

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

| | | | | | | |
|--|---|--------------------------------------|--|--|----------------------|---------------------|
| The C/OH Instruction Guide explains how to complete this form. | | | | 1 Filer ID (Ethics Commission Filers) | 2 Total pages filed: | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR <i>Dennis</i> | FIRST <i>Dennis</i> | MI <i>C</i> | OFFICE USE ONLY BEE COUNTY ELECTIONS ADMINISTRATION Date Received | | |
| | NICKNAME <i>De Witt</i> | LAST <i>De Witt</i> | SUFFIX | NOV 15 2021 | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS | ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE <i>178 FAIRWAYS Ridge Beeville Texas 78102</i> | | | RECEIVED | | |
| <input type="checkbox"/> Change of Address | | | | | | |
| 5 CANDIDATE/ OFFICEHOLDER PHONE | AREA CODE <i>(361)</i> | PHONE NUMBER <i>358-9473</i> | EXTENSION | Date Hand-delivered or Date Postmarked | | |
| 6 CAMPAIGN TREASURER NAME | MS / MRS / MR <i>Gwendolyn</i> | FIRST <i>Gwendolyn</i> | MI <i>W</i> | Receipt #: Amount \$ | | |
| | NICKNAME <i>DeWitt</i> | LAST <i>DeWitt</i> | SUFFIX | Date Processed | | |
| 7 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE <i>178 FAIRWAYS Ridge Beeville Texas 78102</i> | | | Date Imaged | | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE <i>(361)</i> | PHONE NUMBER <i>358-9473</i> | EXTENSION | | | |
| 9 REPORT TYPE | <input 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 checked="" type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> Final Report (Attach C/OH - FR) | | |
| 10 PERIOD COVERED | Month <i>11</i> | Day <i>01</i> | Year <i>2021</i> | Month <i>11</i> | Day <i>15</i> | Year <i>2021</i> |
| 11 ELECTION | ELECTION DATE Month Day Year <i>03 01 2022</i> | | ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special | | | |
| 12 OFFICE | OFFICE HELD (if any) <i>Pct 2 Bee County Commissioners</i> | | | 13 OFFICE SOUGHT (if known) <i>Pct 2 Bee County Commissioners</i> | | |
| 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 OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. | | | | | |
| <input type="checkbox"/> Additional Pages | COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC | COMMITTEE NAME | | | | |
| | | COMMITTEE ADDRESS | | | | |
| | | COMMITTEE CAMPAIGN TREASURER NAME | | | | |
| | | COMMITTEE CAMPAIGN TREASURER ADDRESS | | | | |

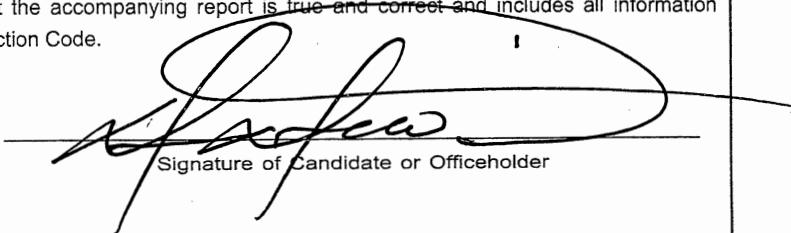
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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

| | | | |
|---|---|--|--|
| 15 C/OH NAME | | 16 Filer ID (Ethics Commission Filers) | |
| 17 CONTRIBUTION TOTALS EXPENDITURE TOTALS CONTRIBUTION BALANCE OUTSTANDING LOAN TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ <u>0</u> | |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ <u>0</u> | |
| | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURE. | \$ <u>0</u> | |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ <u>0</u> | |
| | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD | \$ <u>0</u> | |
| | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ <u>0</u> | |

18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ this the _____ day of _____, 20 _____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

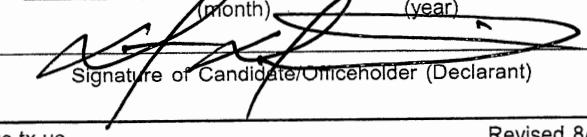
Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Dennis C. DeWitt, and my date of birth is 7/27/1946
 My address is 178 Fairway Ridge, Beaville, TX 78102
 (street) (city) (state) (zip code) (country)
 Executed in Bee County, State of Texas, on the 15 day of November, 20 21
 (month) (year)


 Signature of Candidate/Officeholder (Declarant)