CANDIDATE / OFFICEHOLDER FORM C/OH OFFICIAL RECORD CAMPAIGN FINANCE REPORT COVER SHEET PG 1 CITY SECRET 1 Filer D (Etrics Commission Filers) 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. 3 CANDIDATE / MS / MRS/ EIRST OFFICE USE ONLY **OFFICEHOLDER** 00 NAME Date Received NICKNAME LAST SUFFIX None SNCE ZIP CODE 4 CANDIDATE / ADDRESS / PO BOX: APT / SUITE #: CITY: STATE **OFFICEHOLDER** MAILING 300 CSO REC'D **ADDRESS** JAN 15'25 PM1:30 Change of Address PHONE NUMBER EXTENSION CANDIDATE/ Date Hand-delivered or Date Postmarked **OFFICEHOLDER** PHONE Receipt # Amount S 6 CAMPAIGN TREASURER Date Processed NAME Date Imaged rond STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: STATE: ZIP CODE CAMPAIGN TREASURER Poinsetta **ADDRESS** (Residence or Business) PHONE NUMBER CAMPAIGN EXTENSION TREASURER PHONE 988-5339 REPORT TYPE 15th day after campaign treasurer appointment (Officeholder Only) 30th day before election Runoff January 15 Exceeded Modified Final Report (Attach C/OH - FR) July 15 8th day before election Reporting Limit 10 PERIOD Month Month COVERED THROUGH 2025 11 ELECTION ELECTION DATE **ELECTION TYPE** Runoff Other Year Month Day Description General Special OFFICE SOUGHT (if known) 12 OFFICE OFFICE HELD (if any) Council 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 POLITICAL CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. COMMITTEE(S) COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER 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 (OTI PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	HER THAN \$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF	FLOANS) \$ Ó
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$\$1,792.06
	4. TOTAL POLITICAL EXPENDITURES	\$\$ (1792.06
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF OF REPORTING PERIOD	
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOA LAST DAY OF THE REPORTING PERIOD	NS AS OF THE \$ 1,792.04
18 SIGNATURE ST	ear, or affirm, under penalty of perjury, that the accompanying rep ired to be reported by me under Title 15, Election Code.	ort is true and correct and includes all information
	to so reported by the dilder Title 15, Election Gode.	
	Signatu	re of Candidate or Officeholder
	Please complete either option	holour
	i isase complete citilet option	below.
(1) Affidavit		
NOTARY STAMP/SEAL		
Sworn to and subscribed b	efore me by	
20, to certify w	ich, witness my hand and seal of office.	his the,
Signature of officer administerin	oath Printed name of officer administering oath	Title of officer administering oath
	OR	
2) Unsworn Declaration	0 =	
My name is	Couce It. and my date of	hirth in
My address is43	so Poinsetta Drive Fort Worth	
xecuted in Tamon	(street) (eith)	(state) (zip code) (country)
xecuted in	County, State of Texas, on the day of	(month) 20 25.
	Signature of	Candidate/Officeholder (Declarant)
	orginature of	Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

	Joe Ponce JR	20 Filer ID (Ethics Commission Filers)	
21	21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	AMOUNT \$	
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	s	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	s	
4.	SCHEDULE E: LOANS		
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	s (,792.0	
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	S	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	s	
3,	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	S	
),	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	S	
).	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	S	
	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	S	
	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	S	



Payment receipt

You paid \$1,792.06

to Aquecs, Inc. (dba/Cross & Derlie) on 1/13/2025 Request date

Total

Jan 13, 2025

\$1,792.06

Payment method

Authorization ID

credit card

Description of goods or services
4 X 8 CORRUGATED SIGNS WITH GROMMETS

Thank you



Aquecs, Inc. (dba/Cross & amp; Oberlie)

+19207222486

steveb@aquecs.com

916 Byrd Ave, Neenah, WI 54956-3913