# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.

<table>
<thead>
<tr>
<th>1 Filer ID (Ethics Commission Filer)</th>
<th>2 Total pages filed:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### OFFICE USE ONLY

**Date Received**

**APR 28 2023**

City Secretary
Port Aransas, TX

**Date Hand-delivered or Date Postmarked**

**Receipt #**

**Amount $**

**Date Processed**

**Date Imaged**

### 3 CANDIDATE / OFFICEHOLDER NAME

- **Mr. / Mrs. / Mr.**
- **Jo**
- **Ellen**

### 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

- **Address / PO Box:** 1220 Sea Secret
- **City:** Port Aransas
- **State:** TX
- **Zip Code:** 78373

### 5 CANDIDATE / OFFICEHOLDER PHONE

- **Area Code:** 361
- **Phone Number:** 332-1899

### 6 CAMPAIGN TREASURER NAME

- **Mr. / Mrs. / Mr.**
- **Jo**
- **Ellen**

### 7 CAMPAIGN TREASURER ADDRESS

- **Street Address (No PO Box Please):** 1220 Sea Secret
- **City:** Port Aransas
- **State:** TX
- **Zip Code:** 78373

### 8 CAMPAIGN TREASURER PHONE

- **Area Code:** 361
- **Phone Number:** 332-1899

### 9 REPORT TYPE

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

### 10 PERIOD COVERED

- **Month:** 03
- **Day:** 01
- **Year:** 2023
- **Through:** 04/06/23

### 11 ELECTION

- **Election Date:** 05/06/23
- **Election Type:** General

### 12 OFFICE

- **Office Held (if any):**

### 13 OFFICE SOUGHT (if known):**

### 14 NOTICE FROM POLITICAL COMMITTEE(S)

- **Committee Type:**
- **Committee Name:**
- **Committee Address:**
- **Committee Campaign Treasurer Name:**
- **Committee Campaign Treasurer Address:**

**Additional Pages**

**GO TO PAGE 2**

Forms provided by Texas Ethics Commission

```text
www.ethics.state.tx.us
```

Revised 11/15/2022
<table>
<thead>
<tr>
<th>Contribution</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Total unitemized political contributions (other than pledges, loans, or guarantees of loans, or contributions made electronically)</td>
<td>$0</td>
</tr>
<tr>
<td>2. Total political contributions (other than pledges, loans, or guarantees of loans)</td>
<td>$800.00</td>
</tr>
<tr>
<td>3. Total unitemized political expenditure</td>
<td>$221.18</td>
</tr>
<tr>
<td>4. Total political expenditures</td>
<td>$221.18</td>
</tr>
<tr>
<td>5. Total political contributions maintained as of the last day of reporting period</td>
<td>$578.82</td>
</tr>
<tr>
<td>6. Total principal amount of all outstanding loans as of the last day of the reporting period</td>
<td>$0</td>
</tr>
</tbody>
</table>

**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.

Jo Hill King

**NOTARY STAMP/SEAL**

Sworn to and subscribed before me by ________________________ this the _____ day of ____________ 20____, 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

---

(2) Unsworn Declaration

My name is Jo Hill King and my date of birth is 02-22-55.

My address is 1220 Seacliff, Port Aransas, TX 78373, Nueces.

Executed in Nueces County, State of Texas, on the 28th day of April, 2023.

Jo Hill King

Signature of Candidate/Officeholder (Declanant)
## SUBTOTALS - C/OH

<table>
<thead>
<tr>
<th>SCHEDULE</th>
<th>NAME OF SCHEDULE</th>
<th>SUBTOTAL AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS</td>
<td>$800.00</td>
</tr>
<tr>
<td>2.</td>
<td>SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS</td>
<td>$</td>
</tr>
<tr>
<td>3.</td>
<td>SCHEDULE B: PLEDGED CONTRIBUTIONS</td>
<td>$</td>
</tr>
<tr>
<td>4.</td>
<td>SCHEDULE E: LOANS</td>
<td>$</td>
</tr>
<tr>
<td>5.</td>
<td>SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS</td>
<td>$221.18</td>
</tr>
<tr>
<td>6.</td>
<td>SCHEDULE F2: UNPAID INCURRED OBLIGATIONS</td>
<td>$</td>
</tr>
<tr>
<td>7.</td>
<td>SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS</td>
<td>$</td>
</tr>
<tr>
<td>8.</td>
<td>SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD</td>
<td>$</td>
</tr>
<tr>
<td>9.</td>
<td>SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS</td>
<td>$</td>
</tr>
<tr>
<td>10.</td>
<td>SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH</td>
<td>$</td>
</tr>
<tr>
<td>11.</td>
<td>SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS</td>
<td>$</td>
</tr>
<tr>
<td>12.</td>
<td>SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER</td>
<td>$</td>
</tr>
</tbody>
</table>
MONEY POLITICAL CONTRIBUTIONS

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

<table>
<thead>
<tr>
<th>1</th>
<th>Total pages Schedule A1:</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>FILER NAME</td>
</tr>
<tr>
<td>3</td>
<td>Filer ID (Ethics Commission Filers)</td>
</tr>
<tr>
<td>4</td>
<td>Date</td>
</tr>
<tr>
<td>5</td>
<td>Full name of contributor</td>
</tr>
<tr>
<td>6</td>
<td>Contributor address; City: State: Zip Code</td>
</tr>
<tr>
<td>7</td>
<td>Amount of contribution ($)</td>
</tr>
<tr>
<td>8</td>
<td>Principal occupation / Job title (See Instructions)</td>
</tr>
<tr>
<td>9</td>
<td>Employer (See Instructions)</td>
</tr>
</tbody>
</table>

**Example:**

<table>
<thead>
<tr>
<th>Date</th>
<th>Full name of contributor</th>
<th>□ out-of-state PAC (ID#)</th>
<th>Amount of contribution ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Keo Marsh</td>
<td></td>
<td>$800.00</td>
</tr>
<tr>
<td></td>
<td>356 Blue Heron, Port Aransas, TX 78373</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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