## **COVER SHEET PG 1** CAMPAIGN FINANCE REPORT 2 Total pages filed: 1 Filer ID (Ethics Commission Filers) The JC/OH Instruction Guide explains how to complete this form. MS / MRS / MR 3 CANDIDATE / OFFICE USE ONLY **OFFICEHOLDER** 6. NAME Date Received NICKNAME 711 Bill Guadalupe Co Elections ZIP CODE ADDRESS / PO BOX; 4 CANDIDATE / JAN 1 7 2023 **OFFICEHOLDER** 222 Parkvidge Cir. SeguinTX MAILING **ADDRESS** Received Change of Address EXTENSION 5 CANDIDATE/ AREA CODE PHONE NUMBER Date Hand-delivered or Date Postmarked **OFFICEHOLDER** (210) 307 - 8443 PHONE Receipt # Amount \$ МΙ MS / MRS / MR 6 CAMPAIGN William **TREASURER** 6. Date Processed NAME NICKNAME Date Imaged JR STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; 7 CAMPAIGN 78624 **TREASURER** 1175. Adams St. Fredrickshung TX **ADDRESS** (Residence or Business) EXTENSION AREA CODE PHONE NUMBER 8 CAMPAIGN **TREASURER** (830) PHONE 383-0371 9 REPORT TYPE 15th day after campaign 30th day before election Runoff January 15 treasurer appointment (Officeholder Only) Exceeded Modified Final Report (Attach C/OH - FR) July 15 8th day before election Reporting Limit 10 PERIOD Month COVERED 12 2012 7075 THROUGH ELECTION DATE **ELECTION TYPE** 11 ELECTION Runoff Other Description 100 / 2022 Special 13 OFFICE SOUGHT (if known) OFFICE HELD (if any) 12 OFFICE Plan Judga THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT 14 NOTICE FROM THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEGGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. **POLITICAL** COMMITTEE(S) COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS **GO TO PAGE 2**

JUDICIAL CANDIDATE / OFFICEHOLDER

FORM JC/OH

## JUDICIAL CANDIDATE / OFFICEHOLDER FORM JC/OH CAMPAIGN FINANCE REPORT **COVER SHEET PG 2** 15 JC/OH NAME 16 Filer ID (Ethics Commission Filers) 17 CONTRIBUTION TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN **TOTALS** PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) 2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **EXPENDITURE** TOTAL UNITEMIZED POLITICAL EXPENDITURE. **TOTALS TOTAL POLITICAL EXPENDITURES** CONTRIBUTION TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY **BALANCE** OF REPORTING PERIOD **OUTSTANDING** TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE 6. LOAN TOTALS LAST DAY OF THE REPORTING PERIOD 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/Officeholder Please complete either option below: (1) Affidavit Calesse A Carter My Commission Expires 06/23/2023 Sworn to and subscribed before me by William to certify which, witness my hand and seal of office. Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath (2) Unsworn Declaration

(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\_\_\_\_\_.

Signature of Candidate/Officeholder (Declarant)