#### **CANDIDATE / OFFICEHOLDER** FORM C/OH CITY SECRETARY VER SHEET PG 1 **CAMPAIGN FINANCE REPORT** Total pages filed: The C/OH Instruction Guide explains how to complete this form. MS / MRS / MB CANDIDATE / Christopher OFFICE USE ONLY **OFFICEHOLDER** NAME Date Received JOHNSUN ADDRESS / PO BOX: 4 CANDIDATE / **OFFICEHOLDER** 3000 S Hulen 124-249 Ffw TX 76/09 MAILING **ADDRESS** V Change of Address **EXTENSION** CANDIDATE/ Date Hand-delivered or Date Postmarked **OFFICEHOLDER** (8/1)703-5272 PHONE Receipt # Amount \$ 6 CAMPAIGN **TREASURER** Date Processed NAME Date Imaged STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; STATE; 7 CAMPAIGN 3000 S. Hulen 124-249 CHW NO **TREASURER ADDRESS** (Residence or Business) AREA CODE PHONE NUMBER **EXTENSION** CAMPAIGN **TREASURER** (8/1) 207-9898 PHONE 9 REPORT TYPE 30th day before election 15th day after campaign January 15 Runoff treasurer appointment (Officeholder Only) **Exceeded Modified** July 15 Final Report (Attach C/OH - FR) 8th day before election Reporting Limit 10 PERIOD COVERED 4/24/23 THROUGH **ELECTION TYPE** 11 ELECTION **ELECTION DATE** Other Month Year Description 12 OFFICE OFFICE HELD (if any) 13 OFFICE SOUGHT (if known) 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. 14 NOTICE FROM **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**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 2

OAIIII AIOI	TI III/AITOE ILEI OILI	
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)	\$ 500
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAG	ST DAY \$ 500 '00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS O LAST DAY OF THE REPORTING PERIOD	FTHE \$
RONAL Notary P	D PAUL GONZALES ublic, State of Texas Expires 05-17-2024 ry ID 10520616	andidate or Officeholder
(1) Affidavit		
Sworn to and subscribed 20 3 , to certify Signature of officer administe	before me by Christopher Johnson this the sphich, witness my hand and seal of office.  The second of the seal of t	and day of May  Notax  Title of office administering oath
(0) Lineau Paulaurii		
(2) Unsworn Declaration	on	
My name is	, and my date of birth is	
	, and my date or bining	
, addi 000 10	,	state) (zip code) (country)
Executed in	County, State of , on the day of (month	, , , , , , , , , , , , , , , , , , , ,
	Signature of Candi	date/Officeholder (Declarant)

### **SUBTOTALS - C/OH**

# FORM C/OH COVER SHEET PG 3

19 FILER NAME	20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. SCHEDULE A1: 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 CO	ONTRIBUTIONS \$
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	CONTRIBUTIONS \$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FU	NDS \$
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A	A BUSINESS OF C/OH \$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	ONTRIBUTIONS \$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTO FILER	TIONS RETURNED \$

### MONETARY POLITICAL CONTRIBUTIONS

### SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The	Instruction Guide explains how to complete this	1 Total pages Schedule A1:			
2 FILER NAME Christopher Johnson			3 Filer ID (Ethics Commission Filers)		
4 Date	5 Full name of contributor out-of-state PAC (ID#:)  Loddy green  6 Contributor address; City; State; Zip Code  1138 Clara State TY 74110		7 Amount of contribution (\$)  500.00		
-	pation / Job title (See Instructions) のんくらしてはん	9 Employer (See Instruct Texas He	•		
Date	Full name of contributor		Amount of contribution (\$)		
	Contributor address; City;	State; Zip Code			
Principal occupation / Job title (See Instructions)  Employer (See Instructions)			tions)		
Date	Full name of contributor	C (ID#:)	Amount of contribution (\$)		
	Contributor address; City;	State; Zip Code			
Principal occupation / Job title (See Instructions)  Employer (See Instructions)			tions)		
Date	Full name of contributor	C (ID#:)	Amount of contribution (\$)		
	Contributor address; City;	State; Zip Code			
Principal occupation / Job title (See Instructions)  Employer (See Instructions)					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.