CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how to complete this form.	Filer ID (Ethics Commission Filers) N/A	2 Total pages filed:		
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST Mr. Alfred	мі F .	OFFICE USE ONLY		
NAME	nickname last Gessel	SUFFIX	Date Received		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; 2434 Rambling Brook, Spring,	CITY; STATE; ZIP CODE TX 77373	Timber Lane Utility District		
Change of Address	ADEA CODE PURIE AUMEDED	EXTENSION			
5 CANDIDATE/ OFFICEHOLDER PHONE	(832) 265-0226	EATENSION	Date Hand-delivered or Date Postmarked Receipt # Amount \$		
6 CAMPAIGN	MS / MRS / MR FIRST	MI	Receipt #		
TREASURER NAME	Self	OUEEN	Date Processed		
	NICKNAME LAST	SUFFIX	Date Imaged		
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT / S	SUITE #; CITY;	STATE; ZIP CODE		
TREASURER ADDRESS	Same as above				
(Residence or Business)					
8 CAMPAIGN TREASURER	AREA CODE PHONE NUMBER	EXTENSION			
PHONE	() Same as above				
9 REPORT TYPE	January 15 30th day before	election Runoff	15th day after campaign treasurer appointment (Officeholder Only)		
	July 15 8th day before e	Reporting Limit	Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year	Month	Day Year / 30 / 24		
COVERED	1 / 1 / 24	THROUGH 6	/ 30 / 24		
11 ELECTION	ELECTION DATE Month Day Year Primary	y Runoff Other Description			
	5 / 4 / 24 Genera	al Special			
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if know	vn)		
	Director	Director			
14 NOTICE FROM POLITICAL	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(S)	COMMITTEE TYPE COMMITTEE NAME				
Additional Pages	GENERAL COMMITTEE ADDRESS				
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME				
	COMMITTEE CAMPAIGN 1	TREASURER ADDRESS			
GO TO PAGE 2					
	30	me on or 5			

FORM C/OH Timber Lane Utility District CANDIDATE / OFFICEHOLDER **COVER SHEET PG 2** CAMPAIGN FINANCE REPORT 16 Filer ID (Ethics Commission Filers) 15 C/OH NAME N/A Alfred F. Gessel TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN 17 CONTRIBUTION PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR **TOTALS** CONTRIBUTIONS MADE ELECTRONICALLY) TOTAL POLITICAL CONTRIBUTIONS 2. (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) TOTAL UNITEMIZED POLITICAL EXPENDITURE. **EXPENDITURE** 3. **TOTALS** \$ TOTAL POLITICAL EXPENDITURES TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY CONTRIBUTION OF REPORTING PERIOD BALANCE TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE \$ OUTSTANDING 6 LAST DAY OF THE REPORTING PERIOD LOAN TOTALS I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information 18 SIGNATURE required to be reported by me under Title 15, Election Code. Please complete either option below:

(1) Affidavit NOTARY STAMP/SEAL this the _____ day of _ Sworn to and subscribed before me by _____ ____, to certify which, witness my hand and seal of office. Title of officer administering oath Printed name of officer administering oath Signature of officer administering oath OR (2) Unsworn Declaration , and my date of birth is _ 7737.5 AIN My name is _ Brook (country) (state) County, State of ______, on the ____ day of (month) Signature of Candidate/Officeholder (Declarant)

CANDIDATE / OFFICEHOLDER REPORT: Timber Lane Utility District **DESIGNATION OF FINAL REPORT**

FORM C/OH - FR

The Instruction Guide explains how to complete this form. •• Complete only if "Report Type" on page 1 is marked "Final Report" •• 2 Filer ID (Ethics Commission Filers) 1 C/OH NAME N/A Alfred F. Gessel 3 SIGNATURE I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file. ignature of Candidate / Officeholder FILER WHO IS NOT AN OFFICEHOLDER Complete A & B below only if you are not an officeholder. **CAMPAIGN FUNDS** Check only one: I do not have unexpended contributions or unexpended interest or income earned from political contributions. I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204. **ASSETS** B. Check only one: I do not retain assets purchased with political contributions or interest or other income from political contributions. I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204. Signature of Candidate **OFFICEHOLDER** .. Complete this section only if you are an officeholder ... I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

CANDIDATE / OFFICEHOLDER FORM C/OH **COVER SHEET PG 1** CAMPAIGN FINANCE REPORT 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. N/A MS / MRS / MR МІ 3 CANDIDATE / OFFICE USE ONLY **OFFICEHOLDER** Mr. Daniel M. NAME NICKNAME LAST SUFFIX Meacham 4 CANDIDATE / APT / SUITE #: ADDRESS / PO BOX; CITY STATE: ZIP CODE **OFFICEHOLDER** 9019 Newcroft Ct., Tomball, TX 77375 MAILING Timber Lane Utility District **ADDRESS** Change of Address AREA CODE PHONE NUMBER EXTENSION 5 CANDIDATE/ Date Hand-delivered or Date Postmarked **OFFICEHOLDER** (281)804-0975 PHONE Receipt # Amount \$ MS / MRS / MR FIRST MI CAMPAIGN **TREASURER** Self Date Processed NAME NICKNAME LAST Date Imaged STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: ZIP CODE STATE; CITY CAMPAIGN TREASURER Same as above **ADDRESS** (Residence or Business) PHONE NUMBER CAMPAIGN AREA CODE EXTENSION TREASURER PHONE Same as above 9 REPORT TYPE Runoff 15th day after campaign 30th day before election January 15 treasurer appointment (Officeholder Only) Exceeded Modified July 15 8th day before election Final Report (Attach C/OH - FR) Reporting Limit 10 PERIOD Day Year Year Month Day COVERED 6 30 24 24 THROUGH ELECTION TYPE ELECTION DATE 11 ELECTION Primary Runoff Other Description Day Year General Special 24 OFFICE HELD (if any) 13 OFFICE SOUGHT (if known) 12 OFFICE Director Director THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT 14 NOTICE FROM THE CANDIDATE! OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATE'S AND OFFICEHOLDER'S ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. **POLITICAL** COMMITTEE(S) COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS **GO TO PAGE 2**

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

Timber Lane Utility District

FORM C/OH COVER SHEET PG 2

SAMI AIOI	THE TAIL OR I				
15 C/OH NAME Alfred F. Gessel		16 Filer ID (Ethics Commission Filers) N/A			
17 CONTRIBUTION TOTALS EXPENDITURE TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 9			
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0			
	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0			
	4. TOTAL POLITICAL EXPENDITURES	\$ 2			
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	T DAY \$			
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	THE \$			
Please complete either option below: (1) Affidavit NOTARY STAMP/SEAL					
Sworn to and subscribed 20, to certify	which, witness my hand and seal of office.	, day of,			
Signature of officer administe	Trinica name of onion administrating came	Title of officer administering oath			
(2) Unsworn Declarati	on on				
My name is	County, State of , on the HPh day of (mont	7 7 7 5 7 5 7 5 7 5 7 5 7 5 7 5 7 5 7 5			

CANDIDATE / OFFICEHOLDER REPORT: Timber Lane Utility District **DESIGNATION OF FINAL REPORT**

FORM C/OH - FR

The Instruction Guide explains how to complete this form.					
	C/OH NAME Ifred F. Gessel	2 Filer ID (Ethics Commission Filers) N/A			
3	SIGNATURE				
	I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file. Signature of Candidate / Officeholder				
4	FILER WHO IS NOT AN OFFICEHOLDER Complete A & B below only if you are not an officeholder.				
	Check only one: I do not have unexpended contributions or unexpended interest or income ear	ned from political contributions.			
	I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.				
	B. ASSETS				
	Check only one:				
	I do not retain assets purchased with political contributions or interest or other income from political contributions.				
	I do retain assets purchased with political contributions or interest or other incomplete that I may not convert assets purchased with political contributions or interest personal use. I also understand that I must dispose of assets purchased with requirements of Election Code, § 254.204.	or other income from political contributions to			
		Signature of Candidate			
5	OFFICEHOLDER •• Complete this section only if you are an officeholder ••				
	I am aware that I remain subject to filing requirements applicable to an officeholde file. I am also aware that I will be required to file reports of unexpended contribu an officeholder, I retain political contributions, interest or other income from political contributions or interest or other income from political contributions.	tions if, after filing the last required report as			