CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how to	o complete this form.	1 Filer ID (Ethics Commission Filers)	² Total pages filed: 7		
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR Mr	FIRST William Darrell	MI	OFFICE USE ONLY		
NAME	NICKNAME	LAST Hunter	SUFFIX	Date Received Guadalupe Co Elections		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; PO Box 1713,	Seguin, Texas 7	CITY; STATE; ZIP CODE 8156	JAN 1 4 2022		
 Change of Address 			EXTENSION	Received		
5 CANDIDATE/ OFFICEHOLDER PHONE	(830)	91001 NUMBER	EATENSION	Date Harrered or Date Postmarked		
6 CAMPAIGN	MS / MRS / MR	FIRST	MI			
TREASURER NAME				Date Processed		
	NICKNAME	LAST	SUFFIX	Date Imaged		
7 CAMPAIGN TREASURER ADDRESS		o po box please); APT / S , Seguin, Texas 7		STATE; ZIP CODE		
(Residence or Business)						
8 CAMPAIGN TREASURER PHONE	(830)	237-3948	EXTENSION			
9 REPORT TYPE	January 15	30th day before	election	15th day after campaign treasurer appointment (Officeholder Only)		
	July 15	8th day before el	ection Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)		
10 PERIOD	Month	Day Year	Month	Day Year		
COVERED	9	8 / 21	тнгоидн 1	/ 15 / 22		
11 ELECTION	ELECTION DAT		ELECTION TYP	E		
	Month Day	Year Primary	Runoff Other Description			
	3 / 1 /	22 Genera	I Special			
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if know	wn)		
14 NOTICE FROM POLITICAL				MADE BY POLITICAL COMMITTEES TO SUPPORT NDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR F THEY RECEIVE NOTICE OF SUCH EXPENDITURES.		
COMMITTEE(S)	COMMITTEE TYPE COMMITTEE NAME					
Additional Pages	GENERAL	COMMITTEE ADDRESS				
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN T	REASURER ADDRESS			
		GO TO	D PAGE 2			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

				a design of the second second second second			
15 C/OH NAME William Darrell Hunter		16 Filer	ID (Ethics Cor	nmission Filers)			
17 CONTRIBUTION TOTALS	I	\$					
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)						
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.		\$				
	4. TOTAL POLITICAL EXPENDITURES		\$2,	753.31			
CONTRIBUTION BALANCE	 TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD 	ST DAY	\$1,	253.44			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	F THE	\$ 2,	056.75			
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.							
	Please complete either option below	v:					
(1) Affidavit	VERNA MATA Notary Public, State of Texas Comm. Expires 08-31-2025 Notary ID 12802984-5						
NOTARY STAMP/SEA	L						
Sworn to and subscribed	before me by <u>William Davrell Hunter</u> this the which, witness my hand and seal of office.	13th	day of	anuary			
Desna met	U Vema Mata		Clark				
Signature of officer administe			Title of officer	administering oath			
OR							
(2) Unsworn Declaration							
My name is	, and my date of birth is			,			
My address is							
		5 S	(zip code)	(country)			
Executed in	County, State of, on the day of (monthing)	n)	, 20 (year)				
	Signature of Candi	date/Office	eholder (Decla	arant)			

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

	19 FILER NAME 20 Filer ID (Ethics Control of the second secon			ion Filers)	
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE				SUBTOTAL AMOUNT	
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	1,950.00	
2.	2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS				
3.	3. SCHEDULE B: PLEDGED CONTRIBUTIONS				
4.	I. SCHEDULE E: LOANS				
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS			696.56	
6.	S. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS				
7.	7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS				
8.	8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD				
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS			2,056.75	
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH				
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS				
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT TO FILER	IONS 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 form. 1 Total pages Schedule A1: 7						
² FILER NAME William D	arrell Hunter		3 Filer ID (Ethics Commission Filers)			
4 Date		(ID#:)	7 Amount of contribution (\$)			
10/09/2021	⁶ Contributor address; City; Seguin, Texas 78155	250.00				
8 Principal occu District Judge		9 Employer (See Instruct State of Texas	tions)			
Date	Full name of contributor out-of-state PAC Ken Brannies	(ID#:)	Amount of contribution (\$)			
10/31/2021	Contributor address; City; New Braunfels, Texas	State; Zip Code	200.00			
Principal occup Retired	pation / Job title (See Instructions)	Employer (See Instruct	ions)			
Date 12/03/2021	Full name of contributor out-of-state PAC (ID#:) Parkview Vet Clinic Contributor address; City; State; Zip Code Seguin, Texas 78155		Amount of contribution (\$)			
Principal occup Doctor	pation / Job title (See Instructions)	Employer (See Instruct Self Employed	ions)			
Date 12/05/2021	R. B. Hunter Contributor address; City;	(ID#:) State; Zip Code	Amount of contribution (\$)			
Principal occup Retired	Plant City, Florida 335	Employer (See Instruct	ions)			
	ATTACH ADDITIONAL COPIES O If contributor is out-of-state PAC, please see Instru					

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				
² FILER NAME William Da	arrell Hunter		3 Filer ID (Ethics Commission Filers)			
4 Date	5 Full name of contributor out-of-state PAR Roy W Richard	C (ID#:)	7 Amount of contribution (\$)			
01/02/2022	⁶ Contributor address; City; Schertz, Texas 78154	1,000.00				
	pation / Job title (See Instructions) e / Bank Owner	9 Employer (See Instruct Self Employed	tions)			
Date	Full name of contributor out-of-state PAG	C (ID#:)	Amount of contribution (\$)			
01/05/2022	Contributor address; City; Seguin, Texas 78155	100.00				
Principal occup Asst Mgr	pation / Job title (See Instructions)	Employer (See Instruct Silver Center of Sec				
Date 01/05/2022	Full name of contributor out-of-state PAG Glenda Layton Contributor address; City; Stockdale, Texas 781	Amount of contribution (\$)				
Principal occup Manager	pation / Job title (See Instructions)	Employer (See Instruct Silver Center of Sec				
Date	Full name of contributor _{out-of-state PAr}	C (ID#:) State; Zip Code	Amount of contribution (\$)			
Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	tions)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.						

. .

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS SCHEDULE F1						
If the requested information is not applicable, DO NOT include this page in the report .						
	EXPENDITURE CA	TEGORIES F	OR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment		Office Over Polling Exp Printing Exp Salaries/Wa	pense ages/Contract Labor	Solicitation/Fundrais Transportation Equip Travel In District Travel Out Of Distric Other (enter a catego	ornent & Related Expense	
1 Total pages Schedule F1:				3 Filer ID (Ethics	s Commission Filers)	
2	William Darrell Hunter					
4 Date 10/26/2021	5 Payee name Seguin Print Shop					
6 Amount (\$)	7 Payee address;		City;	State;	Zip Code	
197.56	410 E Court, Seguin, Texas	s 78155				
8	(a) Category (See Categories listed at the top of	of this schedule)	(b) Description			
PURPOSE OF EXPENDITURE	Advertising Expence		Vinyl Lettering	strips		
	(c) Check if travel outside of Texas. Comp	lete Schedule T.	L Check if Austin,	TX, officeholder living	g expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name		Office sought		Office held	
Date	Payee name					
12/01/2021	KWED					
Amount (\$)	Payee address;		City;	State;	Zip Code	
399.00	PO Box 1600, Seguin, Texa	as 78155				
	Category (See Categories listed at the top of	this schedule)	Description			
PURPOSE Advertising Radio Advertising			ing			
Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					g expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought		Office held	
Date	Payee name					
12/01/2021	KWED					
Amount (\$) 100.00	Payee address; PO Box 1600, Seguin, Texa	as 78155	City;	State;	Zip Code	
	Category (See Categories listed at the top of	this schedule)	Description			
PURPOSE OF EXPENDITURE	Advertising		Radio Advertisir	ng		
	Check if travel outside of Texas. Comp	lete Schedule T.	Check if Austin,	TX, officeholder living	j expense	
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name		Office sought		Office held	
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

. .

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

4

SCHEDULE G

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

EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Event Expense Accounting/Banking Fees Consulting Expense Food/Beverage Expense Contributions/Donations Made By Gift/Awards/Memorials Expense Candidate/Officeholder/Political Committee Legal Services Credit Card Payment The Instruction Guide explains			Office Ove Polling Ex Printing E Salaries/V	Repayment/Reimbursement Solicitation/Fundraising Expense Overhead/Rental Expense Transportation Equipment & Related Expense g Expense Travel In District ng Expense Travel Out Of District es/Wages/Contract Labor Other (enter a category not listed above)		
1 Total pages Schedule G:	2 FILER NAME				3 Filer ID (Ethic	cs Commission Filers)
1	William Da	arrell Hunter				
⁴ Date 12/31/2021	5 Payee name Rayco Sign	Shon				
6 Amount (\$) 2,056.75 Reimbursement from ✓ political contributions intended	Rayco Sign Shop 7 Payee address; City; State; Zip Code South Presa, San Antonio, Texas 78223					
8 PURPOSE OF EXPENDITURE	(a) Category (See Cat Advertising E)	regories listed at the top of this sche XPENSE	edule)	(b) Description Political Signs		
	(C) Check if tra	avel outside of Texas. Complete Sched	dule T.	Check if Austin,	TX, officeholder living	expense
9 Complete <u>QNLY</u> if direct expenditure to benefit C/OH	Candidate / O	fficeholder name		Office sought		Office held
Date	Payee name					
Amount (\$)	Payee address;			City;	State;	Zip Code
Reimbursement from political contributions intended						
PURPOSE OF EXPENDITURE	Category (See Ca	tegories listed at the top of this sch	edule)	Description		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin		, TX, officeholder living	expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/C		fficeholder name		Office sought		Office held
Date	Payee name					
Amount (\$)	Payee address;			City;	State;	Zip Code
Reimbursement from political contributions intended						
PURPOSE OF EXPENDITURE	Category (See Cat	egories listed at the top of this sche	edule)	Description		
	Check if tra	avel outside of Texas. Complete Sched	dule T.	Check if Austin,	in, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / O	fficeholder name		Office sought		Office held
	ATTACH AD	DITIONAL COPIES OF	THIS S	CHEDULE AS NEED	ED	