		v to complete this form.		s Commission Filers)	2 Total pages	filed: 3
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST BRIAN		МІ		E USE ONLY
NAME	NICKNAME	LAST CONNOL	LY	SUFFIX	Date Received	
4 CANDIDATE/ OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX 20706 Sea F Katy, TX 774	Pine Dr	CITY; STATE	; ZIP CODE	Đị	3
Change of Address						
5 CANDIDATE/ OFFICEHOLDER PHONE	(832 )	722-4058	EXTEN	ISION		d or Date Postmarked
6 CAMPAIGN TREASURER	MS / MRS / MR MR	FIRST BRIAN		МІ	Receipt #	Amount \$
NAME	NICKNAME	<sup>LAST</sup> CONNOLL	_Y	SUFFIX	Date Imaged	
7 CAMPAIGN TREASURER		(NO PO BOX PLEASE); APT / S		<b>TY</b> ;	STATE;	ZIP CODE
ADDRESS (Residence or Business)	20706 Sea F Katy, TX 774	Pine Dr Type text he 450	re			
CAMPAIGN TREASURER	AREA CODE	PHONE NUMBER	EXTEN	SION		
PHONE	( 832 )	722-4058				
REPORT TYPE	January 15	30th day before e	election R	lunoff		ifter campaign appointment ler Only)
	July 15	8th day before ele	SCHOII I	xceeded Modified eporting Limit		ort (Attach C/OH - FR)
0 PERIOD						
COVERED	Month	Day Year		Month	Day Yea	
	Month 01	Day Year 701 / 2024	THROUGH	Month	Day Yea	
COVERED	01 /	01 2024		07/		
COVERED	01 /	01 / 2024	THROUGH Runoff Special	ELECTION TYPE  Other Description		4
COVERED  11 ELECTION	01  ELECTION DA  Month Day  05 04  OFFICE HELD (if any)	01	Runoff Special	ELECTION TYPE  Cother Description Director, Ma	01 202	trict
COVERED  1 ELECTION  2 OFFICE	O1  ELECTION DA  Month Day  O5 04  OFFICE HELD (if any)  Director, Mas  THIS BOX IS FOR NOTIC THE CANDIDATE / OFFICE	O1 2024  NTE  Year  Primary  2024  General  Son Creek Utility DIsceed of Political Contributions Check Utility DIsceed on the political Contribution Check Utility DIsceed on the political Contribution Check Utility DIsceed on the political Contribution Check Utility DIsceed on the political Chec	Runoff Special  13 OFFICE Director  ACCEPTED OR POLITICA S MAY HAVE BEEN MADE	ELECTION TYPE  X Other Description Director, Ma  E SOUGHT (if known) T, Mason Cre  AL EXPENDITURES MA E WITHOUT THE CAND	01 202	trict  rict  MMITTEES TO SUPPOR
COVERED  11 ELECTION  2 OFFICE  4 NOTICE FROM	O1  ELECTION DA  Month Day  O5 04  OFFICE HELD (if any)  Director, Mas  THIS BOX IS FOR NOTIC THE CANDIDATE / OFFICE	O1 2024  NTE  Year Primary  2024 General  Son Creek Utility DIS  CE OF POLITICAL CONTRIBUTIONS	Runoff Special  13 OFFICE Director  ACCEPTED OR POLITICA S MAY HAVE BEEN MADE	ELECTION TYPE  X Other Description Director, Ma  E SOUGHT (if known) T, Mason Cre  AL EXPENDITURES MA E WITHOUT THE CAND	01 202	trict  rict  MMITTEES TO SUPPOR LDER'S KNOWLEDGE O
COVERED  11 ELECTION  12 OFFICE  4 NOTICE FROM POLITICAL	DI ELECTION DA  Month Day  05 04  OFFICE HELD (if any)  Director, Mas  THIS BOX IS FOR NOTIC THE CANDIDATE / OFFIC CONSENT. CANDIDATES	O1 2024  NTE  Year  Primary  2024  General  Son Creek Utility DIs  CE OF POLITICAL CONTRIBUTIONS CEHOLDER. THESE EXPENDITURE'S S AND OFFICEHOLDERS ARE REQUI	Runoff Special  13 OFFICE Director  ACCEPTED OR POLITICA S MAY HAVE BEEN MADE	ELECTION TYPE  X Other Description Director, Ma  E SOUGHT (if known) T, Mason Cre  AL EXPENDITURES MA E WITHOUT THE CAND	01 202	trict  rict  MMITTEES TO SUPPOR LDER'S KNOWLEDGE O
COVERED  11 ELECTION  12 OFFICE  14 NOTICE FROM POLITICAL COMMITTEE(S)	O1  ELECTION DA  Month Day  05 04  OFFICE HELD (if any)  Director, Mas  THIS BOX IS FOR NOTITE CANDIDATE / OFFICE ONSENT. CANDIDATES  COMMITTEE TYPE	O1 2024  ATE  Year  Primary  2024  General  SON Creek Utility DIS  CE OF POLITICAL CONTRIBUTIONS CEHOLOER. THESE EXPENDITURES S AND OFFICEHOLDERS ARE REQUI  COMMITTEE NAME	Runoff Special  13 OFFICE Director  ACCEPTED OR POLITICA S MAY HAVE BEEN MADE RED TO REPORT THIS INF	ELECTION TYPE  X Other Description Director, Ma  E SOUGHT (if known) T, Mason Cre  AL EXPENDITURES MA E WITHOUT THE CAND	01 202	trict  rict  MMITTEES TO SUPPOR LDER'S KNOWLEDGE O
COVERED  11 ELECTION  12 OFFICE  14 NOTICE FROM POLITICAL COMMITTEE(S)	O1  ELECTION DA  Month Day  05 04  OFFICE HELD (if any)  Director, Mas  THIS BOX IS FOR NOTITHE CANDIDATE / OFFICE ONSENT. CANDIDATES  COMMITTEE TYPE  GENERAL	O1 2024  ATE  Year Primary  2024 General  SON Creek Utility DIS  CE OF POLITICAL CONTRIBUTIONS CEHOLDER. THESE EXPENDITURES S AND OFFICEHOLDERS ARE REQUI	Runoff Special  13 OFFICE DIRECTOR  ACCEPTED OR POLITICA S MAY HAVE BEEN MADE RED TO REPORT THIS INF	ELECTION TYPE  X Other Description Director, Ma  E SOUGHT (if known) T, Mason Cre  AL EXPENDITURES MA E WITHOUT THE CAND	01 202	trict  rict  MMITTEES TO SUPPOR LDER'S KNOWLEDGE O

15 C/OH NAME BRIAN C. C	ONNOLLY		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS			* <sub>0</sub>
	2. TOTAL POLITICAL CONTR (OTHER THAN PLEDGES, LO	RIBUTIONS DANS, OR GUARANTEES OF LOANS)	\$ <sub>0</sub>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITIC	AL EXPENDITURE.	\$ <sub>0</sub>
	4. TOTAL POLITICAL EXPEN	DITURES	\$ <sub>0</sub>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTION OF REPORTING PERIOD	JTIONS MAINTAINED AS OF THE LAS	\$ 0
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT ( LAST DAY OF THE REPORTI	OF ALL OUTSTANDING LOANS AS OF NG PERIOD	* THE \$ 0
	wear, or affirm, under penalty of perjury, uired to be reported by me under Title 15,		e and correct and includes all information
		x/MC	
		Signature of Car	ndidate or Officeholder
	Please comp	plete either option below	
(1) Affidavit			
(1) Alliauvic			
NOTARY STAMP/SEAL			
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 administer	ing oath Printed name of of	ficer administering oath	Title of officer administering oath
		OR	
(2) Unavers De de satis			
(2) Unsworn Declaration	on. Taling the state of the second of the state of		
My name is BRIAN C.		and my date of birth is	5/29/1959
My address is	2070656	a rine De, Waty, 1	X, 774, 0 USA
	(street)	(city) (st	tate) (zip code) (country)
Executed in Harris	County, State of Texas	, on the $12$ day of $29$	( <del>)</del> , 20 <u>2                                </u>
		(month)	(year)
		√Signature of Candida	ate/Officeholder (Declarant)

# CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

		The Instruction Guide explains how	
		•• Complete only if "Report Type" on page	3 1 is marked "Final Report" ••
			2 Filer ID (Ethics Commission Filers)
	BF	RIAN C. CONNOLLY	
3	SIGN/	ATURE	
	I do no	t expect any further political contributions or political expenditures	s in connection with my candidacy. I understand that
		ating a report as a final report terminates my campaign treasurer	
		ign contributions or make any campaign expenditures without a c	and the second s
			1016 100
			Signature of Candidate / Officeholder
			Signature of Candidate / Chicerolica
	FII FR	WHO IS NOT AN OFFICEHOLDER	
•		nplete A & B below <i>only</i> if you are not an officeholder. ••	
	•	CARRAIGNI FI INIDO	
	Α.	CAMPAIGN FUNDS	
	Chec	k only one:	
		I do not have unexpended contributions or unexpended interest	t or income earned from political contributions.
	ب ا	I have unexpended contributions or unexpended interest or incomay not convert unexpended political contributions or unexpended	
		personal use. I also understand that I must file an annual re	
		unexpended contributions or unexpended interest or income ea	
		filing this final report. Further, I understand that I must dispose interest or income earned on political contributions in accordance.	
		interest of income earned on political contributions in accordant	te with the requirements of Election Code, § 204.204.
	B.	ASSETS	
	Chec	k only one:	
		I do not retain assets purchased with political contributions or in	iterest or other income from political contributions.
	Ш	I do retain assets purchased with political contributions or intere	the contract of the contract o
		that I may not convert assets purchased with political contribution personal use. I also understand that I must dispose of assets p	and the state of the
		requirements of Election Code, § 254.204.	uroritadea mar perindar commissatione in accounting
			Signature of Candidate
		EHOLDER	
	•• Com	plete this section <i>only</i> if you are an officeholder ••	
	$\mathbf{X}$	I am aware that I remain subject to filing requirements applicable to	an officeholder who does not have a campaign treasurer on
	7	file. I am also aware that I will be required to file reports of unexpe	ended contributions if, after filing the last required report as
		an officeholder, I retain political contributions, interest or other inco	
		political contributions or interest or other income from political co	
		political contributions or interest or other income from political co	

			7		T	
The C/OH Instruction (	Guide explains how	to complete this form.	1 Filer ID (E	thics Commission Filers)	<b>2</b> Total pages fi	led: 3
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI MR FREDERICK J				OFFICE	USEONLY
NAME	NICKNAME	LAST CASTELLA	ANO	SUFFIX	Date Received	4
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX	apt / suite # c		ATE: ZIP CODE	Ç	3
Change of Address					The state of the second	A COMPANIE AND
5 CANDIDATE/ OFFICEHOLDER PHONE	( 803 )	394- <del>6224</del> 62 <sup>1</sup>		TENSION	Date Hand-delivered	or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS/MRS/MR MR	FIRST FREDERIC	K	J	Date Processed	
( ) ( ) ( )	NICKNAME	ĈĂSTELLA	NO	SUFFIX	Date Imaged	
7 CAMPAIGN TREASURER	STREET ADDRESS	(NO PO BOX PLEASE); APT / SL	NTE #;	CITY;	STATE;	ZIP CODE
ADDRESS	1135 Shi	llingtoñyKaty;⊧∓X	77450			
(Residence or Business)						
8 CAMPAIGN TREASURER PHONE	( 803 )	394-6224 624		ENSION		
9 REPORT TYPE	January 15	30th day before ele	ection	Runoff	15th day af treasurer ap (Officeholde	
	July 15	8th day before elec	tion	Exceeded Modified Reporting Limit	X Final Repor	t (Attach C/OH - FR)
10 PERIOD COVERED	Month	Day Year		Month	Day Year	
	01	01 / 2024	THROUGH	07/	01 / 2024	
11 ELECTION	Month Day	Year Primary	Runoff Special	ELECTION TYPE  X Other Description Director, Ma	ason Creek Utility Distr	rict
12 OFFICE	OFFICE HELD (if any)		<b>13</b> OF	FICE SOUGHT (if known)	)	
	Director, Mas	son Creek Utility DIstr	rict Direct	tor, Mason Cre	ek Utility Distr	ict
14 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFICE	CE OF POLITICAL CONTRIBUTIONS A CEHOLDER. <i>THESE EXPENDITURES</i> S AND OFFICEHOLDERS ARE REQUIRI	MAY HAVE BEEN M	ADE WITHOUT THE CAND	IDATE'S OR OFFICEHOL	DER'S KNOWLEDGE OR
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME				
Additional Pages	GENERAL	COMMITTEE ADDRESS				
	SPECIFIC	COMMITTEE CAMPAIGN TREA	SURER NAME			
	·	COMMITTEE CAMPAIGN TREA	ASURER ADDRES	SS .		
	·	GO TO F	PAGE 2			

15 C/OH NAME			16 Filer ID (Ethics Commission Filers)
FREDERIC	CK J. CASTELLANO		
17 CONTRIBUTION TOTALS		TICAL CONTRIBUTIONS (OTHER THA JARANTEES OF LOANS, OR LECTRONICALLY)	» \$ <sub>0</sub>
	2. TOTAL POLITICAL CONT (OTHER THAN PLEDGES, L	TRIBUTIONS LOANS, OR GUARANTEES OF LOANS	° ° 0
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLIT	FICAL EXPENDITURE.	<b>\$</b> <sub>0</sub>
	4. TOTAL POLITICAL EXPE	NDITURES	\$ <sub>0</sub>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRII OF REPORTING PERIOD	BUTIONS MAINTAINED AS OF THE LA	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT LAST DAY OF THE REPORT	T OF ALL OUTSTANDING LOANS AS O TING PERIOD	
	swear, or affirm, under penalty of perjur equired to be reported by me under Title 15	5, Election Code.	ie and correct and includes all information
		x X X X X X X X X X X X X X X X X X X X	Man
		Signature of Ca	andidate or Officeholder
	Please con	nplete either option below	v:
TAN BURE E. BE			
(1) Affidavit			
NOTARY STAMP/SEA	AL		
		41.5.41.	
Sworn to and subscribed			, day of,
20, to certify	which, witness my hand and seal of office		
Signature of officer administe	ering oath Printed name of	officer administering oath	Title of officer administering oath
		OR	
(2) Unsworn Declarati	ion		
Mv name is FREDER	ICK J. CASTELLANO	, and my date of birth is	4/14/1966
My address is	1135 Shille	900000000000000000000000000000000000000	aty TX USA
My auditor to	(street)	J. J	state) (zip code) (country)
Executed in Harris	County, State of Texas	, on the <u>12</u> day of <u>Jwl</u>	20 24 .
LACOULOU		month (month	
		Signature of Candin	Land (Declarant)
		Signature of Carion	date/Officeholder (Declarant)

# 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" ••
		2 Filer ID (Ethics Commission Filers)
	FF	REDERICK J. CASTELLANO
3	SIGNA	ATURE
	l da mai	t average and from a litical contributions or natitively average in connection with any conditions. I understond that
		t expect any further political contributions or political expenditures in connection with my candidacy. I understand that attacting a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any
		ign contributions or make any campaign expenditures without a campaign treasurer appointment on file.
		In the second
		Single of Conditions of Conditions
		Signature of Candidate / Officeholder
4		WHO IS NOT AN OFFICEHOLDER  uplete A & B below <i>only</i> if you are not an officeholder. ••
	A.	CAMPAIGN FUNDS
	Chec	k 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 t
		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.
	B.	ASSETS
	Choc	k only one:
	Cilec	I do not retain assets purchased with political contributions or interest or other income from political contributions.
		To not retain assets purchased with political contributions of interest of 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.
		requirements of Election Code, § 204.204.
		Signature of Candidate
		orginatore of candidate
5	OFFICI	EHOLDER
_		plete this section <i>only</i> 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
	X	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.
		XVolade Dans
		Signature of Officeholder

The C/OH Instruction C	Guide explains how	to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 3		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR MR	first JOHN	мі <b>Н</b>	OFFICE USE ONLY		
IVAIME	NICKNAME	LAST CAMERON	SUFFIX	Date Received		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX	den Katy, TX 774	STATE, ZIP CODE	35		
Change of Address			полити в при			
5 CANDIDATE/ OFFICEHOLDER PHONE	( 713 )	857-2955	EXTENSION	Date Hand-delivered or Date Postmarked  Receipt #   Amount \$		
6 CAMPAIGN TREASURER	MS / MRS / MR  MR	FIRST <b>JOHN</b>	мı H	Date Processed		
NAME	NICKNAME	ĈĂMERON	SUFFIX	Date Imaged		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)		(NO PO BOX PLEASE); APT / SU	200 00000	STATE; ZIP CODE		
	AREA CODE	PHONE NUMBER	EXTENSION			
8 CAMPAIGN TREASURER PHONE	(713)	857-2955	EATENSION			
9 REPORT TYPE	January 15	30th day before ele	ection Runoff	15th day after campaign treasurer appointment (Officeholder Only)		
	July 15	8th day before elec	etion Exceeded Modified Reporting Limit	X Final Report (Attach C/OH - FR)		
10 PERIOD	Month	Day Year	Month	Day Year		
COVERED	01 /	01 / 2024	THROUGH 07/	01 / 2024		
11 ELECTION	Month Day  05 04	Year Primary	Runoff X Other Description  Special Director, M	ason Creek Utility District		
	/ /					
12 OFFICE	OFFICE HELD (if any)  Director, Mas	son Creek Utility DIst	rict Director, Mason Cre			
14 NOTICE FROM POLITICAL	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 TREA	SURER NAME			
		COMMITTEE CAMPAIGN TRE	ASURER ADDRESS			
		GO TO F	PAGE 2			

15 C/OH NAME JOHN H. C/	AMFRON				16 Filer ID (I	Ethics Commis	ssion Filers)
17 CONTRIBUTION TOTALS	1. TOTAL U		CAL CONTRIBUTIONS RANTEES OF LOANS, (ECTRONICALLY)	• .	\$ (		
	the second secon	POLITICAL CONTR	RIBUTIONS DANS, OR GUARANTEE	S OF LOANS)	\$ (		
EXPENDITURE TOTALS	3. TOTAL U	NITEMIZED POLITIC	CAL EXPENDITURE.		\$ <sub>C</sub>		
	4. TOTAL F	POLITICAL EXPEN	DITURES		\$ C		
CONTRIBUTION BALANCE		OLITICAL CONTRIBU ORTING PERIOD	JTIONS MAINTAINED A	S OF THE LAS			
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT (	OF ALL OUTSTANDING NG PERIOD	LOANS AS OF			
	wear, or affirm, unde quired to be reported b		that the accompanying	g report is true	and correct a	and includes	all information
			x Joh	n H.C	amero		
			√ Sig	gnature of Cai	ndidate or Off	iceholder	
		Please com	plete either opt	ion below	<b>7</b>		
(1) Affidavit							
NOTARY STAMP/SEAL							
Sworn to and subscribed	before me by		a de la companya de l	this the _	day	of	,
20, to certify	which, witness my han	d and seal of office.					
Signature of officer administe	ring oath	Printed name of of	ficer administering oath		Title	of officer admir	nistering oath
			OR				
(2) Unsworn Declaration	on						
My name is JOHN H. 0	CAMERON		, and my d	ate of birth is	mirch	9 <sup>H</sup> 19	48 .
My address is /602	HOUEDEND	rive	YTAN,	,T	K 77745	.US <u>ر</u> ن-	A .
Harria	(stree	•	(city	۵ موسه	tate) (zip co	ode) (co	untry)
Executed in Harris	County, Sta	<sub>ite of</sub> Texas	, on the/ d	ay of <u>&amp; a./</u> (month)	y, 20 <u></u> ,	(year)	
			- Yot	MAD H.C	smeur		
			Bignat	ture of Candida	ate/Officenoide	ii (Deciarant)	

# 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" ••
-		2 Filer ID (Ethics Commission Filers)
	JC	OHN H. CAMERON
3	SIGN/	ATURE
	l do no	ot expect any further political contributions or political expenditures in connection with my candidacy. I understand that
	designa	nating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any
	campa	aign contributions or make any campaign expenditures without a campaign treasurer appointment on file.
		Signature of Candidate / Officeholder
		Signature of Candidate / Officeholder
4		RWHO IS NOT AN OFFICEHOLDER mplete A & B below only if you are not an officeholder. ••
	Α.	CAMPAIGN FUNDS
	Cher	ck only one:
	<u> </u>	I do not have unexpended contributions or unexpended interest or income earned from political contributions.
	<b></b>	Tuo not have unexpended contributions of unexpended interest of meeting carried new parties.
		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.
	В.	ASSETS
	Chec	ck 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.
		requirements of Election Code, 3 204.204.
		Signature of Candidate
5		EHOLDER
	•• Com	nplete this section <i>only</i> if you are an officeholder ••
	X	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, or assets purchased with
		John Carner
		Signature of Officeholder