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 Filer ID (Ethics Co	emmission Filers)	2 Total pages file	ed:	
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR Mrs.	FIRST Teresa		мі D.	OFFICE	USE ONLY	
NAME	NICKNAME	LAST Kiel	***************************************	SUFFIX	Date Received	Co Floations	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1645 Link Road Seguin Texas 78155				JUL 1	Co Elections 1 2022 elived	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (830) 3	PHONE NUMBER 05-3064	EXTENSIO	ON		or Date Postmarked	
6 CAMPAIGN TREASURER NAME	MS/MRS/MR Mr.	FIRST Ken		мі L.	Date Processed	Amount	
	NICKNAME	LAST Kiel		SUFFIX	Date Imaged	^	
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (1645 Link R	NO PO BOX PLEASE); APT / S	uite #; city; Segui	in	state; Texas	ZIP CODE 78155	
(Residence or Business) 8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (210) 240-1506						
9 REPORT TYPE	January 15 30th day before election Runoff 15th day after campaign treasurer appointment (Officeholder Only) X July 15 8th day before election Exceeded Modified Final Report (Attach C/OH - FR)						
10 PERIOD COVERED	Reporting Limit						
11 ELECTION	ELECTION DATE Month Day Year Primary Runoff Other Description 11 03 2022 General Special						
12 OFFICE	OFFICE HELD (if any) Guadalupe County Clerk 13 OFFICE SOUGHT (if known) Guadalupe County Clerk						
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(S)	COMMITTEE TYPE COMMITTEE NAME						
Additional Pages	GENERAL COMMITTEE ADDRESS						
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME						
	50	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 Ter	esa D. Kiel	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)	\$					
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$6865					
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$					
	4. TOTAL POLITICAL EXPENDITURES	\$5231.20					
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	\$ 5788.60					
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS O LAST DAY OF THE REPORTING PERIOD	\$ 1,000,00					
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.							
DeresaKiel							
	Signature of Ca	andidate or Officeholder					
	tion Contractive visionals						
	DI 14 W 01 1						
Please complete either option below:							
(1) Affidavit	MELISSA J DOSS Notary ID #124678312 My Commission Expires September 16, 2023						
NOTARY STAMP/SEAL							
20	before me by Teresa Kiel this the	day of July,					
Michael Notary							
Signature of officer administe	ring oath Printed name of officer administering oath	Title of officer administering oath					
OR							
(2) Unsworn Declaration							
My name is							
My name is, and my date of birth is My address is,,,							
wy addiess is		,					
_	(street) (city) (s	state) (zip code) (country)					
Executed in	County, State of , on the day of (month	, 20					
	(month	(year)					
	Signature of Candid	late/Officeholder (Declarant)					