

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 FIRST MI Steven A. ----- NICKNAME LAST SUFFIX WADSWORTH	<div style="border: 2px solid black; padding: 5px;"> OFFICE USE ONLY <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg); font-size: 2em; color: red;">ELECTIONS</div> <div style="text-align: center;"> <div style="border: 1px solid red; border-radius: 50%; padding: 5px; color: red;"> SEP 12 2023 </div> </div> <div style="writing-mode: vertical-rl; transform: rotate(180deg); font-size: 2em; color: red;">GILLESPIE COUNTY</div> </div> <div style="margin-top: 10px;"> Date Received Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged </div> </div>									
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 3062, Fredericksburg, Texas 78624										
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION () - -										
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Steven A. ----- NICKNAME LAST SUFFIX WADSWORTH										
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 3062, Fredericksburg, Texas 78624										
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION () - -										
9 REPORT TYPE	<table style="width:100%; border: none;"> <tr> <td><input checked="" type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</td> </tr> <tr> <td><input checked="" type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded Modified Reporting Limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table>			<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 checked="" 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)
<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 checked="" 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	<table style="width:100%; border: none;"> <tr> <td style="text-align: center;">Month Day Year</td> <td style="text-align: center;">THROUGH</td> <td style="text-align: center;">Month Day Year</td> </tr> <tr> <td style="text-align: center;">01 / 01 / 2020</td> <td></td> <td style="text-align: center;">08 / 31 / 2023</td> </tr> </table>			Month Day Year	THROUGH	Month Day Year	01 / 01 / 2020		08 / 31 / 2023		
Month Day Year	THROUGH	Month Day Year									
01 / 01 / 2020		08 / 31 / 2023									
11 ELECTION	<table style="width:100%; border: none;"> <tr> <td style="width:30%;"> ELECTION DATE Month Day Year 03 / 05 / 2024 </td> <td style="width:70%;"> ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special </td> </tr> </table>			ELECTION DATE Month Day Year 03 / 05 / 2024	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special						
ELECTION DATE Month Day Year 03 / 05 / 2024	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special										
12 OFFICE	OFFICE HELD (if any) County Attorney	13 OFFICE SOUGHT (if known) County Attorney									
14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	<p style="font-size: 0.8em; margin: 0;">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.</p> <table style="width:100%; border: none;"> <tr> <td style="width:20%; border: none;"> <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC </td> <td style="border: none;"> <table style="width:100%; border-collapse: collapse;"> <tr><td style="border-bottom: 1px solid black; padding: 2px;">COMMITTEE TYPE</td><td style="border-bottom: 1px solid black; padding: 2px;">COMMITTEE NAME</td></tr> <tr><td style="border-bottom: 1px solid black; padding: 2px;">COMMITTEE ADDRESS</td><td style="border-bottom: 1px solid black; padding: 2px;">COMMITTEE CAMPAIGN TREASURER NAME</td></tr> <tr><td style="border-bottom: 1px solid black; padding: 2px;">COMMITTEE CAMPAIGN TREASURER ADDRESS</td><td style="border-bottom: 1px solid black; padding: 2px;"> </td></tr> </table> </td> </tr> </table>			<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	<table style="width:100%; border-collapse: collapse;"> <tr><td style="border-bottom: 1px solid black; padding: 2px;">COMMITTEE TYPE</td><td style="border-bottom: 1px solid black; padding: 2px;">COMMITTEE NAME</td></tr> <tr><td style="border-bottom: 1px solid black; padding: 2px;">COMMITTEE ADDRESS</td><td style="border-bottom: 1px solid black; padding: 2px;">COMMITTEE CAMPAIGN TREASURER NAME</td></tr> <tr><td style="border-bottom: 1px solid black; padding: 2px;">COMMITTEE CAMPAIGN TREASURER ADDRESS</td><td style="border-bottom: 1px solid black; padding: 2px;"> </td></tr> </table>	COMMITTEE TYPE	COMMITTEE NAME	COMMITTEE ADDRESS	COMMITTEE CAMPAIGN TREASURER NAME	COMMITTEE CAMPAIGN TREASURER ADDRESS	
<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	<table style="width:100%; border-collapse: collapse;"> <tr><td style="border-bottom: 1px solid black; padding: 2px;">COMMITTEE TYPE</td><td style="border-bottom: 1px solid black; padding: 2px;">COMMITTEE NAME</td></tr> <tr><td style="border-bottom: 1px solid black; padding: 2px;">COMMITTEE ADDRESS</td><td style="border-bottom: 1px solid black; padding: 2px;">COMMITTEE CAMPAIGN TREASURER NAME</td></tr> <tr><td style="border-bottom: 1px solid black; padding: 2px;">COMMITTEE CAMPAIGN TREASURER ADDRESS</td><td style="border-bottom: 1px solid black; padding: 2px;"> </td></tr> </table>	COMMITTEE TYPE	COMMITTEE NAME	COMMITTEE ADDRESS	COMMITTEE CAMPAIGN TREASURER NAME	COMMITTEE CAMPAIGN TREASURER ADDRESS					
COMMITTEE TYPE	COMMITTEE NAME										
COMMITTEE ADDRESS	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 Steven A. Wadsworth **16 Filer ID** (Ethics Commission Filers)

17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 0
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 0
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

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 or Officeholder

Steven A. Wadsworth

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Steven A. Wadsworth this the 12 day of Sept, 2023, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of Candidate/Officeholder (Declarant)