CANDIDATE / OFFICEHOLDER FORM C/OH CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. ME / MRS MI 3 CANDIDATE / OFFICE USE ONLY **OFFICEHOLDER** NAME Date Received SUFFIX 12/15/2023 - JK 4 CANDIDATE / STATE ZIP CODE **OFFICEHOLDER** MAILING **ADDRESS** Change of Address AREA CODE PHONE NUMBER EXTENSION 5 CANDIDATE/ Date Hand-delivered or Date Postmarked **OFFICEHOLDER** PHONE Amount \$ Receipt # MS / MRS (MR) FIRST 6 CAMPAIGN **TREASURER** Date Processed NAME SUFFIX Date Imaged CAMPAIGN TREASURER **ADDRESS** (Residence or Business) AREA CODE PHONE NUMBER 8 CAMPAIGN EXTENSION TREASURER PHONE 9 REPORT TYPE 30th day before election Runoff 15th day after campaign treasurer appointment (Officeholder Only) **Exceeded Modified** July 15 8th day before election Final Report (Attach C/OH - FR) Reporting Limit 10 PERIOD Month COVERED 2023 THROUGH 11 ELECTION **ELECTION DATE ELECTION TYPE** Primary Runoff Other Description General Special OFFICE HELD (if any) 12 OFFICE 13 OFFICE SOUGHT (if known) 14 NOTICE FROM 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. POLITICAL COMMITTEE(S) COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER 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)		\$
	2. TOTAL POLITICAL CONTRI (OTHER THAN PLEDGES, LOA	BUTIONS NS, OR GUARANTEES OF LOANS)	s\$ 500.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICA	AL EXPENDITURE.	\$ 689.12
	4. TOTAL POLITICAL EXPEND	DITURES	\$ 689.12
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBU OF REPORTING PERIOD	TIONS MAINTAINED AS OF THE LAS	TDAY \$
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT C LAST DAY OF THE REPORTING	F ALL OUTSTANDING LOANS AS OF G PERIOD	THE \$
	swear, or affirm, under penalty of perjury,		and correct and includes all information
"	rquired to be reported by the diluer file 13, i	D .	2
		tinda	punio
		Mila	Cerano
		Signature of Car	ndidate or Officeholder
	Please comp	lete either option below	r:
(1) Affidavit	JENNIFER KIRKLAND MY COMMISSION EXPIRES 02/17/2025 NOTARY ID: 126805359		
NOTARY STAMP/SE	N		
	1:1-		14h x
Swom to and subscribe	before me by MA_PNOV	this the	day of Decimple.
	which, witness my hand and seal of office.		15th day of December
Junily Mi	ruland Jennife	Kirkland	notary Public
Signature of officer administ		ficer administering oath	Title of officer administering oath
		OR	
(2) Unsworn Declarat	ion		
My name is		, and my date of birth is	
My address is			
	(street)	(city) (s	tate) (zip code) (country)
Executed in	County, State of	, on the day of	, 20
		(month) (year)
		Signature of Candid	ate/Officeholder (Declarant)
		orginature or Cariolo	die emocrioide (Decidiant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	FILER NAME	20 Filer ID (Ethics Commission Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRI	\$ 500.00°
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POL	ITICAL CONTRIBUTIONS \$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 6
4.	SCHEDULE E: LOANS	\$ -0-
5.	SCHEDULE F1: POLITICAL EXPENDITURES M	ADE FROM POLITICAL CONTRIBUTIONS \$
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIO	NS \$ 0
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS	MADE FROM POLITICAL CONTRIBUTIONS \$
8.	SCHEDULE F4: EXPENDITURES MADE BY CR	EDIT CARD \$ -6
9.	SCHEDULE G: POLITICAL EXPENDITURES MA	DE FROM PERSONAL FUNDS \$
10.	SCHEDULE H: PAYMENT MADE FROM POLITIC	CAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES	MADE FROM POLITICAL CONTRIBUTIONS \$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, R TO FILER	EFUNDS, AND CONTRIBUTIONS RETURNED \$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

_			1 Total same Schodule A1:
	he Instruction Guide explains how to con	mplete this form.	1 Total pages Schedule A1:
FILER NAM	Enlinda Ten	vorio	3 Filer ID (Ethics Commission Filers)
Date	5 Full name of contributor William B	city: State: Zip Code	7 Amount of contribution (\$) 4500.
Principal of	ccupation / Job title (See Instructions)	9 Employer (See Inst	tructions)
Date	Full name of contributor out-of-state PAC (ID#:)) Amount of contribution (\$)
	Contributor address; C	City; State; Zip Code	
Principal oc	cupation / Job title (See Instructions)	Employer (See Inst	tructions)
Date	Full name of contributor out-of-state PAC (ID#:		Amount of contribution (\$)
	Contributor address; C	city; State; Zip Code	
Principal oc	cupation / Job title (See Instructions)	Employer (See Inst	tructions)
Date	Full name of contributor out-of-state PAC (ID#)		
	Contributor address; C	ity; State; Zip Code	
	cupation / Job title (See Instructions)	Employer (See Inst	tructions)

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 CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Vages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	2 FILER NAME ENINGATEN	SORIO 3	Filer ID (Ethics Commission Filers)		
1 Date 2023	Moonlight Gratic	Buda	TR 28640		
6 Amolint (\$) \$689.12	603 W. Goforth	Buda	TX 7861		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	Push C			
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	TX, officeholder living expense Office held		
Date	Payee name				
Amount (\$)	Payee address;	City;	State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description			
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct Candidate / Officeholder name expenditure to benefit C/OH		Office sought	Office held		
Date	Payee name				
Amount (\$)	Payee address;	City;	State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description			
	Check if travel outside of Texas, Complete Schedule T.	Check if Austin, TX, officeholder living expense			
	Candidate / Officeholder name	Office sought	Office held		

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

The Instruction Guide explains how to complete this form. Complete only if "Report Type" on page 1 is marked "Final Report" ↔ 1 C/OH NAME 2 Filer ID (Ethics Commission Filers) 3 SIGNATURE I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file. Signature of Candidate / Officeholder FILER WHO IS NOT AN OFFICEHOLDER .. Complete A & B below only if you are not an officeholder. .. CAMPAIGN FUNDS Check only one: I do not have unexpended contributions or unexpended interest or income earned from political contributions. I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204. **ASSETS** only one: I do not retain assets purchased with political contributions or interest or other income from political contributions. I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204. OFFICEHOLDER .. Complete this section only if you are an officeholder .. I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions. Signature of Officeholder