CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers) 2 Total pages filed:							
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST Leslie		MI L	OFFICE	USE ONLY	
NAME	NICKNAME	LAST Ray		SUFFIX	Date Received		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 604 Lakeway Burnet Tx. 78611 JUL 15'24 AM9:35						
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER		EXTENSION	Date Hand-delivered	or Date Postmarked	
6 CAMPAIGN TREASURER	MS (MRS) MR	FIRST Sarah		MI M	Receipt #	Amount \$	
NAME					. Date Processed		
	NICKNAME	Ray		SUFFIX	Date Imaged		
7 CAMPAIGN		O PO BOX PLEASE); APT	r / SUITE #;	CITY;	STATE;	ZIP CODE	
TREASURER ADDRESS	608 Lul	Ceway		Burnet	Tx.	78611	
(Residence or Business)							
8 CAMPAIGN	AREA CODE	PHONE NUMBER		EXTENSION			
TREASURER	(512) 756-8614						
PHONE	(2/2)	136-8619					
9 REPORT TYPE	January 15 30th day before election Runoff 15th day after campaign treasurer appointment (Officeholder Only)						
	July 15	8th day befor	e election	Exceeded Modified Reporting Limit	Final Repor	t (Attach C/OH - FR)	
10 PERIOD	Month	Day Year		Month	Day Year		
COVERED	5an./15/2024 THROUGH 07/01/2024				024		
11 ELECTION	ELECTION DATE ELECTION TYPE						
	Month Day	Year Prim	nary Run	off Other Description			
	/	/ Gen	eral Spe				
12 OFFICE	OFFICE HELD (if any)	9	13	OFFICE SOUGHT (if kno			
	Constable	. Pct. 1		constabl.	e put 1		
14 NOTICE EROM	THIS BOY IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT						
14 NOTICE FROM POLITICAL COMMITTEE(S)	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						

Additional Pages	GENERAL COMMITTEE ADDRESS						
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME						
	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) 	HER THAN \$.00					
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$.00					
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$.00					
	4. TOTAL POLITICAL EXPENDITURES	\$.00					
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$ 475.0						
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	* THE \$. 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.							
Taba Ra							
	Signature of Ca	ndidate or Officeholder					
Please complete either option below:							
(1) Affidavit							
(1) Alliques							
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 administering oath Printed name of officer administering oath Title of officer administering oath							
OR							
(2) Unsworn Declaration							
My name is $\frac{\text{Leg/i}}{\text{Ray}}$, and my date of birth is $\frac{01/14/1976}{\text{Leg}}$.							
My address is 608 Lake way Burnet Tx. 78611. USA							
(street) (city) (state) (zip code) (country) Executed in Burnet County, State of Tx, , on the /5 day of Ty/, , 20 24. (month) (year)							
	Signature of Cardi	date/Officeholder (Declarant)					
	Signature of Candio	ateronicender (Declarant)					