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 FIRST CANDIDATE / MI OFFICE USE ONLY **OFFICEHOLDER** MR Robert NAME Date Received SUFFIX NICKNAME LAST Rob Campbell Jr ADDRESS / PO BOX; APT / SUITE #: 4 CANDIDATE / STATE; ZIP CODE **OFFICEHOLDER** 800 Southriver MAILING Wimberley, TX 78676 **ADDRESS** Change of Address AREA CODE PHONE NUMBER 5 CANDIDATE/ **EXTENSION** Date Hand-delivered or Date Postmarked **OFFICEHOLDER** (512 754-4985 PHONE Receipt # Amount \$ MS / MRS / MR FIRST **CAMPAIGN** MI **TREASURER** Susan Mrs R Date Processed NAME LAST NICKNAME SUFFIX Date Imaged Campbell STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; STATE; ZIP CODE CAMPAIGN **TREASURER ADDRESS** (Residence or Business) AREA CODE PHONE NUMBER **EXTENSION CAMPAIGN TREASURER PHONE** 9 REPORT TYPE 15th day after campaign 30th day before election Runoff January 15 treasurer appointment (Officeholder Only) **Exceeded Modified** July 15 Final Report (Attach C/OH - FR) 8th day before election Reporting Limit 10 PERIOD Year Month Month Year **COVERED THROUGH** 11 ELECTION **ELECTION DATE ELECTION TYPE** Primary Other Day Description 5 20 -General Special OFFICE HELD (if any) 13 OFFICE SOUGHT (if known) 12 OFFICE WISD Board of Trustees, Pl. 3 THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT 14 NOTICE FROM 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. **POLITICAL** COMMITTEE(S) COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME **SPECIFIC** COMMITTEE CAMPAIGN TREASURER ADDRESS

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CAMPAIGN FINANCE REPORT		COVER SHEET PG 2		
15 C/OH NAME Rob Campbell		16 Filer	ID (Ethics Commis	sion Filers)
17 CONTRIBUTION TOTALS	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
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.		\$	0.00
,	4. TOTAL POLITICAL EXPENDITURES		\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	ST DAY	\$	0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	FTHE	\$	0.00
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 this the 21 day of OCTOBUR.

See EXECUTIVE ASST. TO Superintendent Sworn to and subscribed before me by _ to certify which, witness my hand and seal of office. KShley Buse Signature of officer administering oath Printed name of officer administering oath (2) Unsworn Declaration , and my date of birth is $\frac{10/19/1964}{1}$ My name is Rob Campbell My address is 800 Southrvier **USA** Wimberlev 78676 (state) (zip code) (street) (city) (country) County, State of TX Executed in Hays Octobér 2024 (year)

Signature of Candidate/Officeholder (Declarant)