## **CANDIDATE / OFFICEHOLDER** FORM C/OH **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. MS / MRS / MR 3 CANDIDATE / MI OFFICE USE ONLY **OFFICEHOLDER** GENNETH MR NAME Date Received NICKNAME LOGSDON APT / SUITE #; CITY; 1:41 pm KEN ADDRESS / PO BOX: 4 CANDIDATE / ZIP CODE OFFICEHOLDER 01/16/2024 628 SCENIC RANCH MAILING **ADDRESS** FAIRLIEW, TX 75069 Change of Address AREA CODE PHONE NUMBER 5 CANDIDATE/ **EXTENSION** Date Hand-delivered or Date Postmarked **OFFICEHOLDER** (318) 840-5536 2024 **PHONE** MS/MRS/MR FIRST ML CLAYTON LAST Amount \$ Receipt # 6 CAMPAIGN **TREASURER** Date Processed NAME Date Imaged BARNS STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; 7 CAMPAIGN TREASURER 6007 CATTLE BARON RD **ADDRESS** FAIRVIEW TX 75069 (Residence or Business) AREA CODE PHONE NUMBER EXTENSION CAMPAIGN **TREASURER** PHONE 632-1141 9 REPORT TYPE 30th day before election 15th day after campaign Runoff January 15 treasurer appointment (Officeholder Only) Exceeded Modified 8th day before election Final Report (Attach C/OH - FR) Reporting Limit 10 PERIOD Month Day Month Day **COVERED** 1/21/2021 1/14/2024 THROUGH ELECTION DATE **ELECTION TYPE** 11 ELECTION Primary Other Month Description General Special OFFICE HELD (if any) 12 OFFICE 13 OFFICE SOUGHT (if known) FAIRNIEW TOWN COUNCIL # 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 14 NOTICE FROM **POLITICAL** CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. COMMITTEE(S) COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS **GO TO PAGE 2**

## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 2

15 C/OH NAME			16 Filer ID (Ethics Commission Filers)		
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLIT     PLEDGES, LOANS, OR GUA     CONTRIBUTIONS MADE EL		AN \$ O		
	2. TOTAL POLITICAL CONT (OTHER THAN PLEDGES, LO	RIBUTIONS OANS, OR GUARANTEES OF LOANS	\$ D		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITI	CAL EXPENDITURE.	\$ 0		
	4. TOTAL POLITICAL EXPEN	NDITURES	\$		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIB OF REPORTING PERIOD	AST DAY \$			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT LAST DAY OF THE REPORT	OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE \$		
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.					
			. 0		
		1210			
		Very			
		Signature of C	Candidate or Officeholder		
		( )	$\bigvee$		
		$\circ$	•		
	Places	nlote either ention hale			
Please complete either option below:					
		LANGE TOSHILL	TEVENCON		
(4) A 661 d m eth			STEVENSON State of Toyon		
(1) Affidavit  Notary Public, State of Texas  Comm. Expires 02-27-2027					
		2.0	131831696		
		William Hotaly 15	101001090		
NOTARY STAMP/SEA	1				
Sworn to and subscribed before me by <u>kenneth Logsdon</u> this the <u>16</u> day of <u>January</u> ,					
20, to certify	which, witness my hand and seal of office.		A 1 1		
Callena ten	revea Toshva	tevenson	Notary		
Sanature of officer administe		officer administering oath	Title of officer administering oath		
			Ţ.		
		OR			
(2) Unsworn Declaration	on				
My name is		. and my date of birth	is .		
iviy address is	(sheeth)		(abota) (sin action)		
	(street)	( ),	(state) (zip code) (country)		
Executed in	County, State of	, on the day of	, 20		
		(mon	im) (year)		
		Clanatura at O	Hidata/Officeholder /Deslerent\		
		Signature of Cano	didate/Officeholder (Declarant)		

## CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

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" ••					
1	C/OH N	NAME	2 Filer ID (Ethics Commission Filers)			
	X	ENNETH LOGSDON				
3		SIGNATURE				
	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.  Signature of Candidate / Officeholder					
4	FILER WHO IS NOT AN OFFICEHOLDER  Complete A & B below only if you are not an officeholder.					
	A.	CAMPAIGN FUNDS				
	Checl	k only one:				
		I do not have unexpended contributions or unexpended interest or income earned from	om political contributions.			
		I have unexpended contributions or unexpended interest or income earned from political not convert unexpended political contributions or unexpended interest or incompersonal use. I also understand that I must file an annual report of unexpended cunexpended contributions or unexpended interest or income earned on political contributions that I must dispose of unexpended political contributions or unexpended that I must dispose of unexpended political interest or income earned on political contributions in accordance with the requirement	me earned on political contributions to contributions and that I may not retain ributions longer than six years after cal contributions and unexpended			
	B. ASSETS					
	Check only one:					
		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 that I may not convert assets purchased with political contributions or interest or other personal use. I also understand that I must dispose of assets purchased with political requirements of Election Code, § 254.204.	r income from political contributions to			
		S	ignature of Candidate			
5		EHOLDER				
	com	I am aware that I remain subject to filing requirements applicable to an officeholder who defile. I am also aware that I will be required to file reports of unexpended contributions if, an officeholder, I retain political contributions, interest or other income from political contributions or interest or other income from political contributions.	after filing the last required report as			