CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	iuide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages file	ed:
3 CANDIDATE / OFFICEHOLDER	MS/MRS (MR) FIRST	R	OFFICE	USE ONLY
NAME	NICKNAME LAST	SUFFIX	Date Received	
	WOERNER		REC	EIVED
4 CANDIDATE / OFFICEHOLDER MAILING	P.O.BOX 1718	CITY; STATE; ZIP CODE		2 0 2024
ADDRESS Change of Address	MARblE Falls, T	× 78654	BURNETCO	DELECTIONS
5 CANDIDATE/ OFFICEHOLDER	AREA CODE PHONE NUMBER	EXTENSION	Date Hand-delivered	or Date Postmarked
PHONE	(830) 637 1978	М .	Receipt #	Amount \$
6 CAMPAIGN TREASURER	MS/MRS/MR) FIRST	R	Date Processed	
NAME	NICKNAME LAST ,	SUFFIX	Date Imaged	
	WOERNER		Date imaged	
7 CAMPAIGN TREASURER ADDRESS	street address (NO PO BOX PLEASE); APT/SI	29	ZIP CODE	
(Residence or Business)	MARBIE Falls,	Tx 78654		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (830) 637 1978	EXTENSION		
9 REPORT TYPE	January 15 30th day before e	lection Runoff	15th day after treasurer app	
	July 15 8th day before ele	ction Exceeded \$500 limit	(Officeholder Final Report	Only) (Attach C/OH - FR)
10 PERIOD COVERED	2/26/24	THROUGH 3	Day Year 21/2	4
11 ELECTION	Month Day Year Primary	ELECTION TYPE Runoff Other		
9 4	Month Day Year Primary General	Description		
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	
GO TO PAGE 2				

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME			15 Filer ID (Ethics Commission Filers)	
16 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		
	GENERAL		0	
	SPECIFIC	COMMITTEE ADDRESS		
Additional Pages		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
		T.		
17 CONTRIBUTION TOTALS	1. TOTAL I	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THATES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	AN SED \$	
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$.	
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED			
	4. TOTAL POLITICAL EXPENDITURES \$ 152			
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$			
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF AY OF THE REPORTING PERIOD	THE \$	
18 AFFIDAVIT		\$30000 MONO PARADO DE PERENDA O SE DE TENTO DE CONTROL DE CONTROL DE CONTROL DE CONTROL DE CONTROL DE CONTROL DE	perjury, that the accompanying report is ormation required to be reported by me	
		Signature of Can	ndidate or Officeholder	
AFFIX NOTARY STAM	MP/SEALABOVE			
Sworn to and subsc	ribed before me,	by the said	, this the	
day of	, 20,	to certify which, witness my hand and seal of office.		
		5-		
Signature of officer a	administering oath	Printed name of officer administering oath	Title of officer administering oath	

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

		1	
19 FII	FILER NAME 20 Filer ID (Ethics Co		
	CHEDULE SUBTOTALS AME OF SCHEDULE		SUBTOTAL * AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE E: LOANS		\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$ 15238
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUI	NDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A	BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT RETURNED TO FILER	IONS	\$
	1		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services		ense ges/Contract Labor	Travel In District Travel Out Of Distr Other (enter a cate	ict gory not listed above)
		The Instruction Guide expla	ins how to co	mplete this form.		
1 Total pages Schedule F1:	2 FILER N	AME CORD W	OERA	IER	3 Filer ID (Ethio	cs Commission Filers)
4 Date 3/18/24	5 Payeen	PNC				
6 Amount (\$)	7 Payee a	ddress; City; State;				
7	5	Hwy 281	Ma	IBIE Fu	[1]5	a
8	(a) Category	(See Categories listed at the top of this	s schedule)	(b) Description		
PURPOSE		111. Secure	_	Check if travel ou	itside of Texas. Complete	Schedule T.
OF EXPENDITURE	Mo	wthly Service	1	Check if Austin	, TX, officeholder living	g expense
	,	Chai	f			
9 Complete ONLY if direct expenditure to benefit C/OF		late / Officeholder name		Office sought		Office held
Date	Payee na	ame A				
3/21/24	25	C. A. S	A	of the	Highlan	d Lakes
Amount (\$)	Payee a	ddress; City; State;	Zip Code	1	11/	
1110 50	10. (0.00)			10 0		
175 /	17	19 Ridgevie	a DR.	Kings1	and TX	78639
	Category	/ (See Categories listed at the top of this	schedule)	Description		
PURPOSE		ICON		Check if travel out	side of Texas. Complete S	Schedule T.
OF EXPENDITURE	•	Donation		Check if Austin,	TX, officeholder living	expense
econycolos - friend structuro report transcritorio		V.				
Complete ONLY if direct expenditure to benefit C/OF		ate / Officeholder name		Office sought		Office held
Date	Payee n	ame				
Amount (\$)	Payee a	ddress; City; State;	Zip Code			
	Category	(See Categories listed at the top of this	schedule)	Description		
PURPOSE				Check if travel outs	side of Texas. Complete S	ichedule T.
OF EXPENDITURE				Check if Austin,	TX, officeholder living	expense
EXPENDITURE						C.5
Complete ONLY if direct expenditure to benefit C/OF		ate / Officeholder name		Office sought		Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED						

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 N	AME CORD WOERNER 2 Filer ID (Ethics Commission Filers)				
3	SIGNA	TURE				
	ing a re	expect any further political contributions or political expenditures in connection with my candidacy. I understand that designat- port as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign tions or make any campaign expenditures without a campaign treasurer appointment on file. Signature of Candidate / Officeholder				
		Signature of Candidate / Officerolder				
4	FILER WHO IS NOT AN OFFICEHOLDER Complete A & B below <i>only</i> if you are not an officeholder					
	A.	CAMPAIGN FUNDS				
	Check	conly 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.				
	B.	ASSETS				
	Check	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. Signature of Candidate				
5		HOLDER				
	· Com	plete 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				