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:		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR NICKNAME	Harvey LAST Faulther	MI L SUFFIX	OFFICE USE ONLY Date Received Guadalupe Co Elections		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	H49 Ea	APT / SUITE #;	CITY: STATE: ZIP CODE MONIOSTX 7814	NOV 2 2 2023		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (20)	PHONE NUMBER 325 - 8471	EXTENSION	Date hand-derivered or Date Postmarked Receipt # Amount \$		
6 CAMPAIGN TREASURER NAME	MS / MRS <u>/ MB</u> NICKNAME	Harvey Fackner	SUFFIX	Date Processed Date Imaged		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)		(NO PO BOX PLEASE); APT / S	200 CONTROL OF STATE	STATE; ZIP CODE TX 78/24		
8 CAMPAIGN TREASURER PHONE	AREA CODE (7/0) 3	PHONE NUMBER 25 - 8471	EXTENSION	8		
9 REPORT TYPE	January 15 July 15	30th day before e	C Sundad Mad Sad	15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month	Day Year / 13 / 2013	THROUGH 1/	Day Year / 27 / 2023		
11 ELECTION	Month Day	Year Primary 2094 General	Runoff Other Description Special			
12 OFFICE	OFFICE HELD (if any)	Pot#4	13 OFFICE SOUGHT (if known	n) Pd#4		
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 OF CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES COMMITTEE TYPE COMMITTEE NAME					
Additional Pages	GENERAL SPECIFIC	COMMITTEE ADDRESS COMMITTEE CAMPAIGN TRE	EASURER NAME			
		COMMITTEE CAMPAIGN TR	EASURER 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)	\$.00				
s	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$, 00				
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$,00				
	4. TOTAL POLITICAL EXPENDITURES	\$ 375.00				
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD					
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	* , 0 O				
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.						
	QL	_				
	Signature of Car	ndidate or Officeholder				
y.						
	Discourse to the second					
Please complete either option below:						
(1) Affidavit	KRISTINE BODE NOTARY PUBLIC STATE OF TEXAS ID # 126911886 My Comm. Expires 06-07-2025					
Sworn to and subscribed before me by Harvey Faulkner this the 22nd day of November,						
20 23, to certify which, witness my hand and seal of office.						
Signature of officer administe	ing oath Printed name of officer administering oath	Title of officer administering oath				
	OR					
(2) Unsworn Declaration	on					
	er "					
	, and my date of birth is					
My address is	(ctract) (city) (city)	oto) (zip oodo) (accepta)				
Executed in	(street) (city) (st	ate) (zip code) (country), 20 (year)				
	Signature of Candida	ate/Officeholder (Declarant)				