CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

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The C/OH Instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers) 00085988					2 Total pages filed: 6		
3	CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST Christopher D		MI		USE ONLY
	NAME					Date Received ELECTRONI	CALLY FILED
		NICKNAME Chris	LAST Rector		SUFFIX	07/16/2023	
4	CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivere	d or Date Postmarked
	MAILING ADDRESS	3451 River Park Dr. Apt. 712				Receipt#	Amount
	Change of Address	Fort Worth, TX 76116				Date Processed	
						Date Imaged	
5	CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Christopher		MI	-	
		NICKNAME	LAST Rector		SUFFIX		
6	CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PC 3451 River Park Dr.	BOX PLEASE);	AP	T / SUITE #; CITY	/; S	TATE; ZIP CODE
	(Residence or Business)	Apt. 712 Fort Worth, TX 76116					
7	CAMPAIGN TREASURER PHONE	AREA CODE PHOI (817) 751-0699	NE NUMBER E	EXTENSION			
8	REPORT TYPE	January 15 X July 15	30th day before		Runoff Exceeded modified reporting limit	appointment (d	campaign treasurer officeholder only) Attach C/OH-FR)
9	PERIOD COVERED	Month Day Year 01/15/2023	TH	IROUGH	Month Day 07/15/20		
10	ELECTION	ELECTION DATE Month Day Year		rimary seneral	ELECTION TYPE Runoff Special	Other	
11	OFFICE	OFFICE HELD (if any) None District 97 Tarrant	1		12 OFFICE SOUGH None District 97		
	GO TO PAGE 2						

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 6

13 C / OH NAME	Rector, Christopher [).	14 Filer ID ((Ethics Commission Filers)	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without of I officeholders are required to report this information	the candidate's or office	eholder's knowledge or	
Additional Pages	COMMITTEE TYPE COMMITTEE NAME				
	GENERAL				
	COMMITTEE ADDRESS				
	SPECIFIC				
COMMITTEE CAMPAIGN TREASURER NAME					
COMMITTEE CAMPAIGN TREASURER ADDRESS					
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)			\$ 0.00	
EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES TOTALS			\$ 0.00		
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 0.00	
CONTRIBUTION BALANCE	REPORTING PE			\$ 812.94	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00	
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.			
		Chris	stopher D. Rector		
Signature of Candidate or Officeholder					
AFFIX NOTARY STAMP / SEAL ABOVE					
Sworn to and subscribed before me, by the said, this the day					
of	, 20, to co	ertify which, witness my hand and seal of office.			
Signature of office	cer administering	Printed name of officer administering	Title of officer	r administering oath	

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

3 of 6

				3 01 6
18 FILER NAME Rector, Chr	(Ethics Commiss	sion Filers)		
20 SCHEDULE NAME OF S	SUBTOTAL	. AMOUNT		
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0.00
2. X	2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS			0.00
3. X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
4. X	SCHEDULE E: LOANS		\$	0.00
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	0.00
6. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
7. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	0.00
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	
			-	

The Instruction Guide explains now to complete this form. 2 FILER NAME Rector, Christopher D. 4 TOTAL OF UNITEMIZED PLEDGES 5 Date 6 Full name of pledgor out-of-state PAC (ID#:) 8 7 Pledgor Address; City; State; Zip Code	Amount of pledge (\$) In-kind description (If applicable)
Rector, Christopher D. 4 TOTAL OF UNITEMIZED PLEDGES 5 Date 6 Full name of pledgorout-of-state PAC (ID#:) 8 7 Pledgor Address; City; State; Zip Code	Filer ID (Ethics Commission Filers) 00085988 \$ 0.00 Amount of pledge (\$)
TOTAL OF UNITEMIZED PLEDGES 5 Date 6 Full name of pledgor	\$ 0.00 Amount of pledge (\$)
7 Pledgor Address; City; State; Zip Code	pledge (\$) (If applicable)
10 Principal occupation / Job title (See Instructions) 11 Employer (See Instructions)	Check if travel outside of Texas. Complete Schedule Tons)
20 Timespar occupation 7 oob title (occ manucions)	JIIS)

L	OANS					SCHEDUL	.E E
Tł	ne Instructio	on Guide explains how	to complete this f	orm.	1	ages Schedule E: 11 Rpt: 5/6	
	ER NAME	her D.			3 Filer ID 000859	(Ethics Commission F	-ilers)
4 TC	OTAL OF UN	IITEMIZED LOANS			•	\$	0.00
5 Da	te of loan	7 Name of lender	out-of-state PA	C (ID#:)	9 Loan Amount (\$)	
fina	lender a ancial stitution?	8 Lender address; C	ity; State;	Zip Code		10 Interest Rate	
						11 Maturity Date	
12 Pri	ncipal occupation	on / Job title (See Instructions)		13 Employer (See Instruction	s)	•	
14 De	escription of Coll	ateral		15 Check if personal funds w	ere deposited	d into political account (See Instructions)	
	JARANTOR FORMATION	17 Name of guarantor				19 Amount Guarantee	ed (\$)
	not applicable	18 Guarantor address; C	ity; State;	Zip Code			
20 Pri	ncipal occupation	on		21 Employer (See Instruction	S)	1	

		FORM C/OH - FR				
	The Instruction Guide explains how to complete this form.					
	** Complete only if "Report Type" on page 1 is marked "Final Report" **	Page 6 of 6				
1	C/OH NAME	2 Filer ID (Ethics Commission Filers)				
_	Rector, Christopher D.	00085988				
3	I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.					
	Christon	oher D. Rector				
		andidate / Officeholder				
1	FILER WHO IS NOT AN OFFICEHOLDER					
4	** Complete A & B below only if you are not an officeholder **					
	Complete A a 2 solon only if you are not all officerious.					
	A CAMPAIGN FUNDS					
	Check only one:					
	I do not have unexpended contributions or unexpended interest or income earned from political states.	ical contributions.				
	I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code 254.204.					
	B ASSETS					
	Check only one:					
	X I do not retain assets purchased with political contributions or interest or other income from	political contributions.				
	I do retain assets purchased with political contributions or interest or other income from political convert assets purchased with political contributions or interest or other income from political understand that I must dispose of assets purchased with political contributions in accordance 254.204.	al contributions to personal use. I also				
	<u> </u>	pher D. Rector				
	· ·	e of Candidate				
5	OFFICEHOLDER					
	** Complete this section only if you are an officeholder **					
	I am aware that I remain subject to filing requirements applicable to an officeholder who doe also aware that I will be required to file reports of unexpended contributions if, after filing the retain political contributions, interest or other income from political contributions, or assets printerest or other income from political contributions.	e last required report as an officeholder, I				
		105 111				
	Signatur	e of Officeholder				