CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains ho	ow to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 2			
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR Mrs.	FIRST Leah	мі М .	OFFICE USE ONLY			
	NICKNAME	LAST King	SUFFIX	received by Ellie			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BO	OX; APT / SUITE #; C	CITY; STATE; ZIP CODE	Garcia on 7/12/23 at 9:57 AM			
Change of Address	460 S. Ray		TX 76111				
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER 602-0729	EXTENSION	Date Hand-delivered or Date Postmarked			
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Barry	МІ	Receipt # Amount S			
NAINE	NICKNAME	LAST	SUFFIX	Date Processed Date Imaged			
		King	,				
7 CAMPAIGN TREASURER ADDRESS		S (NO PO BOX PLEASE); APT / SU	UITE #; CITY;	STATE; ZIP CODE			
(Residence or Business)	460 S. Ray	yner Fort Worth	TX 76111				
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(817)	821-3374					
9 REPORT TYPE	January 15	30lh day before ele	lection Runoff	15th day after campaign treasurer appointment (Officeholder Only)			
	X July 15	8th day before elect	ection Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)			
10 PERIOD COVERED	Month	1 / /	Month	Day Year			
44 ELECTION	O1 /	<u> </u>	THROUGH 06 /	30 / 2023			
11 ELECTION	ELECTION DA		ELECTION TYPE Runoff Other				
	//	General	Description				
12 OFFICE	OFFICE HELD (if any)	.1	42				
	Director, Tarr	rrant Regional Water District		-			
		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	COMMITTEE NAME					
Additional Pages	GENERAL	COMMITTEE ADDRESS					
	SPECIFIC	COMMITTEE CAMPAIGN TREAS	SURER NAME				
		COMMITTEE CAMPAIGN TREAS	SURER ADDRESS				
GO TO PAGE 2							
			7,022				

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)	N \$				
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)) \$ 0.00				
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$				
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00				
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	ST DAY \$ 2,483.50				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	F THE \$				
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.						
	Signature of Candidate or Officeholder					
Please complete either option below:						
(1) Affidavit						
NOTARY STAMP/SEA	-					
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 administe	ring oath Printed name of officer administering oath	Title of officer administering oath				
	OR					
(2) Unsworn Declaration	on					
My name is Leah M	. King, and my date of birth is _					
My address is 460 S. F	_	TX 7610076U USA				
		state) (zip code) Tm (country)				
Executed inTarran	County, State of Texas, on the 11th day of Jt (month)	July 20_23) (year)				
	Jell W	n. King				
	SIgnature of Candida	ate/Officeholder-(Beclarant)				