CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT								FORM C/OH COVER SHEET PG 1			
The C/OH Instruction	ils form.	1 Filer i	ID (Ethics Commis	ssion Filers)	2 Total pages filed: 2						
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	**************************************			м: Р			OFFICE	USE ONLY		
NOINE	NICKNAME	NICKNAME LAST SUFFIX Fessier						celvad			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX			city; Spring, T	STATE; ZIP TX 77389	CODE					
Change of Address											
5 CANDIDATE/ OFFICEHOLDER PHONE	(832)					EXTENSION			Date Hand-delivared or Date Postmarked		
6 CAMPAIGN	MS / MRS / MR	MS / MRS / MR FIRST					Receipt	H	Amount \$		
TREASURER NAME		John		*********	P	***********	Date Pro	cessed	1		
	NICKNAME	NICKNAME LAST SUFFIX Fessier						Date (maged			
7 CAMPAIGN TREASURER ADDRESS	100	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #; CITY: 12822 Kinneskie Dr. Humble,						STATE:	ZIP CODE 77389		
(Residence or Business)											
8 CAMPAIGN TREASURER PHONE	(832)	457-993			EXTENSION						
9 REPORT TYPE	January 15	January 15 30th day before election Runoff						15th day after campaign freasurar appointment (Officenoider Only)			
	July 15	8th d	day before elec	cilon	Exceeded A Reporting L				t (Attach C/OH - FR)		
10 PERIOD COVERED	Month	•	Year			Month	Day	Your			
	7		23	THRO	UGH	12	/ 31 	/ 23			
11 ELECTION	ELECTION DATE ELECTION TYPE										
	Month Day Year Primary Runoff Other Description										
	11 / 8	/ 22 '	General	Spe	cial						
12 OFFICE	OFFICE HELD (If any)			OFFICE SOUGHT	T (if known)						
A MOTIOE COOM					ime						
I4 NOTICE FROM POLITICAL COMMITTEE(S)	THIS SOX IS FOR NOTICE THE CANDIDATE / OFFICE CONSENT. CANDIDATES	CEHOLDER. <i>THESE E</i> X	XPENDITURES I	MAY HAVE REE	EN MADE WITHOUT	IT THE CANOU	DATE'S OF	DESICENDIA	TER'S KNAWN EDGE OF		
	COMMITTEE TYPE	COMMITTEE NAM	ЛE								
Additional Pages	GENERAL	GENERAL COMMITTEE ADDRESS									
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME										
	/	COMMITTEE CAM	MPAIGN TREA	ASURER ADD	RESS						
		G	30 TO P	PAGE 2	,						

CANDIDATE / OFFICEHOLDER FORM C/OH **COVER SHEET PG 2 CAMPAIGN FINANCE REPORT** 15 C/OH NAME 16 Filer ID (Ethics Commission Filers) Kelly P Fessier 17 CONTRIBUTION TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN **TOTALS** PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR \$ CONTRIBUTIONS MADE ELECTRONICALLY) 2. **TOTAL POLITICAL CONTRIBUTIONS** 0.00(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) EXPENDITURE TOTAL UNITEMIZED POLITICAL EXPENDITURE. **TOTALS** \$ TOTAL POLITICAL EXPENDITURES 4. 0.00CONTRIBUTION 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY 148.50 BALANCE OF REPORTING PERIOD OUTSTANDING 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LOAN TOTALS LAST DAY OF THE REPORTING PERIOD 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: CYNTHIA PLUNKETT Notary Public, State of Texas (1) Affidav Comm. Expires 01-30-2025 Notary ID 12209745 NOTARY STAMP/SEAL Sworn to and subscribed before me by Kelly P. Fassler this the Sta certify which, witness my hand and seal of office. Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath (2) Unsworn Declaration _____, and my date of birth is ____ My name is ___ My address is _____

Executed in

(street)

_____ County, State of ___

____ , on the ___

(city)

(state)

Signature of Candidate/Officeholder (Declarant)

(month)

(zip code)

(country)