CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	Guide explains how to comple	ete this form.		2 Total pages filed: 8
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Vicki	MI	OFFICE USE ONLY Date RedWaller Co. Elections
	NICKNAME	LAST	SUFFIX	JAN 1 5 2025
		LeBlanc		RECEIVED
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT	/ SUITE #; CITY;	ZIP CODE	Date Hand-delivered or Date Postmarked
MAILING ADDRESS	38868 FM 1488			Receipt # Amount
Change of Address	Hempstead, TX 77445			Date Processed
				Esta toured
				Date Imaged
5 CAMPAIGN TREASURER	MS / MRS / MR	FIRST Wayne	MI	
NAME		vvayne		
	NICKNAME	LAST	SUFFIX	
		LeBlanc		
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	PT / SUITE #; CITY;	STATE; ZIP CODE
TREASURER ADDRESS	38868 FM 1488			
(Residence or Business)	Hempstead, TX 77445			
	_			
7 CAMPAIGN TREASURER PHONE	AREA CODE PHON	E NUMBER EXTENSION		
8 REPORT				
TYPE	X January 15	30th day before election	Runoff	15th day after campaign treasurer appointment (officeholder only)
	July 15	8th day before election	Exceeded modified reporting limit	Final Report (Attach C/OH-FR)
9 PERIOD COVERED	Month Day Year 07/01/2024	THROUGH	Month Day 12/31/2024	Year
	07/01/2024	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	12/31/2024	,
10 ELECTION	ELECTION DATE		ELECTION TYPE	
	Month Day Year	Primary	Runoff	Other
		General	Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT	(if known)
	None Waller		None	
	I			
		GO TO PAGE 2	2	

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 8

13 C / OH NAME	LeBlanc, Vicki	14 Filer ID						
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditures made by political These expenditures may have been made without the candidate's or officeholders are required to report this information only if they receive the second secon	ceholder's	s knowledge or				
Additional Pages	COMMITTEE TYPE COMMITTEE MANE							
COMMITTEE CAMPAIGN TREASURER NAME								
		COMMITTEE CAMPAIGN TREASURER ADDRESS						
16 CONTRIBUTION TOTALS								
	\$	500.00						
EXPENDITURE TOTALS	3. TOTAL UNITEM	\$	0.00					
	4. TOTAL POLITICAL EXPENDITURES							
CONTRIBUTION BALANCE	5. TOTAL POLITICATION REPORTING PE	\$	927.41					
OUTSTANDING LOAN TOTALS	TOTAL PRINCIP OF THE REPOR	\$	0.00					
17 AFFIDAVIT		I swear, or affirm, under penalty of perjury, that the a true and correct and includes all information required under Title 15, Election Code.						
Not M	MCKENZIE KELLEY tary Public, State of Texas y Commission Expires December 10, 2027 IOTARY ID 132278569	Signature of Candidate or Officer	older					
	rany STAMP / SEAL ABorribed before me, by the same, 20, to ce	Mich: L. Blanc	n	day				
Signature of office	per administering	Printed name of officer administering Title of officer	UM er admini	stering oath				

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

3 of 8

					3 01 0
	ER NAM Blanc,	19 Filer ID			
	HEDUL ME OF	SUBTOTAL AMOUNT			
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	500.00	
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$		
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS	\$		
4.		SCHEDULE E: LOANS	\$		
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	182.14	
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$		
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	\$		
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$		
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12	. 🗆	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	\$		

MONET	TARY POLITICAL CONTRIBUT	TIONS		SCHEDUL	E A1
The Instru	iction Guide explains how to complete th	1	Total pages Schedule A1: Sch: 1/1 Rpt: 4/8		
FILER NAME			3	Filer ID	
LeBlanc, Vic			L		
Date	5 Full name of contributor out-of-state PAC ((ID#:)	7	Amount of Contribution (\$)	2500
07/23/2024					\$500.
	6 Contributor address; City; State; Zip Code 5237 N. Riverside Dr. #100				
	3237 N. Riverside Dr. #100				
	Fort Worth, TX 76137				
Principal occu	upation / Job title (See Instructions)	9 Employer (See Instruction	s)		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Poiling Expense Printing Expense Salaries/Wanes/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
CTUES (control expense of based above)

Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 1/4 Rpt: 5/8 LeBlanc, Vicki 4 Date Payee name 09/03/2024 Ericks Mexican Restaurant Amount (\$) Payee address: City: State: Zip Code \$62.56 735 10th St Hempstead, TX 77445 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense EXPENDITURE Check if Austin, TX, officeholder living expense Campaign meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/09/2024 GoDdaddy Amount (\$) Payee address: City: State: Zip Code \$17.07 2155 E. GoDaddy Way Tempe, AZ 85284 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Email Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/09/2024 GoDdaddy Amount (\$) Payee address: City: State: Zip Code \$28.34 2155 E. GoDaddy Way Tempe, AZ 85284 **PURPOSE** (a) Category (see Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Domain Names Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By

Event Expense
Fees
Food/Beverage Expense
Gitt/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Food/Beverage Expense Gitt/Awards/Memorials Expens Legal Services The Instruction Guide ex		Printir Salari		e /Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME			-			3	Filer ID	
	Sch: 2/4 Rpt: 6/8		LeBlanc, Vi								
4	Date	5	Payee name								
	09/03/2024		GoDdaddy								
6	Amount (\$)	7	Payee addre	ess; City;	State;	Zip	Code			**************************************	
	\$14.17		2155 E. Go	Daddy Way							
			Tempe, AZ	85284							
8	PURPOSE	(a)	Category (S	ee Categories listed at the top o	f this sche	dule)	(b)	Description			
	OF EXPENDITURE		Fees	*				Check if travel	outsi	de of Texas. Complete Schedule T.	
	EXPERDITORE									officeholder living expense	
								Campaign Do	oma	ain Name	
L	¥	L									
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Off	iceholder name	0	ffice s	sought			Office held	
Г	Date		Payee name								
	07/31/2024		Prosperity 8	Bank							
H	Amount (\$)	_	Payee addre	ess; City;	State;	Zip	Code		-		
	\$10.00		1250 Austin								
	420.00			,							
			Hempstead	i, TX 77445							
H	PURPOSE	(a)	Category (s	ee Categories listed at the top o	f this scho	dida)	(b)	Description			
	OF	,-,	Fees	ee Calegories islau at the lop o	I URS SCING	uuse)	1,-,		outsi	de of Texas. Complete Schedule T.	
	EXPENDITURE		,					Check if Austin	TX,	officeholder living expense	
								Campaign Ba	ınk	ing Fee	
Г	Complete ONLY if direct		Candidate/Off	iceholder name	0	ffice s	ought			Office held	
	expenditure to benefit C/OI	4									
	Date		Payee name			on all and affects	-				
	08/31/2024		Prosperity 8								
Т	Amount (\$)		Payee addre	ess; City;	State;	Zip	Code				
	\$10.00		1250 Austin	n Street							
			Hempstead	i. TX 77445							
┝	PURPOSE	(2)					(h)	Description	-		
	OF	(a)	Fees (S	ee Categories listed at the top o	f this sche	dule)	(6)	Description Check if travel	outsi	de of Texas. Complete Schedule T.	
	EXPENDITURE		rees							officeholder living expense	
								Campaign Ba	ank	ing Fee	
								9999 VIIIV			
\vdash	Complete ONLY if direct	_	Candidate/Off	iceholder name	0	ffice s	sought			Office held	
	expenditure to benefit C/O										
\vdash											

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees Loan Repayment/Reimbursement Office Overhead/Rental Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		nmittee	Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.					Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID
	Sch: 3/4 Rpt: 7/8		LeBlanc, Vi	icki						р
4	Date	5	Payee name							
	09/30/2024		Prosperity 8	Bank						
6	Amount (\$)	7	Payee addre	ess; City; S	tate;	Zip Co	de			
	\$10.00		1250 Austin	n Street						
		L	Hempstead	I, TX 77445						
8	PURPOSE OF	(a)		ee Categories listed at the top of thi	is schedi	ule)	(b)	Description		
	EXPENDITURE		Fees							de of Texas. Complete Schedule T. officeholder living expense
								Campaign Ba		
9	Complete ONLY if direct		Candidate/Off	iceholder name	Off	ice sou	aht		-	Office held
	expenditure to benefit C/OH		7001010010101	national marrie			9,11			Office field
	Date		Payee name							
	10/31/2024		Prosperity E	Bank						
	Amount (\$)		Payee addre	ss; City; S	tate;	Zip Co	de			
	\$10.00		1250 Austin	1 Street						
			Hempstead	I, TX 77445						
	PURPOSE	(a)	Category (s	ee Categories listed at the top of thi	is schedu	ule)	(b)	Description		
	OF EXPENDITURE		Fees							de of Texas. Complete Schedule T.
										officeholder living expense
								Campaign Ba	U IK	ing Fee
_	Complete ONII V if disect	Ļ	Sandidata/Off	isobolder name	0#	ioo cou	olet			Office hold
	Complete ONLY if direct expenditure to benefit C/OF		anuluate/OIII	iceholder name	OIII	ice sou	gm			Office held
	Date		Payee name							
	11/30/2024		Prosperity E	Bank						
	Amount (\$)		Payee addre	ss; City; S	tate;	Zip Co	de			
	\$10.00		1250 Austin	Street						
			Hempstead	I, TX 77445						
	PURPOSE	(a)	Category (se	ee Categories listed at the top of thi	is schedu	ule)	(b)	Description		
	OF EXPENDITURE		Fees							de of Texas. Complete Schedule T.
										officeholder living expense
								Campaign Ba	u iki	ing Fee
	Complete ONLY if direct	_	`andidate/Offi	iceholder name	Off	ice sou	aht		-	Office held
	expenditure to benefit C/O		rai madio OIII	non rotatut i maiifu	J.II		37.11			without partie

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Bariking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			vent Expense Loan Repayment/Reimbursement ees Office Overhead/Rental Expense ood/Beverage Expense bitt/Awards/Memorials Expense egal Services Printing Expense gala Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID			
	Sch: 4/4 Rpt: 8/8	-	LeBlanc, Vi						, ,,,,,			
4	Date	5	Payee name									
L	12/31/2024		Prosperity E	Bank								
6	Amount (\$) \$10.00	7	Payee address 1250 Austin Hempstead	Street	tate; Zip Co							
8	PURPOSE OF EXPENDITURE	(a)	Category (Se Fees	ee Categories listed at the top of thi	is schedule)	(b)		, TX	ide of Texas. Complete Schedule T., officeholder living expense Ling Fee			
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	ceholder name	Office sou	ight			Office held			