# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

The C/OH Instruction G	Guide explains how to complete this form.	ID (Ethics Commission Filers)	2 Total pages filed: 5
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Mr. Steven	мі L.	OFFICE USE ONLY
TO WIL	NICKNAME LAST "Steve" SEIDER	SUFFIX	Date Received 2022
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;  12304 Ferris Creek Lane Dallas,	STATE; ZIP CODE Texas 75243	2 JUL 13 JOHN F. W. COUNTY O
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (972 ) 839-1487	EXTENSION	Date Hand-delivered of Date Postmarked
6 CAMPAIGN TREASURER NAME	Ms / Mrs / Mr First Mr. Randall	MI	Date Processed
	NICKNAME LAST McCleskey	SUFFIX	Date Imaged
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;  6616 Pemberton Drive	сіту; Dallas	state; zip code  Texas 75230
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER ( 214 ) 725-0169	EXTENSION	
9 REPORT TYPE	January 15 30th day before election  July 15 8th day before election	Runoff  Exceeded Modified Reporting Limit	15th day after campaign treasurer appointment (Officeholder Only)  Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year  1 / 1 / 22 THR	ough 6	Day Year / 30 / 22
11 ELECTION	Month Day Year	ELECTION TYPE unoff Other Description pecial	
12 OFFICE		3 OFFICE SOUGHT (If known Justice of the Pea	ace Precinct 3, Place 2
14 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OF THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE E CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT COMMITTEE TYPE  COMMITTEE NAME  COMMITTEE ADDRESS	BEEN MADE WITHOUT THE CAND	IDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR
Additional Pages	SPECIFIC COMMITTEE CAMPAIGN TREASURER NA		
	GO TO PAGE		

## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

#### FORM C/OH COVER SHEET PG 2

		NO THE RESERVE AND ASSESSMENT OF THE PROPERTY		
15 C/OH NAME SEIDER, Steve	en L. (Steve)		16 Filer ID	(Ethics Commission Filers)
17 CONTRIBUTION TOTALS		TICAL CONTRIBUTIONS (OTHER TH JARANTEES OF LOANS, OR ELECTRONICALLY)	HAN \$	0.00
	2. TOTAL POLITICAL CON (OTHER THAN PLEDGES,	<b>TRIBUTIONS</b> LOANS, OR GUARANTEES OF LOAR	vs) \$	1,500.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLI	TICAL EXPENDITURE.	\$	0.00
	4. TOTAL POLITICAL EXPI	ENDITURES	\$	79.66
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTR     OF REPORTING PERIOD	IBUTIONS MAINTAINED AS OF THE	LAST DAY \$	20,531.74
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUN LAST DAY OF THE REPOR	IT OF ALL OUTSTANDING LOANS AS RTING PERIOD	S OF THE \$	0.00
<b>\</b>	Nuria Garcia	mplete either option bel	ow:	
(1) Affidavit	Nuria Garcia My Commission Expires 06/08/2024 ID No 128086202			
NOTARY STAMP/SEA				
Sworn to and subscribed	$\leq 10^{-10}$	1. Seider this to	/	stany Public
Signature of officer admiraster	Printed name of	of officer administering oath	Titl	e of officer administering oath
(2) Unsworn Declaration	on	OR		A COLLECTION TAKE
My name is		, and my date of birt	h is	
My address is				
Executed in	(street) County, State of	(city) , on the day of	255 27 27 27	code) (country) 20 (year)
			onth) indidate/Officehol	

### SUBTOTALS - C/OH

#### FORM C/OH COVER SHEET PG 3

	DER, Steven L. (Steve)		mmissio	on Filers)
AND THE SERVICE AND SERVICE AN	DULE SUBTOTALS E OF SCHEDULE		3	SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	1,500.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE E: LOANS		\$	
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTR	RIBUTIONS	\$	
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS			
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CO	NTRIBUTIONS	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS			79.66
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH			
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS			
12.	2. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER			
12.		NS RETURNED	\$	

### MONETARY POLITICAL CONTRIBUTIONS

### SCHEDULE A1

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

The	Instruction Guide explains how to	complete this	form.	1	Total pages Schedule A1:
2 FILER NAME SEIDER,	Steven L. (Steve)			3	Filer ID (Ethics Commission Filers)
4 Date 01/12/2022	<ul><li>5 Full name of contributor</li><li>Apartment Associaiton of</li><li>6 Contributor address;</li><li>5728 LBJ Freeway, Suite</li></ul>	Greater D	State; Zip Coo	de	1,500.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See	e Instruction	s)
Date	Full name of contributor	out-of-state PAC	C (ID#:	)	Amount of contribution (\$)
	Contributor address;	City;	State; Zip Cod	de	
Principal occup	ation / Job title (See Instructions)		Employer (See	e Instruction	s)
Date	Full name of contributor	out-of-state PAC	C (ID#:		Amount of contribution (\$)
	Contributor address;		State; Zip Cod	de	
Principal occup	nation / Job title (See Instructions)		Employer (See	e Instruction	s)
Date	Full name of contributor	out-of-state PA(	C (ID#:		Amount of contribution (\$)
	Contributor address;	City;	State; Zip Cod	le	
Principal occup	vation / Job title (See Instructions)		Employer (See	e Instruction	s)
	ATTACH ADDITION				Marian
	If contributor is out-of-state PAC, pl	ease see Instr	uction quide for add	ditional rend	orting requirements

## POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

•	The Instruction Guide explains how to	complete this form.			
Total pages Schedule G:	<sup>2</sup> FILER NAME SEIDER, Steven L. (Steve)		3 Filer ID (Ethics Commission Filers)		
<sup>4</sup> Date 01/07/2022	5 Payee name Office Depot				
79.66  Reimbursement from political contributions intended	7 Payee address; 11615 N. Central Expressway	city; Dallas	State; Zip Code Texas 75229		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description Maps and Exhibits (Redistricting)			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office hel			
Date	Payee name				
Amount (\$)	Payee address;	City;	State; Zip Code		
Reimbursement from political contributions intended					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/		Office sought Office he			
Date	Payee name				
Amount (\$)	Payee address;	City;	State; Zip Code		
Reimbursement from political contributions intended					
PURPOSE OF	Category (See Categories listed at the top of this schedule)	Description			
EXPENDITURE	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
EXPENDITURE	Check if travel outside of Texas. Complete Schedule T.	Check it Austii	ii, iii, unicondidoi iiviiig expense		