CANDIDATE / OFFICEHOLDER FORM C/OH **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. MS / MRS / MR 3 CANDIDATE/ OFFICE USE ONLY **OFFICEHOLDER** K NAME Date Received FILED NICKNAME at <u>9: 40</u> o'clock <u>A</u> M Bennett ADDRESS / PO BOX; 4 CANDIDATE / CITY: APT / SUITE #; FEB 1 4 2024 10 Box 31 OFFICEHOLDER 77863 24000 TX MAILING ANNA L. SCHIELACK COUNTY CLERK, BURIESON CO., TEX. **ADDRESS** Change of Address 5 CANDIDATE/ AREA CODE PHONE NUMBER EXTENSION Date Hand-delivered or Date Postmarked OFFICEHOLDER (512) 536,0075 PHONE Receipt # Amount \$ 6 CAMPAIGN **TREASURER Date Processed** NAME NICKNAME Date Imaged Lafez STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY: 7 CAMPAIGN STATE: ZIP CODE **TREASURER** 102 Hillson CT Somerville 70 つつとつり **ADDRESS** (Residence or Business) 8 CAMPAIGN AREA CODE PHONE NUMBER EXTENSION **TREASURER** PHONE (956) 7395800 9 REPORT TYPE 15th day after campaign 30th day before election January 15 Runoff treasurer appointment (Officeholder Only) **Exceeded Modified** July 15 8th day before election Final Report (Attach C/OH - FR) Reporting Limit 10 PERIOD COVERED 21/1/24 1202\$ THROUGH ELECTION DATE 11 ELECTION **FLECTION TYPE** Other Description Primary Runoff 3/5/24 General Special OFFICE HELD (if any) 13 OFFICE SOUGHT (if known) 12 OFFICE Constable CONSTABLL 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 KNOWLEDGE 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 SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS

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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)	\$
EXPENDITURE TOTALS	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$
	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 2478.62
	4. TOTAL POLITICAL EXPENDITURES	\$ 2478.62 \$ 2478.62
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	ST DAY \$
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS O LAST DAY OF THE REPORTING PERIOD	F THE \$
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 or Officeholder		
Please complete either option below:		
JUSTINE WOLF		
(1) Affidavit Notary ID 125110262		
		NOTARY STAMP/SEAL
Sworn to and subscribed before me by John Bennett this the 14 day of Fridancy.		
20 24 to certify which, witness my hand and seal of office.		
Bustine wolf Notary		
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath		
OR OR		
(2) Unsworn Declaration		
My name is, and my date of birth is		
		'
IVIY AUGIESS IS	(street) (city)	state) (zip code) (country)
Executed in	County, State of, on the day of(mont	
Signature of Candidate/Officeholder (Declarant)		