

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 NAME	MS / MRS / MR <input checked="" type="checkbox"/>	FIRST <i>Ralph</i>	MI <i>E.</i>	OFFICE USE ONLY Date Received <div style="font-size: 2em; font-weight: bold;">JUL 09 2019</div> Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged
	NICKNAME	LAST <i>Hoelscher</i>	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	<i>14446 Arrington Rd. Miles TX 76861</i>		
<input type="checkbox"/> Change of Address				
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE <i>(325)</i>	PHONE NUMBER <i>468-2592</i>	EXTENSION	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <input checked="" type="checkbox"/>	FIRST <i>Ralph</i>	MI <i>E.</i>	Receipt #
	NICKNAME	LAST <i>Hoelscher</i>	SUFFIX	Amount \$
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE			Date Processed
(Residence or Business)	<i>14446 Arrington Rd Miles TX 76861</i>			Date Imaged
8 CAMPAIGN TREASURER PHONE	AREA CODE <i>(325)</i>	PHONE NUMBER <i>468-2592</i>	EXTENSION	
9 REPORT TYPE	<input 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 checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)			
10 PERIOD COVERED	Month Day Year <i>1 / 15 / 19</i>		THROUGH	Month Day Year <i>7 / 9 / 19</i>
11 ELECTION	ELECTION DATE		ELECTION TYPE	
	Month Day Year <i>/ /</i>	<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Runoff <input type="checkbox"/> Special	<input type="checkbox"/> Other Description
12 OFFICE	OFFICE HELD (if any) <i>Tom Green County Commissioner, Pct. 1</i>	13 OFFICE SOUGHT (if known)		

GO TO PAGE 2

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14 C/OH NAME

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM
POLITICAL
COMMITTEE(S)

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

GENERAL

SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

17 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$

4. TOTAL POLITICAL EXPENDITURES

\$

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$

1369.59

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$

13,500.00

18 AFFIDAVIT

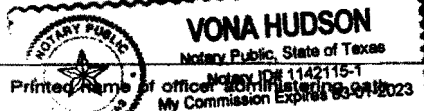
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Ralph E. Hoelscher
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ralph E. Hoelscher, this the 9th day of July, 2019, to certify which, witness my hand and seal of office.

Vona Hudson
Signature of officer administering oath



Notary
Title of officer administering oath