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 Commission Filers)	2 Total pages fi	led:	
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR  Mr.  NICKNAME  Joeu	Asencian Buddiaci	J. SUFFIX	Date Received	USE ONLY  A.D  OAK COUNTY, TEX	. 20 <u>2</u>
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  Change of Address	ADDRESS / PO BOX	APT / SUITE #; C	orge West TX 78022	DONNA M. VA BY Rebecc AT 10:11	NWAY CLERK, COI A Muney O'CLOCK	MTY COL DEPL
5 CANDIDATE/ OFFICEHOLDER PHONE	(361 )	PHONE NUMBER 449-6798	EXTENSION	Date Hand-delivered	d or Date Postmarked	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR  MICKNAME	Asencian D Asst	J.	Date Processed  Date Imaged	Allount	
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (	NO PO BOX PLEASE); APT / SI	JITE #, CITY;	STATE;	ZIP CODE	
(Residence or Business)	3332 Hu	y 281	George West	TX	18022	
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER 449-6798	EXTENSION			
9 REPORT TYPE	January 15	30th day before el	lection Runoff		fter campaign ppointment er Only)	
	July 15	8th day before elec	ction Exceeded Modified Reporting Limit	Final Repo	rt (Attach C/OH - FR)	
10 PERIOD COVERED	Month (	Day Year / 25 / 24	THROUGH 06	Day Year / 30 / 24	′	
11 ELECTION	Month Day	Year Primary  General	Runoff Other Description  Special			
12 OFFICE	Constable	Pct #4	13 OFFICE SOUGHT (if known	44		
14 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFICE CONSENT. CANDIDATES	EHOLDER. THESE EXPENDITURES AND OFFICEHOLDERS ARE REQUIR	ACCEPTED OR POLITICAL EXPENDITURES M MAY HAVE BEEN MADE WITHOUT THE CAN RED TO REPORT THIS INFORMATION ONLY IF T	DIDATE'S OR OFFICEHOL	DER'S KNOWLEDGE OR	
	COMMITTEE TYPE	COMMITTEE NAME				
Additional Pages	GENERAL SPECIFIC	COMMITTEE ADDRESS  COMMITTEE CAMPAIGN TREA	ASURER NAME			
	SECURIO	COMMITTEE CAMPAIGN TRE				
		GO TO	PAGE 2			

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

#### FORM C/OH COVER SHEET PG 2

15 C/OH NAME ASENCION	J. Budrisuez II (Joey)	16 Filer ID (Ethics Commission Filers)		
17 CONTRIBUTION TOTALS	CONTRIBUTION 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN			
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ -0-		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ -0-		
	4. TOTAL POLITICAL EXPENDITURES	\$ -O-		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST OF REPORTING PERIOD	T DAY \$		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	* -O-		
	swear, or affirm, under penalty of perjury, that the accompanying report is true quired to be reported by me under Title 15, Election Code.	and correct and includes all information		
	1 1 1			
	(a) · // // //	Vil		
		ysse		
	Signature of Can	didate or Officeholder		
Ê				
	Please complete either option below	:		
	TO ANN DURBY			
(1) Affidavit	JO ANN BUSBY NOTARY PUBLIC			
(1) XIII W	STATE OF TEXAS			
(A) E	ID # 7530095 F132 My Comm. Expires 06-27-2025	. 0		
NOTARY STAMPYSEA	Wy Collina Expires 00-27-2020	9th Oulu		
Sworn to and subscribed	before me by USENCION J. Rodrayez II this the	9 day of July		
20 dt , to certify	which, witness my hand and seal of office.	11 01		
Jolenn Bl	What JOHNO KUSAI N	otary Public		
Signature of officer administe	ring oath Printed name of officer administering oath	Title of officer administering oath		
	OR			
(2) Unsworn Declaration				
(2) Onsworn Declaration	on			
My name is	, and my date of birth is _			
My address is				
		ate) (zip code) (country)		
Executed in	County, State of, on the day of			
Excedited III	county, state of, of the day of (month)	, 20 (year)		
	Signature of Candida	ite/Officeholder (Declarant)		

## SUBTOTALS - C/OH

#### FORM C/OH COVER SHEET PG 3

19	FILER NAME  20 Filer ID (Ethics Con	Commission Filers)	
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT	
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ -0-	
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ -0-	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ -0-	
4.	SCHEDULE E: LOANS	\$ -0-	
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ -0-	
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ -0-	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ -0-	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ -0-	
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ -0-	
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	s -O-	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ ~0-	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ -0-	

# **CORRECTION/AMENDMENT AFFIDAVIT** FOR CANDIDATE/OFFICEHOLDER

### FORM COR-C/OH

1 Filer ID (Ethics Comm	nission Filers)	2 Total pages filed:		co OFFICE	USEONIY
				ILED STUA	A.D. 20
3 CANDIDATE/	MS/MRS/MR FIRST			Committee of the Commit	AN COUNTY, TEXAS
OFFICEHOLDER NAME	Mr. Asencian		J.	ONNA M. VAI	NWAY CLERK, COUNTY
TO WILL	NICKNAME LAST		SUFFIX	1 Kireco	17 Junor D
	July Kodisue	1	II A	1 8:41	O'CLOCK_an
4 ORIGINAL REPORT		noff	Final report Da	ate Hand-delivered o	The same of the sa
TYPE		ceeded modified reporting			
	30th day before election		Other (specify)	eceipt #	Amount \$
		pointment (officeholder only)		ate Processed	
5 ORIGINAL PERIOD	Month Day Year	Month	Day Year		
COVERED	01/01/24	HROUGH 06/	30/24	ate Imaged	
6 EXPLANATION OF CO	PRECTION				
			10		
To correct H	ne Original Period Cou	ered dates, a	nd amendelect	ion date t	November 5th
7 SIGNATURE I SWE	ear, or affirm, under penalty of	f perjury, that this co	orrected report is t	rue and corre	ect.
Chec	ck ONLY if applicable:				
	I reports: I swear, or affirm, that o misrepre-sent the information			n and without	an intent to
Other report	ts: I swear, or affirm, that I am fi	ling this corrected rep	oort not later than the	e 14th busines	s day after the
☐ date I learne	ed that the report as originally file the report as originally filed was	ed is inaccurate or inc	complete. I swear, o	or affirm, that a	ny error or
OTTIOGICTY III		asmun	011. lan-m		
NING PARTE	SHEILA LYNN KERR		Signature of Candidate/C	Officeholder	
No.	otary Public, State of Texas comm. Expires 06-10-2028				
THE OF THE	Notary ID 6556602 Please C	omplete either o	ption below:		
(1) Affidavit					
NOTARY STAMP/SEA	AL				
Sworn to and subscribed	d before me by Asencion	J. Rodrique	this the	day of	uly .
24				and # 25	
20, to certify	y which, witness my hand and seal of of	tice.		Notary	
Signature of officer administ	ering oath Printed nam	e of officer administering of	ath		administering oath
gradule of officer administ	rinted name			, all of officer	The state of the s
	EVERY STATE OF THE	OR			
(2) Unsworn Declarat	ion				
My name is		, and m	y date of birth is		·
My address is	4.			·	
	(street)		(city) (state)	(zip code)	(country)
Executed in	County, State of	, on the	day of (month)	, 20 (year)	
			gnature of Candidate/O		
2 = 2			X		
Remember To Atta	ach Any Part Of The Campaign	Finance Report For	m Needed To Repo	ort And Explai	n Corrections