

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers)	2 Total pages filed: <b>3</b>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS (MR)	FIRST <b>RUSSELL</b>	MI <b>E.</b>
	NICKNAME	LAST <b>KLECKA</b>	SUFFIX
<b>OFFICE USE ONLY</b>			
Date Received <b>2010 JAN 29 AM 10:17</b>			
WALLER COUNTY CLERK ELECTIONS DIVISION <b>FILED</b>			
Date Hand-delivered or Date Postmarked			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS		5 CANDIDATE / OFFICEHOLDER PHONE	
ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <b>25442 CURTIS RD WALLER TEXAS 77484</b>		AREA CODE PHONE NUMBER EXTENSION <b>(936) 931-3600</b>	
6 CAMPAIGN TREASURER NAME		7 CAMPAIGN TREASURER ADDRESS	
MS / MRS / MR FIRST MI <b>LINDA J.</b>		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <b>25442 CURTIS RD. WALLER TEXAS 77484</b>	
NICKNAME LAST SUFFIX <b>KLECKA</b>		8 CAMPAIGN TREASURER PHONE	
		AREA CODE PHONE NUMBER EXTENSION <b>(936) 931-3600</b>	
9 REPORT TYPE			
<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)			
10 PERIOD COVERED			
Month Day Year    THROUGH    Month Day Year <b>1 / 04 / 2010    THROUGH    2 / 01 / 2010</b>			
11 ELECTION			
ELECTION DATE Month Day Year <b>3 / 02 / 2010</b>		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE		13 OFFICE SOUGHT (if known)	
OFFICE HELD (if any)		<b>JUSTICE OF THE PEACE, PCT 2</b>	
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS			
** Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. **			
Name			
Address / PO Box; Apt. / Suite #; City; State; Zip Code			
<input type="checkbox"/> additional pages			

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME \_\_\_\_\_ 16 ACCOUNT # (Ethics Commission Filers) \_\_\_\_\_

**17 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  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC  <input type="checkbox"/> additional pages	COMMITTEE NAME
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

<b>18 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 5
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 58
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 2
	4. TOTAL POLITICAL EXPENDITURES	\$ 446.38
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

**19 AFFIDAVIT**



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.

Russell Klecka  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Russell Klecka, this the 29 day of Jan, 20 10, to certify which, witness my hand and seal of office.

Joanne Gregory Joanne Gregory Notary Public  
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:  
1

2 FILER NAME

RUSSELL E. KLECKA

3 ACCOUNT # (Ethics Commission filers)

4 Date

1-04-2010

5 Payee name

RUSSELL ERNEST KLECKA

6 Payee address; City; State; Zip Code

25442 CURTIS RD. WALLER, TEXAS 77484

8 Amount (\$)

375.00

7 Purpose of expenditure (See instructions regarding type of information required.)  
FILING FEE FOR JUSTICE OF THE PEACE PCT 2  
(If travel outside of Texas, complete Schedule T)

Reimbursement from political contributions intended

Date

1-21-2010

Payee name

RUSSELL ERNEST KLECKA

Payee address; City; State; Zip Code

25442 CURTIS RD. WALLER, TEXAS 77484

Amount (\$)

71.38

Purpose of expenditure (See instructions regarding type of information required.)  
CAMPAIGN CARDS  
(If travel outside of Texas, complete Schedule T)

Reimbursement from political contributions intended

Date

Payee name

Payee address; City; State; Zip Code

Purpose of expenditure (See instructions regarding type of information required.)  
(If travel outside of Texas, complete Schedule T)

Amount (\$)

Reimbursement from political contributions intended

Date

Payee name

Payee address; City; State; Zip Code

Purpose of expenditure (See instructions regarding type of information required.)  
(If travel outside of Texas, complete Schedule T)

Amount (\$)

Reimbursement from political contributions intended

Date

Payee name

Payee address; City; State; Zip Code

Purpose of expenditure (See instructions regarding type of information required.)  
(If travel outside of Texas, complete Schedule T)

Amount (\$)

Reimbursement from political contributions intended

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED