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:			
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	Gles		MI /)	OFFICE	USE ONLY	
NAME	NICKNAME	PRAY IOR		SUFFIX	Date Received		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;	Looney LANC		ZIP CODE	mond wood was	'23 PK12:52	
Change of Address	4	Watthanton	1 Tx. 74	001			
5 CANDIDATE/ OFFICEHOLDER PHONE	(8/7)	PHONE NUMBER 994-2688	EXTENS	NON	Date Hand-delivered	or Date Postmarked Amount \$	
6 CAMPAIGN TREASURER	MS/MRS/MR	FIRST		∑ ^{MI}	Date Processed	Amount \$	
NAME	NICKNAME	LAST		SUFFIX	Date 1100esseu		
	HICKNAME	PRANTON		001111	Date Imaged		
7 CAMPAIGN	STREET ADDRESS (I		SUITE #; CITY	' ;	STATE;	ZIP CODE	
TREASURER ADDRESS	543 L	LAN LAN		11/201	4		
(Residence or Business)		Weather For	d 1X.	7608	/		
8 CAMPAIGN TREASURER PHONE	AREA CODE (817)	994-2688	EXTENS	SION			
	(01)	117 06 08					
9 REPORT TYPE	PORT TYPE January 15 30th day before election Runoff Runoff 15th day after campaign treasurer appointment (Officeholder Only)					ppointment	
	July 15	8th day before el	ection	ceeded Modified porting Limit	Final Repo	ort (Attach C/OH - FR)	
10 PERIOD COVERED	Month	Day Year		Month	Day Yea		
COVERED	/ /3 / 23 THROUGH 7 / 15 / 23						
11 ELECTION	ELECTION DATE ELECTION TYPE						
	Month Day	Year Primary	Runoff	Other Description			
	/ /	General	I Special				
12 OFFICE	OFFICE HELD (if any) 13 OFFICE SOUGHT (if known)						
	CONSTABLE	PeT#3	Comis	Table	TOT 3	7	
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	GENERAL COMMITTEE ADDRESS					
Additional Fages	SPECIFIC	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME					
COMMITTEE CAMPAIGN TREASURER ADDRESS							
GO TO PAGE 2							

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)	\$ \$				
	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	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	ST DAY \$				
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	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 of Officeholder						
Please complete either option below:						
(1) Alliques						
NOTARY STAMP/SEA	L					
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				
(2) Unsworn Declaration						
My name is Glen	D. PRAY TOR , and my date of birth is	7-18-1945				
My address is 543 (street) (city) (state) (zip code) (country) Executed in Anthon County, State of 1245, on the 37 day of (month) (year)						
Signature of Candidate officeholder (Declarant)						