CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	Guide explains how	to complete this form.	1 Filler ID (Ethics Commission Filers)	2 Total pages file	^{ed:} 3		
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR Mr.	FIRST Richard	MI W.	OFFICE USE ONLY Date Received RECEIVED			
IVANIE	NICKNAME	Harris	SUFFIX				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1264 Glass Road Kingsland Texas 78639			LLANO CO. ELECTIONS ADMINISTRATOR			
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		or Date Postmarked		
6 CAMPAIGN TREASURER	MS / MRS / MR	FIRST	MI	Receipt #	Amount \$		
NAME	Mr. Theodorus J.		J.	Date Processed			
	van Eeten			Date Imaged			
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	1170 Lakevie P.O. Box 235		Tow Tow	Texas Texas	ZIP CODE 78672 78672		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
9 REPORT TYPE	January 15 July 15	30th day before el		treasurer at (Officeholde			
10 PERIOD COVERED	Month 2	Day Year / 25 / 24	THROUGH 6	Day Year / 30 / 24			
# ELECTION	Month Day Year Primary Runoff Other Description						
	11 / 5 /	24 General	Special				
12 OFFICE	OFFICE HELD (if any) Llano Cty. Constable Prct.2 13 OFFICE SOUGHT (if known) Llano Cty. Constable Prct. 2						
14 NOTICE FROM POLITICAL	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 OFFICEHOLDER'S ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.						
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME					
Additional Pages	GENERAL COMMITTEE ADDRESS						
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME						
		COMMITTEE CAMPAIGN TR					
	·	GO TO	PAGE 2				

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

	19 FILER NAME Richard W. Harris			
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			
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.	3. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD			
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			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Richard W. Harris		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)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	ST DAY \$	0.00
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	THE \$	0.00
	Please complete either option below	v:	
(1) Affidavit		NC ST.	MMY HELM DTARY PUBLIC ATE OF TEXAS D # 11444487 n. Expires 04/26/2025
NOTARY STAMP/S	0 1 // 1	11th day of	Jely .
1	tify which, witness my hand and seal of office. Tommy Helm	Chie	of Clerk
Signature of officer admin	Stering oath Printed name of officer administering oath	Title of off	icer administering oath
(2) Unsworn Declar	ation		1
My name is	, and my date of birth is		
My address is			·
		state) (zip code)	(country)
Executed in	County, State of , on the day of (month	h) (yea	<u>r)</u> -
	Signature of Candi	date/Officeholder (D	eclarant)