UNSWORN DECLARATION

FORM UD

Attach this unsw	orn declaration to the front of any	OFFICE USE ONLY
campaign finance r	Date Received	
lieu of a notarize	RECEIVED	
Remedies Code § 13	2.001.	FEB 0 1 2022
1 FILER ID: (Ethics Commission filers)		Co
2 NAME OF FILER		Method of Delivery
(PLEASE TYPE OR PRINT)	Joe Bateman	Date Processed
3 TYPE OF FILER	X CANDIDATE/ OFFICEHOLDER	POLITICAL COMMITTEE
	JUDICIAL CANDIDATE/ OFFICEHOLDER	POLITICAL PARTY
	PERSONAL FINANCIAL STATEMENT	STATE/COUNTY CHAIR
	DIRECT CAMPAIGN EXPENDITURE	
4 TYPE OF REPORT	Semi-Annual	***************************************
	Seilli-Ailliuai	
5 DUE DATE	1/18/2022	
6 UNSWORN DECLARA	TION:	
My name is He	ather Bateman, and my date of birth is	04/21/1980
My Address is 817	Texas Trl Austin Tx (state)	78737 USA (country)
	enalty of perjury that the information in the attached report is in required to be reported by me under Title 15, Election Cod	-
Executed in Hays	County, State of Texas, on the 17_ day of	Jan, 20_22
	Signature of Filer/ Committee	•
	(Declarant	

FORM C/OH CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. 5 MS/MRS/MR MI CANDIDATE / FIRST OFFICE USE ONLY **OFFICEHOLDER** Joe NAME Date Received NICKNAME LAST SUFFIX FEB 0 1 2022 0 Bateman CANDIDATE / Date Hand-delivered or Date Postmarked ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE **OFFICEHOLDER** 100 Elder Hill Rd MAILING Receipt # Amount **ADDRESS** Po Box 44 Change of Address Driftwood, TX 78619 Date Processed Date Imaged CAMPAIGN MS/MRS/MR FIRST MI **TREASURER** NAME Heather NICKNAME LAST SUFFIX Bateman STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; STATE; ZIP CODE CAMPAIGN CITY; **TREASURER ADDRESS** 817 Texas Trl Austin, Texas 78737 (Residence or Business) CAMPAIGN AREA CODE PHONE NUMBER **EXTENSION** TREASURER 512-739-5866 PHONE REPORT TYPE 15th day after campaign treasurer January 15 30th day before election Runoff appointment (officeholder only) Final Report (Attach C/OH-FR) **Exceeded modified** July 15 8th day before election reporting limit **PERIOD** Month Day Year Month Day Year COVERED 01/01/2022 **THROUGH** 01/20/2022 **ELECTION DATE** 10 ELECTION **ELECTION TYPE** X Primary Month Day Year Runoff Other 03/01/2022 General Special 11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) Hays County Commissioner Hays **GO TO PAGE 2** Forms provided by Texas Ethics Commission Version V1.1.ab979f02 www.ethics.state.tx.us

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

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13 C / OH NAME	Bateman , Joe		14 Filer ID		
15 NOTICE FROM POLITICAL COMMITTEE(S)	FROM candidate / officeholder. These expenditures may have been made without the candidate's or officeh				
Additional Pages	COMMITTEE TYPE	TEE TYPE COMMITTEE NAME			
	GENERAL				
	SPECIFIC	COMMITTEE ADDRESS			
		COMMITTEE CAMPAIGN TREA			
		COMMITTEE CAMPAIGN TREA	SURER ADDRESS		
16 CONTRIBUTION TOTALS		MIZED POLITICAL CONTRIBUTION EES OF LOANS, OR CONTRIBUTI	NS (OTHER THAN PLEDGES, LOANS, ONS MADE ELECTRONICALLY)	\$	0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARAN	TEES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			\$	0.00
	4. TOTAL POLITICAL EXPENDITURES			\$	0.00
CONTRIBUTION BALANCE		5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			0.00
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			\$	0.00
17 AFFIDAVIT		true and corre	irm, under penalty of perjury, that the accept and includes all information required to Election Code.		
			Signature of Candidate or Officehol	der	
AFFIX NO	OTARY STAMP / SEAL AI	BOVE			
Sworn to and sub	scribed before me, by the	said	, this the		day
of	, 20, to	certify which, witness my hand and	seal of office.		
Signature of of	ficer administering	Printed name of officer adm	inistering Title of office	r administering	g oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

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				3 01 3
18 FILER		19 Filer ID		
Batem	an , Joe			
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT	
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	0.00	
3.	3. X SCHEDULE B: PLEDGED CONTRIBUTIONS			0.00
4.	X SCHEDULE E: LOANS			0.00
5.	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS			0.00
6.	X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS			0.00
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIB	UTIONS	\$	0.00
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	0.00
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINE	SS OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIB	UTIONS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$	

The Instruction Guide explains how to complete this form.				1 Total pages Schedule B:		
2 FILER NAME Bateman , Joe TOTAL OF UNITEMIZED PLEDGES			Sch: 1/1 Rpt: 4/5 3 Filer ID joe.e.bateman@gmail.com			
						\$
			Date	6 Full name of pledgor	6 Full name of pledgor out-of-state PAC (ID#:)	
	7 Pledgor Address;	City; State; Zip Cod	e		(ii application)	
				Check if travel outs	i ide of Texas. Complete Schedule	
0 Principal	occupation / Job title (See Instru	uctions)	11 Employer (See Ir	structions)		

LOANS			:	SCHEDULE E	
The Instructi	on Guide explains how to complet		1 Total pages Schedule E: Sch: 1/1 Rpt: 5/5		
2 FILER NAME Bateman , Joe			3 Filer ID		
TOTAL OF U	NITEMIZED LOANS		\$	0.00	
5 Date of loan	7 Name of lender out-o	f-state PAC (ID#:	9 Loan /	Amount (\$)	
6 Is lender a financial institution?	8 Lender address; City;	State; Zip Code	10 Interes	st Rate	
			11 Maturi	ity Date	
L2 Principal occupa	ion / Job title (See Instructions)	13 Employer (See In	estructions)		
14 Description of Co	ollateral	15 Check if personal	I funds were deposited into politic	cal account nstructions)	
16 GUARANTOR INFORMATION	17 Name of guarantor		19 Amou	nt Guaranteed (\$)	
not applicable	18 Guarantor address; City;	State; Zip Code			
20 Principal occupa	tion	21 Employer (See Ir	estructions)		
		1		419-414	
				,	

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