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) 1102093263	² Total pages filed: 2	
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR MR.	FIRST JOHN	мі D.	OFFICE USE ONLY	
NAME	NICKNAME	LAST	SUFFIX	Date Received	
	NICRINAME	TERRY	SR.	Guadalupe Co Elections	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; 104 THOMAS 78154	S EDISON DR., SC	JAN 16 2024		
Change of Address				Received	
5 CANDIDATE/	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked	
OFFICEHOLDER PHONE	(210)	392-2601		Receipt # Amount \$	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	МІ	Receipt # Amount \$	
	MR.	MARK	C SUFFIX	Date Processed	
	NICKNAME	FRIESENHA		Date Imaged	
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT / S	UITE #: CITY;	STATE; ZIP CODE	
TREASURER ADDRESS			CLE, GARDEN RIDGE,		
(Residence or Business)					
8 CAMPAIGN	AREA CODE	PHONE NUMBER	EXTENSION		
TREASURER PHONE	(210)	861-5537			
9 REPORT TYPE	January 15	30th day before e	Runoff	15th day after campaign treasurer appointment (Officeholder Only)	
	July 15	8th day before ele	Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month	Day Year	Month	Day Year	
	7	/ 1 / 23	тнгоидн 12	/ 31 / 23	
11 ELECTION	ELECTION DA	TE	ELECTION TYPE		
	Month Day	Year Primary	Runoff Other Description		
		/ General	Special		
12 OFFICE	OFFICE HELD (if any)	THE PEACE PC	T. 3 JUSTICE OF T	ME PEACE PCT. 3	
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	COMMITTEE NAME			
Additional Pages	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC	COMMITTEE CAMPAIGN TRE	ASURER NAME		
		COMMITTEE CAMPAIGN TR	EASURER ADDRESS		
	1				
	GO TO PAGE 2				

Forms provided by Texas Ethics Commission

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME JOHN D. TERRY SR		16 Filer ID (Ethics Commission Filers) 1102093263				
17 CONTRIBUTION TOTALS	1. 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)	\$				
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$				
	4. TOTAL POLITICAL EXPENDITURES	\$				
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	ST DAY \$				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS O LAST DAY OF THE REPORTING PERIOD	^{F THE} \$ 482.66				
	swear, or affirm, under penalty of perjury, that the accompanying report is tru	e and correct and includes all information				
re	equired to be reported by me under Title 15, Election Code.					
	Internet	IMM				
	Signature of Candidate or Officeholder					
	1					
Disconcernists sither entire heless						
Please complete either option below:						
cum	EGAN NAVA					
(1) Africayit NO	TARY PUBLIC					
MY CO	TE OF TEXAS 2 MM. EXP. 08/31/27					
NOTARY STAMP /SE						
011	before me by JANN TEXNY this the	Il day of January				
MOONUL	which, witness my hand and seal of office.	CIPIK				
Signature of officer adminis	ering oath Printed name of officer administering oath	Title of officer administering oath				
OR						
(2) Unsworn Declarat	ion					
My name is	, and my date of birth is					
My address is						
Encoded in	(street) (city) (state) (zip code) (country)				
Executed in	County, State of, on the day of(month	n), 20 (year)				
		date/Officeholder (Declarant)				