CANDIDATE / OFFICEHOLDER FORM C/OH **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. MS / MRS / MR 3 CANDIDATE / OFFEE DSE ONLY **OFFICEHOLDER** NAME NICKNAME LAST SHEELY 4 CANDIDATE / ADDRESS / PO BOX: FEB 06 20 APT / SUITE #. STATE ZIP CODE P.O. Box 3062 **OFFICEHOLDER** MAILING Fredericksburg, TX 78624 **ADDRESS** Change of Address 5 CANDIDATE/ AREA CODE PHONE NUMBER EXTENSION OFFICEHOLDER PHONE Receipt # Amount \$ MS / MRS / MR FIRST 6 CAMPAIGN **TREASURER** Date Processed NAME NICKNAME LAST SUFFIX Date Imaged STREET ADDRESS (NO PO BOX PLEASE). APT / SUITE #, CITY; STATE: ZIP CODE 7 CAMPAIGN **TREASURER** 792 Lange's Mill Road **ADDRESS** Doss, TX 78618 (Residence or Business) AREA CODE PHONE NUMBER **EXTENSION** 8 CAMPAIGN **TREASURER** PHONE 9 REPORT TYPE January 15 30th day before election 15th day after campaign treasurer appointment (Officeholder Only) **Exceeded Modified** July 15 8th day before election Final Report (Attach C/OH - FR) Reporting Limit 10 PERIOD Month Month Day Year COVERED 2 15 24 1 24 THROUGH ELECTION TYPE ELECTION DATE 11 ELECTION Primary Runoff Other Description Day Special 24 OFFICE HELD (if any) 13 OFFICE SOUGHT (if known) 12 OFFICE County Attorney County Attorney 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. CANDIDATES AND OFFICEHOLDER'S KNOWLEDGE OR **POLITICAL** COMMITTEE(S) COMMITTEE NAME COMMITTEE TYPE COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

Signature of Candidate/Officeholder (Declarant)

CAMPAIGN	I FINANCE REPORT	COVERS	SHEET PG 2
15 C/OH NAME Steven A. Wadsworth		16 Filer ID (Ethics	Commission Filers)
17 CONTRIBUTION TOTALS	 TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THA PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) 	N \$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	902.64
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LO OF REPORTING PERIOD	AST DAY \$	0.00
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS LAST DAY OF THE REPORTING PERIOD	OF THE \$	0.00
	Please complete either option belo	w:	
(1) Affidavit			
NOTARY STAMP/SEA			
	which, witness my hand and seal of office.	e day of	
Signature of officer administ	ering oath Printed name of officer administering oath	Title of o	fficer administering oath
(2) Unsworn Declarat	ion		
My name is	, and my date of birth	is	
	(street) (city)	(state) (zip code	e) (country)
Executed in	County, State of , on the day of	nth) (ye	ar)

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a	
	a١

Advertising Expense Accounting/Banking

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Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

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Consulting Expense Contributions/Donations Mac Candidate/Officeholder/Pol	eBy (Food/Beverage Expense Sift/Awards/Memorials Expense Legal Services	Poliing E Printing I Salaries			nt Of District	not listed above)
The Instruction	Guide explains h	ow to complete this form.		USE A NEW PAGE FO	OR EACH CR	EDIT CARD	ISSUER
1 TOTAL PAGES SCHEDULE F4: 1	z filer name Steven A. Wadsworth			3 FILER	ID (Ethics C	Commission Filers)	
4 TOTAL OF UNITEMIZED EX	PENDITURES CHARG	GED TO A CREDIT CARD			\$	0.00	
5 CREDIT CARD ISSUER	Name of financial institution Chase Bank						
6 PAYMENT	(a) Amount Charged (b) Date Expenditure Charged (c) Date(s) Credit Card 02/02/2024 and 02/02/202						
7 PAYEE	(a) Payee name Signs on	the Cheap	(b) Payee ad 11525 St	dress; onehollow Drive, S	City, Suite B220	•	Zip Code TX 78758
8 PURPOSE OF EXPENDITURE Political	(a) Category (See Advertising	Categories listed at the top of this sche	lule)	(b) Description Signs			
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				xpense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Office holder name Steven A. Wadsworth County Attorney			(Office Held County A	Attorney	
PAYMENT	(a) Amount Charg	ged (b) Date Expendito	ire Charged	(c) Date(s) Credit Card	Issuer Paid		
PAYEE	(a) Payee name		(b) Payee ac	dress;	City,	State,	Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See	Categories listed at the top of this sche	dule)	(b) Description			
Political Non-Political	(c) Check	if travel outside of Texas. Complet	e Schedule T.	Check if	Austin, TX, offi	ceholder living	expense
Complete ONLY If direct expenditure to benefit C/OH			fice Sought		Office Held		
PAYMENT	(a) Amount Char	ged (b) Date Expendit	ure Charged	(c) Date(s) Credit Card	l Issuer Paid		
PAYEE	(a) Payee name		(b) Payee a	idress;	City,	State,	Zip Code
PURPOSE OF EXPENDITURE Political	(a) Category (See Categories listed at the top of this schedule) (b) Description (c) Check if travel outside of Texas. Complete Schedule T.			(b) Description			
Non-Political				Check	ck if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Off	iceholder name	0	ffice Sought		Office Held	
	ATTAC	H ADDITIONAL COPIE	S OF THIS	SCHEDULE AS N	IEEDED		

SCHEDULE G

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

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Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Candidate/Officeholder/Politic Credit Card Payment	cal Committee Legal Services Sala The Instruction Guide explains how	ries/Wages/Contract Labor v to complete this form.	Other (enter a category not listed above)				
1 Total pages Schedule G:	2 FILER NAME Steven A. Wadsworth		3 Filer ID (Ethics Commission Filers)				
4 Date	5 Payee name						
01/29/2024	Sutherlands Lumber Co						
6 Amount (\$) 51.90 Reimbursement from political contributions intended	7 Payee address; 1511 East Main Street Fredericksburg, TX 78624	City;	State; Zip Code				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule Advertising	(b) Description Stakes					
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
9	Candidate / Officeholder name	Office sought	Office held				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Steven A. Wadsworth	County Attorney	County Attorney				
Date 01/19/2024	Payee name Chase Bank						
Amount (\$) 250.00 Reimbursement from political contributions intended	Payee address: P.O. Box 6294 Carol Stream, IL 60197-6294	City;	State; Zip Code				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule credit card payment	paying for signs	3				
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held				
expenditure to benefit C/C	Steven A. Wadsworth	County Attorney	County Attorney				
Date 02/02/2024	Payee name Chase Bank						
Amount (\$) 300.00 Reimbursement from political contributions intended	Payee address; P.O. Box 6294 Carol Stream, IL 60197-6294	City;	State; Zip Code				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule credit card payment	Description paying for signs	s .				
marks hyp., where 2 had 1 have	Check if travel outside of Texas. Complete Schedule 1	Γ. Check if Austin,	TX, officeholder living expense				
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held				
expenditure to benefit C/OH	Steven A. Wadsworth	County Attorney	County Attorney				
	ATTACH ADDITIONAL COPIES OF TH	IS SCHEDULE AS NEEDE	ED				

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SCHEDULE G

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

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Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Selected/Agreed/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out Of District
Other (Institute of Page 1)

Candidate/Officeholder/Politic Credit Card Payment	al Committee Legal Services Sala The Instruction Guide explains how		ner (enter a category not listed a	DOVe)		
1 Total pages Schedule G:	2 FILER NAME Steven A. Wadsworth	3 (Filer ID (Ethics Commission	n Filers)		
1 Date	5 Payee name					
02/01/2024	Wal-Mart Stores					
Amount (\$)	7 Payee address;	City;	State; Zip C	Code		
1.9 <mark>1</mark>	1435 East Main Street					
Reimbursement from political contributions intended	Fredericksburg, TX 78624					
3	(a) Category (See Categories listed at the top of this schedule					
PURPOSE OF EXPENDITURE	Advertising	cable ties				
	(c) Check if travel outside of Texas. Complete Schedule 1	Check if Austin, TX,	, TX, officeholder living expense			
) Complete <u>ONLY</u> if direct	Candidate / Officeholder name	Office sought	Office hel			
expenditure to benefit C/OH	Steven A. Wadsworth	County Attorney	County Attor	rney		
Date	Payee name					
02/01/2024	Wal-Mart Stores					
Amount (\$)	Payee address;	City;	State; Zip 0	Code		
11.86	1435 East Main Street					
Reimburgement from political contributions intended	Fredericksburg, TX 78624					
**************************************	Category (See Categories listed at the top of this schedule					
PURPOSE OF EXPENDITURE	Advertising	stakes				
	Check if travel outside of Texas. Complete Schedule	officeholder living expense				
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office he	ld		
expenditure to benefit C/C	oн Steven A. Wadsworth	County Attorney	County Atto	rney		
Date	Payee name	· · · · · · · · · · · · · · · · · · ·				
01/29/2024	Dietel Printing					
Amount (\$)	Payee address;	City;	State; Zip Co	de		
29.23	105 Heritage Hills Drive					
Reimbursement from political contributions intended	Fredericksburg, TX 78624					
	Category (See Categories listed at the top of this schedule	l -				
PURPOSE OF EXPENDITURE	Advertising	stakes				
majora, grad. Ambre an artical E. grad. A. articulo	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office he	ld		
expenditure to benefit C/OH	Steven A. Wadsworth	County Attorney	County Atto	rney		
	ATTACH ADDITIONAL COPIES OF TH	IS SCHEDULE AS NEEDED				

SCHEDULE G

District 444/0004

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Politic Credit Cerd Payment	Fei Foi By Gif cal Committee Leg	ent Expense es od/Beverage Expense b/Awards/Memorials Expense gal Services he Instruction Guide explain	Office Ov Polling E: Printing E Salaries/	xpense Vages/Contract Labor	Solicitation/Fundraisin Transportation Equipm Travel In District Travel Out Of District Other (enter a category	ent & Related Expense	
1 Total pages Schedule G:	2 FILER NAME Steven A	A. Wadsworth			3 Filer ID (Ethics	Commission Filers)	
4 Date 02/01/2024	5 Payee name Tractor St			·			
6 Amount (\$) 24.45 Reimbursement from political contributions intended		s: t US Highway 290 ourg, TX 78624		City;	State;	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Advertising	Categories listed at the top of this so	hedule)	(b) Description t-posts			
	(c) Check	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		/ Officeholder name L. Wadsworth	С	Office sought Ounty Attorne		Office held / Attorney	
01/31/2024	Payee name UPS Store	e					
Amount (\$) 108.27 Reimbursement from political contributions intended		s: t Main Street, Suite sburg, TX 78624	200	City;	State;	Zip Code	
PURPOSE OF EXPENDITURE	Category (See Advertising	e Categories listed at the top of this so	thedule)	Description handouts			
	Check	riftravel outside of Texas. Complete Sch	edule T.	Check if Austin	n, TX, officeholder living e	pense	
Complete <u>ONLY</u> if direct expenditure to benefit C/C		/ Officeholder name A. Wadsworth	С	Office sought ounty Attorne		Office held Attorney	
Date 01/18/2024	Payee name UPS Stor	е					
Amount (\$) 34.65 Reimbursement from political contributions intended		s: t Main Street, Suite sburg, TX 78624	200	City;	State;	Zip Code	
PURPOSE OF EXPENDITURE	Category (See Advertising	c Categories listed at the top of this so	hedule)	Description handouts			
	Check if travel outside of Texas. Complete Schedule T. Check if Aust			•••	stin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		/ Officeholder name A. Wadsworth	С	Office sought ounty Attorne		y Attorney	
	ATTACH	ADDITIONAL COPIES OF	F THIS S	CHEDULE AS NEED	DED		

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SCHEDULE G

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If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Benking Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Event Expense Transportation Equipment & Related Expense Food/Beverage Expense Gift/Awards/Memorials Expense olling Expense Consulting Expense Contributions/Donations Made By Printing Expense Salaries/Wages/Contract Labor Travel Out Of District Legal Services Candidate/Officeholder/Political Committee Other (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule G: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Steven A. Wadsworth 4 Date 5 Payee name 01/26/2024 Fredericksburg Standard Radio-Post 6 Amount (\$) 7 Payee address; City; Zip Code State: 40.00 712 West Main Street Reimbursement from Frederickburg, TX 78624 political contributions intended (b) Description (a) Category (See Categories listed at the top of this schedule) 8 PURPOSE Newspaper Ad Advertising EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office sought Office held Candidate / Officeholder name Complete ONLY if direct Steven A. Wadsworth County Attorney County Attorney expenditure to benefit C/OH Date Pavee name 01/25/2024 Sutherlands Lumber Co Payee address: Amount (\$) City; State: Zip Code 16.81 1511 East Main Street Reimbursement from Fredericksburg, TX 78624 political contributions intended Description Category (See Categories listed at the top of this schedule) PURPOSE Zip ties and stakes Advertising OF EXPENDITURE Check if Austin, TX, officeholder living expense Check if travel outside of Texas, Complete Schedule T. Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Steven A. Wadsworth County Attorney County Attorney Date Payee name **UPS Store** 01/25/2024 Pavee address; Amount (\$) City; Zip Code 23.56 1406 East Main Street, Suite 200 Reimbursement from Fredericksburg, TX 78624 political contributions intended Description Category (See Categories listed at the top of this schedule) PURPOSE handouts Advertisina OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete QNLY if direct expenditure to benefit C/OH Steven A. Wadsworth County Attorney County Attorney

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED