CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

| The C/OH Instruction G | uide explains how | to complete this form. | 1 Filer ID (Ethics Commission Filers) | 2 Total pages filed: | |
|--|---|----------------------------------|---------------------------------------|--|--|
| | | | | 2 | |
| 3 CANDIDATE / OFFICEHOLDER | MS / MRS (MR) | steven | C MI | OFFICE USE ONLY | |
| NAME | NICKNAME | Williams | SUFFIX | Date Received | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address | ADDRESS / PO BOX; | APT / SUITE #; 502 V | city; state; zip code 10005 TX. 76084 | APRILLIC COUNTY C SON COUN JAN 10 | |
| 5 CANDIDATE/ OFFICEHOLDER PHONE | AREA CODE (8/7) | 940NE NUMBER | EXTENSION 1533 | Date Hand-delivered of Date Sastmarked | |
| 6 CAMPAIGN TREASURER NAME | MS (MR9/ MR NICKNAME | FIRST Ro <i>becca</i> LAST | MI E SUFFIX | Date Imaged | |
| | | Williams | | Date Imaged | |
| 7 CAMPAIGN TREASURER ADDRESS | STREET ADDRESS (| , | SUITE #; CITY; Venus | STATE; ZIP CODE TX: 76084 | |
| (Residence or Business) | | | | | |
| 8 CAMPAIGN TREASURER PHONE | (8/7) | 705-5672 | EXTENSION | | |
| 9 REPORT TYPE | January 15 | 30th day before | - Franchista Marifold | 15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR) | |
| | July 15 | 8th day before el | Reporting Limit | Final Report (Atlach C/OH - FR) | |
| 10 PERIOD COVERED | Month 07 | Day Year 402 3 | THROUGH /2 | Day Year / 31 / 2023 | |
| 11 ELECTION | Month Day | Year Primary | Description | | |
| 12 OFFICE | Johnson Cain | ty Constable Pct. | 3 Johnson County Co | | |
| 14 NOTICE FROM POLITICAL COMMITTEE(S) | THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. | | | | |
| COMMITTEE(3) | COMMITTEE TYPE | COMMITTEE NAME | | | |
| Additional Pages | GENERAL | COMMITTEE ADDRESS | | | |
| | SPECIFIC | COMMITTEE CAMPAIGN TR | EASURER NAME | | |
| ÷ | | COMMITTEE CAMPAIGN TR | REASURER ADDRESS | | |
| GO TO PAGE 2 | | | | | |

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 THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ 0 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 0 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURE. | \$ 0 |
| ** | 4. TOTAL POLITICAL EXPENDITURES | \$ 0 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAGOR REPORTING PERIOD | \$ 30.06 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS O LAST DAY OF THE REPORTING PERIOD | \$ 3411,49 |
| rec | quired to be reported by me under Title 15, Election Code. Signature of Ca | andidate or Officeholder |
| | Signature of Ca | andidate or Officeholder |
| | | |
| | Please complete either option below | v: |
| | | |
| (1) Affidavit | JENNIFER CAGLE My Notary ID # 129264286 Expires January 12, 2025 | |
| NOTARY STAMP/SEA | L | |
| 0 1 | before me by $\frac{1\times 00084444493}{1\times 000000000000000000000000000000000000$ | day of anuary, |
| Sennetu | which, witness my hand and seal of office. | notary |
| Signature of officer administer | | Title of officer administering oath |
| (2) Unsworn Declarati | on | |
| My name is | , and my date of birth is | 8 |
| | | |
| | (street) (city) | state) (zip code) (country) |
| Executed in | County, State of , on the day of (mont | , 20 h) (vear) |
| | | date/Officeholder (Declarant) |