

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

|   |   |   |  |   |
|---|---|---|--|---|
| <b>The C/OH Instruction Guide explains how to complete this form.</b> |   | 1 Filer ID (Ethics Commission Filers)             | 2 Total pages filed:   |   |
| <b>3 CANDIDATE / OFFICEHOLDER NAME</b>                                | MS / MRS / MR   | FIRST   | MI   | <b>OFFICE USE ONLY</b><br><br>Date Received<br><br><div style="border: 1px solid black; padding: 5px; color: blue; font-weight: bold;">RECEIVED</div><br><i>By Aimee Nemer at 12:48 pm, Jan 12, 2024</i><br><br>Date Hand-delivered or Date Postmarked<br><br>Receipt #      Amount \$<br><br>Date Processed<br><br>Date Imaged      2024-01-16 - Posted to web |
|   | Mr.   | Kenneth   |  |   |
| NICKNAME  | LAST  | SUFFIX  |  |   |
|   | Hutchenrider  | Jr.   |  |   |
| <b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>                     | ADDRESS / PO BOX;   | APT / SUITE #;                                    | CITY; STATE; ZIP CODE  |   |
| Change of Address   |   |   |  |   |
| <b>5 CANDIDATE / OFFICEHOLDER PHONE</b>                               | AREA CODE   | PHONE NUMBER                                      | EXTENSION  |   |
|   | ( 214 )   | 384-1747  |  |   |
| <b>6 CAMPAIGN TREASURER NAME</b>                                      | MS / MRS / MR   | FIRST   | MI   |   |
|   | Mrs.  | Melinda   | N.   |   |
| NICKNAME  | LAST  | SUFFIX  |  |   |
|   | Hutchenrider  |   |  |   |
| <b>7 CAMPAIGN TREASURER ADDRESS</b>                                   | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;   |   | CITY; STATE; ZIP CODE  |   |
| (Residence or Business)   |   |   |  |   |
| <b>8 CAMPAIGN TREASURER PHONE</b>                                     | AREA CODE   | PHONE NUMBER                                      | EXTENSION  |   |
|   | ( 214 )   | 709-1002  |  |   |
| <b>9 REPORT TYPE</b>  | <input checked="" type="checkbox"/> January 15  | <input type="checkbox"/> 30th day before election | <input type="checkbox"/> Runoff  |   |
|   | <input type="checkbox"/> July 15  | <input type="checkbox"/> 8th day before election  | <input type="checkbox"/> Exceeded Modified Reporting Limit                                 |   |
|   |   |   | <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) |   |
|   |   |   | <input type="checkbox"/> Final Report (Attach C/OH - FR)                                   |   |
| <b>10 PERIOD COVERED</b>  | Month   | Day   | Year   |   |
|   | 7   | 15  | 23   |   |
|   | THROUGH   |   | Month Day Year   |   |
|   |   |   | 1 / 15 / 24  |   |
| <b>11 ELECTION</b>  | ELECTION DATE   |   | ELECTION TYPE  |   |
|   | Month   | Day   | Year   |   |
|   | /   | /   | Primary  |   |
|   |   |   | Runoff   |   |
|   |   |   | Other Description  |   |
|   |   |   | General  |   |
|   |   |   | Special  |   |
| <b>12 OFFICE</b>  | OFFICE HELD (if any)  |   | <b>13 OFFICE SOUGHT (if known)</b>   |   |
|   | Richardson City Council Place 5   |   |  |   |
| <b>14 NOTICE FROM POLITICAL COMMITTEE(S)</b>                          | 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 OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. |   |  |   |
|   | COMMITTEE TYPE  | COMMITTEE NAME                                    |  |   |
|   | GENERAL   | COMMITTEE ADDRESS                                 |  |   |
|   | SPECIFIC  | COMMITTEE CAMPAIGN TREASURER NAME                 |  |   |
|   |   | COMMITTEE CAMPAIGN TREASURER ADDRESS              |  |   |
| <b>GO TO PAGE 2</b>   |   |   |  |   |

