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. MS / MRS / MR FIRST 3 CANDIDATE / МΙ OFFICE USE ONLY **OFFICEHOLDER** Mrs Heidi Ε NAME Date Received NICKNAME LAST SUFFIX Easley 4 CANDIDATE / ADDRESS / PO BOX; APT / SUITE #: STATE: ZIP CODE **OFFICEHOLDER** MAILING PO Box 667, Victoria, TX 77902 **ADDRESS** Change of Address 5 CANDIDATE/ AREA CODE PHONE NUMBER **EXTENSION** Date Hand-delivered or Date Postmarked **OFFICEHOLDER** (361 676-4559 PHONE Receipt # Amount \$ MS / MRS / MR FIRST CAMPAIGN MΙ **TREASURER** Mrs. Lisa Date Processed NAME NICKNAME LAST Date Imaged Kristynik STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CAMPAIGN STATE: ZIP CODE TREASURER ADDRESS 307 Kingwood Forest Dr., Victoria, TX 77904 (Residence or Business) 8 CAMPAIGN AREA CODE PHONE NUMBER **EXTENSION** TREASURER PHONE *(* 361 578-8206 9 REPORT TYPE 15th day after campaign 30th day before election January 15 Runoff treasurer appointment (Officeholder Only) **Exceeded Modified** July 15 Final Report (Attach C/OH - FR) 8th day before election Reporting Limit 10 PERIOD Day COVERED 15 23 10 22 10 THROUGH 11 ELECTION **ELECTION DATE** ELECTION TYPE Primary Runoff Month Day Year Description General Special OFFICE HELD (if any) 12 OFFICE 13 OFFICE SOUGHT (if known) Victoria County Clerk 14 NOTICE FROM THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDER'S 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 Mrs. Heidi E. Easley		16 Filer ID (Ethics Commission Filers)	
17 CONTRIBUTION TOTALS EXPENDITURE TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	N :	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 0.00
	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.		\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	,	\$ 0.00
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LA- OF REPORTING PERIOD	ST DAY	\$ 28.36
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS O LAST DAY OF THE REPORTING PERIOD	FTHE	\$ 8,812.00
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.			
	,		
Signature of Candidate or Officeholder			
Please complete either option below:			
(1) Affidavit			
NOTARY STAMP/SEA	L		
Sworn to and subscribed	before me by this the		day of,
20, to certify which, witness my hand and seal of office.			
Signature of officer administe	ring oath Printed name of officer administering oath	Ti	itle of officer administering oath
OR			
(2) Unsworn Declaration			
My name is	and my date of birth is Teming Prairie Rd . Victoria . T	<u> 4-1</u>	2-1969 1905 USA
My address is	(street) (city) (state) (zi	p code) (country)
Executed in	(month	holle	20 23 (year)
	\$ignature of Candi	uate/Officeh	older (Declarant)