Officen	older
		plete either option be	HOW.		
Affidavit					
NOTARY STAMP/SEAL					
orn to and subscribed be	efore me by	thic	tho	4	
, to certify wh	nich, witness my hand and seal of office.	uns	trie	day of _	
nature of officer administering	g oath Printed name of of	ficer administering oath		Title of office	cer administering oal
		OR			
Unsworn Declaration					
name is Charles Keith	Mudd	, and my date of birtl	a ia 03/1	9/1972	
address is PO Box 936	4343 FM 340	Hallettsville	TX	77964	USA
cuted in Lavaca	(street) County, State of Texas			(zip code)	(country)
			onth)	(year)	
		Signature of Car	ndidate/Of	ficeholder (De	clarant)
				(=0	

## SUBTOTALS - C/OH

## FORM C/OH COVER SHEET PG 3

19 FILE	RNAME					
	Charles K Mudd					
21 SCH NAM	EDULE SUBTOTALS IE OF SCHEDULE	•	SUBTOTAL AMOUNT			
1.	SCHEDULEA1: MONETARY POLITICAL CONTRIBUTIONS					
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS					
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS					
4.	SCHEDULE E: LOANS					
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS					
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS					
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS					
8.	B. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD					
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS					
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH					
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS					
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER					