	E / OFFICEHOLDER I FINANCE REPORT		FORM C/OH COVER SHEET PG 1
The C/OH Instruction G	ulde explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
CANDIDATE/	MS / MRS MB FIRST	MI	OFFICE USE ONLY
OFFICEHOLDER NAME	NICKNAME Krentk	SUFFIX	Date Received Waller County Elections
CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #;	CITY: STATE; ZIP CODE	OCT 3 0 2018
Change of Address	100101	746	Received
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (28/) 932-905.	EXTENSION	Date Hand-delivered or Date Postmarked
5 CAMPAIGN TREASURER	MS/MRS MAD TEAKING	nek_ M	Receipt # Amount \$
NAME	NICKNAME LAST	SUFFIX	Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT /	SUITE #: CITY; STATE:	ZIP CODE - 7743
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (711)932-9052	EXTENSION	
9 REPORT TYPE	January 15 30th day before		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)
10 PERIÓD COVERED	9 28/18	THROUGH)O	29/18
11 ELECTION	ELECTION DATE Month Day Year Prima // O6 / 17 Gene	Description Special	
12 OFFICE	Just, ce of the	eace Tusts Cl o	tthe Place
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			Revised 9/8/

Sworn to and subscribed before me, by the sale	CANDIDAT CAMPAIGN	E / OFFIC FINANC	EHOLDER E REPORT	COVE	FORM C/OH R SHEET PG 2
SUPPORT THE CAMIDATE / OFFICIALORER MASS EXPENDITURES ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECENT OF SUDIC EXPENDITURES. COMMITTEE TYPE GENERAL GENERAL GENERAL COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASUR	C/OH NAME			15 Fiter ID	(Ethics Commission Filers)
GENERAL GENERAL GOMMITTEE ADDRESS	POLITICAL	SUPPORT THE CAND KNOWLEDGE OR CO	IDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN WHILE TO NSENT, CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT TH	ITURES MADE VITHOUT THE C	BY POLITICAL COMMITTEES TO ANDIDATE'S OR OFFICEHOLDER'S IN ONLY IF THEY RECEIVE NOTICE
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Iswear, or affirm, under penalty of perjury, that the accompanyling true and correct and includes all information required to be reported to	CONTRIBUTION BALANCE	OF F	EPORTING PERIOD	-	\$ 631.89
True and correct and includes all information required to be reported to the report and includes all information required to be report under Title 15, Election Code. Notary Public, State of Texas Notary ID# 12637154-0 My Commission Expires January 11, 2020 AFFIX NOTARY STAMP/SEALABOVE Sworn to and subscribed before me, by the said	OUTSTANDING	6. TOTA	AL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS TDAY OF THE REPORTING PERIOD	OF THE	\$ 28 24.6
Sworn to and subscribed before me, by the said Ted Krenek , this the 2	18 AFFIDAVIT	Notary Public, Str Notary ID# 12 My Commissio	true and correct and includes a under Title 15, Election Code. TNA atc of Texas 637154-0 n Expires	all informatio	required to be reported by the
hand and seel of office.			ne, by the said		_, this the 29
day of October 20 18, to certify which, witness my hand and seal of office. ERICA PING NOTATY	day of Octo	er.2018	, to certify which, witness my hand and seal of o	iffice.	Malari

979-826-7645

The original is in the mail
Judge Kerusk

attison, TX 7746

AND AL SCHOOL STATES での事業の名との意

Waller County Elections NOV 0 1 2013

Waller County Elections Christy A. Eason SIG Wilkins St.

Hempstad, TX 77445

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:		
3 CANDIDATE / OFFICEHOLDER	MS / MRS (MB) FIRST	MI	OFFICE USE ONLY		
NAME	NICKNAME LAST Krenek	SUFFIX	Date Received		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	PD. Bu 491	CITY; STATE; ZIP CODE	Waller County Elections NOV 9 1 2013		
Change of Address	1211.	EXTENSION	011		
5 CANDIDATE/ OFFICEHOLDER PHONE	281) 932-9052	EATENSION	Date Hand-delivered or Date Postmarked		
6 CAMPAIGN	MS / MRS MR	n l	Receipt # Amount \$		
TREASURER NAME	Mr. Icanre	ner	Date Processed		
	NICKNAME LAST CK	SUFFIX	Date Imaged		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / S 2330 Vgc/Ln		ZIP CODE 71423		
			234 34 4 35 34 5		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (281)932-9052	EXTENSION			
9 REPORT TYPE	January 15 30th day before 6	election Runoff	15th day after campaign treasurer appointment (Officeholder Only)		
V	July 15 8th day before ele	ection Exceeded \$500 limit	Final Report (Attach C/OH - FR)		
10 PERIOD	Month Day Year	Month	Day Year		
COVERED	9 28/18	THROUGH)0/	29/18		
11 ELECTION	ELECTION DATE	ELECTION TYPE			
	Month Day Year Primary	Runoff Other Description			
	11/06/17 General	Special			
12 OFFICE	Tustice of the fe	13 OFFICE SOUGHT, (if know) ace Tustou of	Front Place		
GO TO PAGE 2					

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

			The April 19 (5this Commission Filers)	
14 C/OH NAME			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 GENERAL SPECIFIC	COMMITTEE NAME COMMITTEE ADDRESS		
Additional Pages		COMMITTEE CAMPAIGN TREASURER NAME		
Additional Fages		COMMITTEE CAMPAIGN TREASURER ADDRESS		
17 CONTRIBUTION TOTALS	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$ \$	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$	
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$	
	4. TOTA	L POLITICAL EXPENDITURES	\$ 0	
CONTRIBUTION BALANCE	5. TOTAL	POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST I	DAY \$ 631.89	
OUTSTANDING LOAN TOTALS	6. TOTA	L PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T DAY OF THE REPORTING PERIOD	# \$38.89 #E \$38.24.63	
18 AFFIDAVIT	ERIKA P Notary Public, Stat Notary ID# 126 My Commission January 11, 2	true and correct and includes all info under Title 15, Election Code.	erjury, that the accompanying report is brimation required to be reported by me didate or Officeholder	
a dayle	amp/sealabove scribed before m	e, by the said Ted KreneK _, to certify which, witness my hand and seal of office.	, this the	
	er administering oa	ERICA PIRC	Title of officer administering oath	