CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction C	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 3		
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR Brad	R	OFFICE USE ONLY		
INAME	NICKNAME Westmorela	suffix	Date RePRECEIVE		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	515 San Jac	city; state; zip code Linto St. X 18644	NOV 1 7 2022		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (512) 213-80	extension D 8 O	CITY SECRETARY'S OFFICE Date Hand-delivered or Date Postmarked Receipt # Amount \$		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST Brad NICKNAME LAST	Suffix	Date Processed		
	Westmora	<i>,</i> , , , , , , , , , , , , , , , , , ,	Date Imaged		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SL	nto, Lockhart	STATE; ZIP CODE 7 78644		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 213-808	EXTENSION			
9 REPORT TYPE	January 15 30th day before el	ction Exceeded Modified	15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	08 B /2022	Reporting Limit Month THROUGH	Day Year / 17 / 20 2 Z		
11 ELECTION	Month Day Year Primary 11 / 8 / 2022 General	ELECTION TYPE Runoff Other Description Special			
12 OFFICE	Councilmenter Atal	arge 13 OFFICE SOUGHT (If known	Imember At Large		
14 NOTICE FROM POLITICAL COMMITTEE(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 CONSENT. CANDIDATES AND OFFICEHOLDER'S REPENDITURES. COMMITTEE TYPE COMMITTEE NAME				
Additional Pages	GENERAL COMMITTEE ADDRESS SPECIFIC COMMITTEE CAMPAIGN TREA	ASURER NAME			
	COMMITTEE CAMPAIGN TRE	ASURER 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 POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0			
	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0			
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0			
	4. TOTAL POLITICAL EXPENDITURES	\$ O			
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	\$			
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	* D			
į.	wear, or affirm, under penalty of perjury, that the accompanying report is true	and correct and includes all information			
re	quired to be reported by me under Title 15, Election Code.	1-1			
	is I cot.	The state of the s			
	Signature of Ca	ndidate or Officeholder			
	Please complete either option below	r:			
CONNIE CONSTANCIO Notary iD #5271582 My Commission Expires May 25, 2025 NOTARY STANDINGLE Sworn to and subscribed before me by Drad Wednerold this the 17th day of November, 20 22, to certify which, witness my hand and seal of office.					
\sim	which, witness my hand and seal of office.	day of from the first			
(A)	stance Constancio	notary Public			
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath					
	OR				
(2) Unsworn Declarati	on				
Mv name is	, and my date of birth is				
	, , , , , , , , , , , , , , , , , , , ,				
		tate) (zip code) (country)			
Executed in	County, State of , on the day of(month	, 20			
	(month) (year)			
	Signature of Candid	ate/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 I	DRAD Westmone CAND	2 Filer ID (Ethics Commission Filers)				
3	SIGNA	ATURE TOL W.					
	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							
	A.	CAMPAIGN FUNDS					
	Chec	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 contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.						
	В.	ASSETS					
	Check only one:						
		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 political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.						
		·	Signature of Candidate				
5		EHOLDER					
	Con	nplete this section <i>only</i> if you are an officeholder ••					
		I am aware that I remain subject to filing requirements applicable to an officeholder who of file. 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				
			gnature of Officeholder				