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:

OFFICE USE ONLY

Date Received: Received by Kelly Harper January 12, 2023 at 8:45 AM

Date Hand-delivered or Date Postmarked:

Receipt #: | Amount $:

Date Processed:

Date Imaged:

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: Mrs. | FIRST: Martha | MI: V

NICKNAME: Marty | LAST: Leonard | SUFFIX:

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS (Change of Address)

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE: [redacted]

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE / PHONE NUMBER / EXTENSION: [redacted]

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: Mrs. | FIRST: Elaine | MI:

NICKNAME: | LAST: Petrus | SUFFIX:

7 CAMPAIGN TREASURER ADDRESS (Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE: 3736 Country Club Circle | Fort Worth | TX | 76109

8 CAMPAIGN TREASURER PHONE

AREA CODE: (817) | PHONE NUMBER: 924-8898 | EXTENSION:

9 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)

10 PERIOD COVERED

Month / Day / Year: 7 / 1 / 21 THROUGH 12 / 31 / 21

11 ELECTION

ELECTION DATE: Month / Day / Year: 5 / 4 / 19

ELECTION TYPE: [x] Primary [ ] Runoff [ ] Other Description; [ ] General [ ] Special

12 OFFICE

OFFICE HELD (if any): Tarrant Regional Water District Board of Directors

13 OFFICE SOUGHT (if known):

14 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.

Additional Pages

COMMITTEE TYPE	COMMITTEE NAME
GENERAL	COMMITTEE ADDRESS
SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME	16 Filer ID (Ethics Commission Filers)
Martha Leonard	

17 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	$
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	$
	4.	**TOTAL POLITICAL EXPENDITURES**	$
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 1,000.00
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 6,487.88

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.

Martha Leonard

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

KELLY HARPER
Notary Public, State of Texas
Comm. Expires 11-09-2026
Notary ID 12169253

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Martha Leonard this the 12 day of JANUARY 20 23, to certify which, witness my hand and seal of office.

Kelly Harper	Kelly Harper	Executive Assistant
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

_____
Signature of Candidate/Officeholder (Declarant)