

SEP 28 2020

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME Ralph E. Hoelscher

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.

Form with fields: COMMITTEE TYPE (GENERAL, SPECIFIC), COMMITTEE NAME, COMMITTEE ADDRESS, COMMITTEE CAMPAIGN TREASURER NAME, COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

17 CONTRIBUTION TOTALS

1. 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

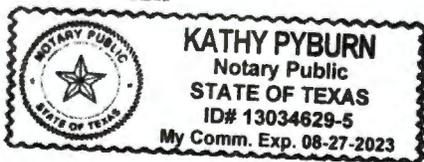
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 459.66

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 5000.00

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 Hoelscher

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ralph Hoelscher, this the 28th day of September, 2020, to certify which, witness my hand and seal of office.

Signature of officer administering oath: Kathy Pyburn

Printed name of officer administering oath: Kathy Pyburn

Title of officer administering oath: Election Clerk

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: **2**

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: **Mr.** FIRST: **Ralph** MI: **E.**
NICKNAME: LAST: **Hoelscher** SUFFIX:

OFFICE USE ONLY

Date Received

SEP 28 2020

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
14446 Arrington Road
Miles TX 76861

Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE: **(325)** PHONE NUMBER: **468-2592** EXTENSION:

Date Hand-delivered or Date Postmarked

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: **Mr.** FIRST: **Ralph** MI: **E.**
NICKNAME: LAST: **Hoelscher** SUFFIX:

Receipt # Amount \$

Date Processed

Date Imaged

7 CAMPAIGN TREASURER ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
14446 Arrington Road
Miles TX 76861

(Residence or Business)

8 CAMPAIGN TREASURER PHONE

AREA CODE: **(325)** PHONE NUMBER: **468-2592** EXTENSION:

9 REPORT TYPE

January 15 30th day before election Runoff 15th day after campaign treasurer appointment (Officeholder Only)
 July 15 8th day before election Exceeded Modified Reporting Limit Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year Month Day Year
7 / 14 / 20 THROUGH **9 / 29 / 20**

11 ELECTION

ELECTION DATE: Month Day Year: **11 / 3 / 20**
ELECTION TYPE: Primary Runoff Other Description
 General Special

12 OFFICE

OFFICE HELD (if any)
Tom Green County
Commissioner, Pct. 1

13 OFFICE SOUGHT (if known)

Tom Green County
Commissioner, Pct. 1

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