

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed: **5**

OFFICE USE ONLY

Date Received

RECEIVED
Jan 10 2024
BY: *[Signature]*

Date Hand-delivered or Date Postmarked

Receipt # Amount \$

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR FIRST MI
MR **DAN** **MI**

NICKNAME LAST SUFFIX
 HAUSE

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
162 COUNTY ROAD 4963 KEMPNER, TX 76539

Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION
(512) 525-2430

6 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI
MRS **DIANE** **R**

NICKNAME LAST SUFFIX
 HAUSE

7 CAMPAIGN TREASURER ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
162 COUNTY ROAD 4963 KEMPNER, TX 76539

(Residence or Business)

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
(512) 547-0542

9 REPORT TYPE

January 15 30th day before election Runoff 15th day after campaign treasurer appointment (Officeholder Only)

July 15 8th day before election Exceeded Modified Reporting Limit Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year THROUGH Month Day Year
7 / 1 / 24 THROUGH 12 / 31 / 24

11 ELECTION

ELECTION DATE ELECTION TYPE

Month Day Year Primary Runoff Other Description

11 / 8 / 22 General Special

12 OFFICE

OFFICE HELD (if any)
JUSTICE OF THE PEACE, PCT4

13 OFFICE SOUGHT (if known)

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 TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC Additional Pages	COMMITTEE NAME
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME DAN HAUSE		16 Filer ID (Ethics Commission Filers)	
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.20
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.20
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$	104.33
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

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:



Sworn to and subscribed before me by Dan Hause this the 10 day of January, 2025, to certify which, witness my hand and seal of office.

Signature of officer administering oath: Deborah Sue Miller Printed name of officer administering oath: Deborah Sue Miller Title of officer administering oath: Notary Public

OR

(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____.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME
DAN HAUSE

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 0.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4. SCHEDULE E: LOANS	\$ 0.00
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0.00
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0.00
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
12. ■ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.20

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K:
2 FILER NAME DAN HAUSE		3 Filer ID (Ethics Commission Filers)
4 Date 09/30/2024	5 Name of person from whom amount is received EDUCATORS CREDIT UNION	8 Amount (\$) 0.10
	6 Address of person from whom amount is received; City; State; Zip Code P.O. BOX 2078 WACO, TX 76702-0728	
7 Purpose for which amount is received INTEREST FOR SAVINGS ACCOUNT		Check if political contribution returned to filer
Date 12/31/2024	Name of person from whom amount is received EDUCATORS CREDIT UNION	Amount (\$) 0.10
	Address of person from whom amount is received; City; State; Zip Code P.O. BOX 2078 WACO, TX 76702-0728	
Purpose for which amount is received		Check if political contribution returned to filer
Date	Name of person from whom amount is received	Amount (\$)
	Address of person from whom amount is received; City; State; Zip Code	
Purpose for which amount is received		Check if political contribution returned to filer
Date	Name of person from whom amount is received	Amount (\$)
	Address of person from whom amount is received; City; State; Zip Code	
Purpose for which amount is received		Check if political contribution returned to filer

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



AFFIDAVIT FOR CANDIDATE OR OFFICEHOLDER: ELECTRONIC FILING EXEMPTION

An exemption affidavit must be submitted with each paper report.

Beginning on January 1, 2024, a candidate or officeholder who has accepted more than \$32,810 in political contributions or made more than \$32,810 in political expenditures in any calendar year must file all subsequent reports electronically.

OFFICE USE ONLY	
Date Received	
RECEIVED JAN 10 2024	
Date Hand Delivered or Date Postmarked <i>[Signature]</i>	
Receipt #	Amount \$
Date Processed	
Date Imaged	

Filer name DAN HAUSE	Filer ID #
--------------------------------	------------

- I swear or affirm that I have not accepted more than \$32,810 in political contributions or made more than \$32,810 in political expenditures in a calendar year.
- I further swear or affirm that I do not use computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- I further swear or affirm that no person acting as my agent or consultant, and no person with whom I contract, uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- I further swear or affirm that I understand that I am required to file my campaign finance reports electronically if I, my agent or consultant, or a person with whom I contract exceeds \$32,810 in political contributions or political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- I am filing this affidavit with the SEMIANNUAL report due on JANUARY 15, 2025. I understand that this affidavit is required to be filed with each campaign finance report for which I am claiming an exemption from electronic filing.

Please complete either option below:



[Signature]
Signature of Filer

Sworn to and subscribed before me by Dan Hause this the 10 day of January 2025, to certify which, witness my hand and seal of office.

[Signature] Deborah Sue Miller Notary Public
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(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____.
(month) (year)

Signature of Filer (Declarant)

FILERS WHO ARE EXEMPT FROM THE ELECTRONIC FILING REQUIREMENT ARE STILL REQUIRED TO FILE CAMPAIGN FINANCE REPORTS ON PAPER