

# 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  |
|  | Mr.   | Arthur   | D   |
| NICKNAME   |   | LAST   | SUFFIX  |
| Trace  |   | Hendricks  |   |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS<br><input type="checkbox"/> Change of Address | ADDRESS / PO BOX;   | APT / SUITE #;   | CITY; STATE; ZIP CODE   |
|  | 155 County Road 1821  |  | Clifton, Tx 76634   |
| 5 CANDIDATE / OFFICEHOLDER PHONE   | AREA CODE   | PHONE NUMBER   | EXTENSION   |
|  | ( 254 )   | 386 - 2221   |   |
| 6 CAMPAIGN TREASURER NAME  | MS / MRS / MR   | FIRST  | MI  |
|  | Mrs.  | Elizabeth  | D.  |
| NICKNAME   |   | LAST   | SUFFIX  |
| Beth   |   | Outlaw   |   |
| 7 CAMPAIGN TREASURER ADDRESS<br>(Residence or Business)                                  | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;   |  | CITY; STATE; ZIP CODE   |
|  | 4924 FM 219   |  | Clifton Tx 76634  |
| 8 CAMPAIGN TREASURER PHONE   | AREA CODE   | PHONE NUMBER   | EXTENSION   |
|  | ( 254 )   | 253-0836   |   |
| 9 REPORT TYPE  | <input type="checkbox"/> January 15   | <input type="checkbox"/> 30th day before election                    | <input type="checkbox"/> Runoff   |
|  | <input checked="" type="checkbox"/> July 15   | <input type="checkbox"/> 8th day before election                     | <input type="checkbox"/> Exceeded Modified Reporting Limit  |
| 10 PERIOD COVERED  | <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)  | <input type="checkbox"/> Final Report (Attach C/OH - FR)             |   |
|  | Month Day Year  | THROUGH  | Month Day Year  |
| 11 ELECTION  | ELECTION DATE   |  | ELECTION TYPE   |
|  | Month Day Year  | <input type="checkbox"/> Primary<br><input type="checkbox"/> General | <input type="checkbox"/> Runoff<br><input type="checkbox"/> Special<br><input type="checkbox"/> Other Description |
| 12 OFFICE  | OFFICE HELD (if any)  | 13 OFFICE SOUGHT (if known)  |   |
|  | Sheriff   |  |   |
| 14 NOTICE FROM POLITICAL COMMITTEE(S)<br><input type="checkbox"/> Additional Pages       | 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  | COMMITTEE NAME   |   |
|  | <input type="checkbox"/> GENERAL  | COMMITTEE ADDRESS  |   |
|  | <input type="checkbox"/> SPECIFIC   | COMMITTEE CAMPAIGN TREASURER NAME                                    |   |
|  |   | COMMITTEE CAMPAIGN TREASURER ADDRESS                                 |   |

**OFFICE USE ONLY**

**RECEIVED**

JAN 16 2025

Bosque Co. Elections

Date Received

Date Hand-delivered or Date Postmarked

Receipt #      Amount \$

Date Processed

Date Imaged

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

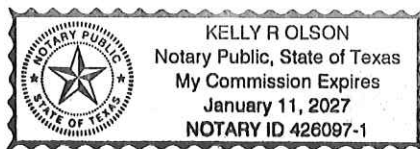
|   |   |   |
|---|---|---|
| <b>15 C/OH NAME</b><br>Arthur Trace Hendricks |   | <b>16 Filer ID (Ethics Commission Filers)</b> |
| <b>17 CONTRIBUTION TOTALS</b>                 | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$0.00  |
|   | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  | \$ 0.00                                       |
| <b>EXPENDITURE TOTALS</b>                     | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.  | \$0.00  |
|   | 4. TOTAL POLITICAL EXPENDITURES   | \$ 0.00                                       |
| <b>CONTRIBUTION BALANCE</b>                   | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD  | \$334.00                                      |
| <b>OUTSTANDING LOAN TOTALS</b>                | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD   | \$0.00  |

**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

Please complete either option below:

**(1) Affidavit**



NOTARY STAMP / SEAL

Sworn to and subscribed before me by Arthur D. Hendricks, III this the 16<sup>th</sup> day of January 20 25, to certify which, witness my hand and seal of office.

Kelly Olson Signature of officer administering oath  
Kelly Olson Printed name of officer administering oath  
Notary Public 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)