# **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT**

### FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how	to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages file	<sup>d:</sup> 6
3 CANDIDATE / OFFICEHOLDER NAME	ms/mrs/mr Mr	first <b>Jon</b>	МІ	OFFICE USE ONLY	
TV WIL	NICKNAME	LAST Welch	SUFFIX	RECE	EIVED
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX;	APT / SUITE #; CITY; STATE; ZIP CODE  APR 28 2023  Rosenberg, TX 77471  LAMAR CISD SUPERINTENDENT'S OFFICE			R CISD
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand-delivered	or Date Postmarked
6 CAMPAIGN TREASURER	MS / MRS / MR Mr	FIRST <b>Kevin</b>	МІ	Receipt #	Amount \$
NAME	NICKNAME	LACT		Date Processed	
	NICKNAME	Cain	SUFFIX	Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (	NO PO BOX PLEASE); APT / S	GUITE #; CITY;	STATE;	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
9 REPORT TYPE	January 15	30th day before 6	election Runoff	15th day aft treasurer ap (Officeholder	
	July 15	8th day before ele	ection Exceeded Modified Reporting Limit	Final Report	(Attach C/OH - FR)
10 PERIOD COVERED	Month 04	Day Year / 06 / 2023	THROUGH 04	Day Year / 28 / 20	23
11 ELECTION	ELECTION DA	TE	ELECTION TYPE		
	Month Day	Year Primary	Runoff Other		
	05/06		Description		
12 OFFICE	OFFICE HELD (if any) LCISD Boar	d of Trustees Se	eat 5 LCISD Board	•	Seat 5
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 ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.				
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME			
Additional Pages	GENERAL COMMITTEE ADDRESS				
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TR	EASURER ADDRESS		
GO TO PAGE 2					

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

15 C/OH NAME	Jon Welch	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)	\$		
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$		
	4. TOTAL POLITICAL EXPENDITURES	\$ 325.06		
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS     OF REPORTING PERIOD	\$ 699.77		
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS O     LAST DAY OF THE REPORTING PERIOD	F THE \$		
18 SIGNATURE IS	swear, or affirm, under penalty of perjury, that the accompanying report is tru	e and correct and includes all information		
re	quired to be reported by me under Title 15, Election Code.			
	\ ha /	1/2/		
	Sidnatura of S	andidate or Officeholder		
	Signature of Ca	indicate of Officendider		
	Diseas normalete sither autien helen			
	Please complete either option below	v:		
(1) Affidavit				
NOTARY STAMP/SEA	L			
Sworn to and subscribed	before me by this the	day of,		
1		, day of,		
20, to certify which, witness my hand and seal of office.				
Signature of officer administe	ering oath Printed name of officer administering oath	Title of officer administering oath		
	OR			
(2) Unsworn Declarati	on			
My name isJon	Wolch			
My address is		X , 77471, USA .		
, addi 000 10		state) (zip code) (country)		
Executed in Fort Be				
	(mont			
	Signature of Candi	date/Officeholder (Declarant)		

### **SUBTOTALS - C/OH**

## FORM C/OH COVER SHEET PG 3

19	FILER NAME Jon Welch	20 Filer ID (Ethics Con	mmission Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE E: LOANS		\$
5.	X SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	ONTRIBUTIONS	\$ 218.08
6.	X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 106.98
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FU	NDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO	A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	ONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTO FILER	TIONS RETURNED	\$

#### POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

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

Event Expense Fees

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Politica	Food/Beverage Expense Pol By Gift/Awards/Memorials Expense Prir	lling Expense Travel In I nting Expense Travel Ou	auon Equipment & Related Expense District  It Of District  Iter a category not listed above)
Credit Card Payment	The Instruction Guide explains ho		,
1 Total pages Schedule F1:		3 Filer	ID (Ethics Commission Filers)
2	Jon Welch		
4 Date	5 Payee name		
4-14-2023	FaceBook		
6 Amount (\$)	7 Payee address;	City;	State; Zip Code
\$25.00	1 Hacker Way	Menlo Park, C	A 94025
8	(a) Category (See Categories listed at the top of this sched	dule) (b) Description	
PURPOSE OF EXPENDITURE	Advertising Expense	Online ads	
	(c) Check if travel outside of Texas. Complete Schedu	ule T. Check if Austin, TX, office	holder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name H	Office sought	Office held
Date	Payee name		
4-21-2023	FaceBook		
Amount (\$)	Payee address;	City;	State; Zip Code
\$25.00	1 Hacker Way	Menlo Park, CA 9	94025
	Category (See Categories listed at the top of this schedu	ule) Description	
PURPOSE OF EXPENDITURE	Advertising Expenses	Online ac	ds
	Check if travel outside of Texas. Complete Schedu	le T. Check if Austin, TX, office	holder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name H	Office sought	Office held
Date	Payee name		
Amount (\$)	Payee address;	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedu	ule) Description	
ļ	Check if travel outside of Texas. Complete Schedul	le T. Check if Austin, TX, office	holder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS NEEDED	

#### POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

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

Event Expense Fees
Food/Beverage Expense Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundralsing Expense
Transportation Equipment & Related Expense
Transport In District

Travel out of District	Contributions/Donations Made By Candidate/Officeholder/Political Credit Card Payment	y Gift/Awards/Memorials Expense Printing Il Committee Legal Services Salaries	Expense //Wages/Contract Labor	Travel In District Travel Out Of Distri Other (enter a categ	ct gory not listed above)	
Jon Welch    Date   4/22/2023   J. Staley	Total pages Schedule F1:		complete this form.	3 Filer ID (Ethic	cs Commission Filers)	
J. Staley  J. Staley  J. Staley  Arnount (\$)  PURPOSE OF EXPENDITURE  (\$)  Complete ONLY if direct or complete Schedule To Complete Only if direct or comple	_				,	
Amount (\$)		5 Payee name				
Section of the part of the part of this schedule   Section of the part of this schedule	4/22/2023	J. Staley				
(a) Category (See Categories issed at the top of this schedule)  PURPOSE OF EXPENDITURE  (c) Check travel outside of Taxas. Complete Schedule T Check if Austin, TX. officeholder living expense  Complete ONLY if direct expenditure to benefit C/OH  Candidate / Officeholder name  Candidate / Officeholder name  Office sought  Office sought  Office held  Category (See Categories listed at the top of this schedule)  Purpose OF EXPENDITURE  Candidate / Officeholder name  Candidate / Officeholder name  Category (See Categories listed at the top of this schedule)  Category (See Categories listed at the top of this schedule)  Category (See Categories listed at the top of this schedule)  Category (See Categories listed at the top of this schedule)  Candidate / Officeholder name  Complete ONLY if direct expenditure to benefit C/OH  Category (See Categories listed at the top of this schedule)  Candidate / Officeholder name  Candidate / Officeholder name  Office sought  Office sought  Category (See Categories listed at the top of this schedule)  Purpose OF EXPENDITURE  Category (See Categories listed at the top of this schedule)  Travel out of District  Category (See Categories listed at the top of this schedule)  Category (See Categories listed at the top of this schedule)  Travel out of District  Complete ONLY if direct expenditure to benefit C/OH  Candidate / Officeholder name  Office sought  Office sought  Office held  Office held  Office held  Office held  Office held	Amount (\$)	7 Payee address;	City;	State;	Zip Code	
PURPOSE OF EXPENDITURE    Complete ONLY if direct expenditure to benefit C/OH    Category (See Categories listed at the top of this schedule)	\$60.00		Richmond,	TX	77469	
Complete ONLY if direct expenditure to benefit C/OH	3	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
OF EXPENDITURE  (e) Check if travel outside of Toxas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Office sought Office held		Salarios/Magos/Contract Labor	Distributi	on of commi	~~ ~~ ~~	
Office sought Office held  Candidate / Officeholder name Office sought Officeholder name Office sought Officeholder name Office held  Category (See Categories listed at the top of this schedule)  Category (See Categories listed at the top of this schedule)  Category (See Categories listed at the top of this schedule)  Candidate / Officeholder name Office sought Office held  Category (See Categories listed at the top of this schedule)  Candidate / Officeholder name Office sought Office sought Office held  Category (See Categories listed at the top of this schedule)  Candidate / Officeholder name Office sought Office held  Category (See Categories listed at the top of this schedule)  Purpose Officeholder living expense  Category (See Categories listed at the top of this schedule)  Travel out of District  Check lif Austlin, TX, officeholder living expense  Complete ONLY if direct  Candidate / Officeholder name Office sought Office held Office held Office held Office held	OF	Salaries/ Wages/ Contract Labor	Distribution of campaign materials.		gn materials.	
Date   Arount (\$)   Payee address;   City;   State:   Zip Code   Richmond,   TX   77469		(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	tin, TX, officeholder livir	ng expense	
Amount (\$) Payee address; City: State; Zip Code \$42.00 Richmond, TX 77469  PURPOSE OF EXPENDITURE  Category (See Categories listed at the top of this schedule)  Category (See Categories listed at the top of this schedule)  Category (See Categories listed at the top of this schedule)  Category (See Categories listed at the top of this schedule)  Category (See Categories listed at the top of this schedule)  Category (See Categories listed at the top of this schedule)  Candidate / Office holder living expense  Candidate / Office holder name  Office sought  Office hold  Payee name  A. Staley  Amount (\$) Payee address; City: State; Zip Code  Richmond, TX 77469  Category (See Categories listed at the top of this schedule)  Purpose OF EXPENDITURE  Category (See Categories listed at the top of this schedule)  Travel out of District  Check if Austin, TX, officeholder living expense  Complete QNLY if direct complet			Office sought		Office held	
Amount (\$) Payee address; City; State; Zip Code Richmond, TX 77469  PURPOSE OF EXPENDITURE  Candidate / Officeholder name  Candidate / Officeholder sisted at the top of this schedule)  Date A/24/2023  Amount (\$) Payee address; Complete Schedule T. Check if Austin, TX, officeholder living expense  Complete ONLY if direct expenditure to benefit C/OH  Candidate / Officeholder name  Candidate / Officeholder name  City: State; Zip Code Richmond, TX 77469  Category (See Categories listed at the top of this schedule)  Payee address; City: State; Zip Code Richmond, TX 77469  Category (See Categories listed at the top of this schedule)  Purpose OF EXPENDITURE  Category (See Categories listed at the top of this schedule)  Category (See Categori	Date	Payee name				
S42.00  Richmond, TX 77469  PURPOSE OF EXPENDITURE  Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Complete ONLY if direct expenditure to benefit C/OH  Payee name  4/24/2023  Amount (\$)  Payee address;  Category (See Categories listed at the top of this schedule)  Purpose OF EXPENDITURE  Category (See Categories listed at the top of this schedule)  Category (See Categories listed at the top of this schedule)  Purpose OF EXPENDITURE  Category (See Categories listed at the top of this schedule)  Category (See Categories listed	4/23/2023	H. Welch				
PURPOSE OF EXPENDITURE  Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Distribution of campaign materials.  Check if ravel outside of Texas. Complete Schedule T.  Candidate / Office holder name  Candidate / Office holder name  Candidate / Office holder name  Office sought  Office sought  Office hold  Payee name  A. Staley  Amount (\$)  Payee address;  City;  State;  Zip Code  Richmond,  TX 77469  Category (See Categories listed at the top of this schedule)  Purpose OF EXPENDITURE  Category (See Categories listed at the top of this schedule)  Category (See Categories li	Amount (\$)	Payee address;	City;	State;	Zip Code	
PURPOSE OF EXPENDITURE  Salaries/Wages/Contract Labor  Check if tavel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Complete ONLY if direct expenditure to benefit C/OH  Candidate / Officeholder name  Office sought  Office held  Office held  Payee name  4/24/2023  A. Staley  Amount (\$)  Payee address;  City; State; Zip Code  Richmond, TX 77469  Category (See Categories listed at the top of this schedule)  Purpose OF EXPENDITURE  Check if Austin, TX, officeholder living expense  Complete ONLY if direct expenditure to benefit C/OH  Candidate / Officeholder name  Office sought  Office sought  Office held	\$42.00		Richmond,	TX	77469	
Check if travel outside of Texas. Complete Schedule T.   Check if Austin, TX, officeholder living expense		Category (See Categories listed at the top of this schedule)	Description			
Complete ONLY if direct expenditure to benefit C/OH  Date	OF	Salaries/Wages/Contract Labor	Distribution of campaign mater		gn materials.	
Payee name  4/24/2023  Amount (\$) Payee address; City; State; Zip Code Richmond, TX 77469  Category (See Categories listed at the top of this schedule) Purpose OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Payee andress; City; State; Zip Code Richmond, TX 77469  Description Reimbursement for two trips of mileage to pick-up campaign signage and material Check if travel outside of Texas. Complete Schedule T.  Candidate / Office holder name  Candidate / Officeholder name  Office sought  Office held		Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense			
Amount (\$) Payee address; City; State; Zip Code \$66.08  PURPOSE OF EXPENDITURE  Category (See Categories listed at the top of this schedule)  Check if travel outside of Texas. Complete Schedule T.  Candidate / Officeholder name  Candidate / Officeholder name  City; State; Zip Code Richmond, TX 77469  Description Reimbursement for two trips of mileage to pick-up campaign signage and material complete Schedule T.  Check if Austin, TX, officeholder living expense  Candidate / Officeholder name  Office sought  Office held			Office sought		Office held	
Amount (\$) Payee address; City; State; Zip Code \$66.08  PURPOSE OF EXPENDITURE  Category (See Categories listed at the top of this schedule)  Travel out of District  Check if travel outside of Texas. Complete Schedule T.  Candidate / Office holder name  Candidate / Office holder name  City; State; Zip Code Richmond, TX 77469  Description Reimbursement for two trips of mileage to pick-up campaign signage and material Check if Austin, TX, officeholder living expense  Candidate / Officeholder name  Office sought  Office held	Date	Payee name				
\$66.08    Richmond, TX 77469	4/24/2023	A. Staley				
PURPOSE OF EXPENDITURE  Category (See Categories listed at the top of this schedule)  Travel out of District  Check if travel outside of Texas. Complete Schedule T.  Complete ONLY if direct expenditure to benefit C/OH  Category (See Categories listed at the top of this schedule)  Reimbursement for two trips of mileage to pick-up campaign signage and material  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Candidate / Officeholder name  Office sought  Office held	Amount (\$)	Payee address;	City;	State;	Zip Code	
PURPOSE OF EXPENDITURE  Travel out of District  Check if travel outside of Texas. Complete Schedule T.  Complete ONLY if direct expenditure to benefit C/OH  Candidate / Officeholder name  Reimbursement for two trips of mileage to pick-up campaign signage and material to pick-up campaign signage and material confidence of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Candidate / Officeholder name  Office sought  Office held	\$66.08		Richmond,	TX	77469	
Travel out of District to pick-up campaign signage and material Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Complete ONLY if direct expenditure to benefit C/OH  Candidate / Officeholder name  Office sought  Office held		Category (See Categories listed at the top of this schedule)	Description			
Complete ONLY if direct expenditure to benefit C/OH  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Office sought  Office held	OF	Travel out of District	Reimbursement for two trips of mileage & to pick-up campaign signage and materia		_	
Complete ONLY if direct expenditure to benefit C/OH  Candidate / Officeholder name Office sought Office held		Check if travel outside of Texas. Complete Schedule T.	Check if Aust	Check if Austin, TX, officeholder living expense		
ALL TO THE PERSON OF THE PERSON OF THE POLICE OF THE PERSON OF THE PERSO			IS SCHEDULE AS NE	EDED		

### **UNPAID INCURRED OBLIGATIONS**

#### SCHEDULE F2

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

EXPENDITURE CATEGORIES FOR BOX 10(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica	Fees Office Offi	payment/Reimbursement verhead/Rental Expense expense Expense Wages/Contract Labor	Rental Expense Transportation Equipment & Related Exp Travel In District Travel Out Of District		
	The Instruction Guide explains how to	complete this form.			
1 Total pages Schedule F2:	2 FILER NAME Jon Welch		3 Filer ID (Ethics Con	mmission Filers)	
4 TOTAL OF UNITER	MIZED UNPAID INCURRED OBLIGATION	NS	\$106.98		
5 Date 4-28-2023	6 Payee name FaceBook				
7 Amount (\$)	8 Payee address;	City;	State;	Zip Code	
\$23.26	1 Hacker Way	Menlo	Park, CA 94025		
9 TYPE OF EXPENDITURE	Political X Non-F	Political			
10	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
PURPOSE OF EXPENDITURE	Advertising Expense	Onli	Online ads		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Au	stin, TX, officeholder living e	kpense	
11 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH					
Date	Payee name				
4-28-2023	Google Ads				
Amount (\$)	Payee address;	City;	State;	Zip Code	
\$83.72	1600 Amphitheatre Pkwy	Mountain	View, CA 94043	3	
TYPE OF EXPENDITURE	Political X Non-	Political			
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF EXPENDITURE	Advertising Expense	Onlin	ne ads		
	Check if travel outside of Texas. Complete Schedule T	. Check if A	Austin, TX, officeholder living	expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought	Office he	ld	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					