

**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCIAL REPORT COVER SHEET**

COVER SHEET 1 OF 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 NAME	Mr. Richard	<b>OFFICE USE ONLY</b>	
	NICKNAME LAST SUFFIX	Date Received	
4 CANDIDATE / OFFICEHOLDER ADDRESS	APR 15 2024		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE EXTENSION	Date Hand-Delivered or Date Postmarked	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST NICKNAME LAST SUFFIX	Receipt #	Amount \$
	Mr. Bill Fenimore	Date Processed	Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE) APT / SUITE # CITY		
	6120 Ashburn Street #712 North Richland Texas 76180		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE		
	( 817 ) 247-3450		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year	Month Day Year	
	7 1 23	12 31 23	
11 ELECTION	ELECTION DATE	ELECTION TYPE	
	Month Day Year	Primary Runoff Other Description General Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	
	Trustee		
14 NOT POLITICAL COMMITTEE(S)	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	
	GENERAL	COMMITTEE ADDRESS	
Additional Page	SPECIFIC	COMMITTEE CAMPAIGN TREASURER ADDRESS	

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