JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/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 EIRST EIRST EIRST EIRST EIRST MIP MK CHRISTOPHER P NICKNAME LAST JOHNSON SUFFIX	OFFICE USE ONLY Date Received Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. BUX 1444 DRIPPING SPRINGS, TX 78620	JAN 1 7 2023 Elections Office
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 473-6249	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST RUN TSA MI MR RUN TSA NICKNAME LAST SUFFIX	Receipt # Amount \$ Date Processed
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #, CITY; 240 MALLET CT AUSTIN, TX 78737	STATE; ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) U32-4344	_
9 REPORT TYPE	January 15 30th day before election Runoff July 15 8th day before election Exceeded Modified Reporting Limit	 15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year Month	Day Year 31/22
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year Ill Image: Special Other Description Description	
12 OFFICE	OFFICE HELD (if any)	
14 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MATTINE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THE COMMITTEE TYPE COMMITTEE NAME AND COMMITTEE NAME AND COMMITTEE NAME AND COMMITTEE ADDRESS	DATES OR OFFICEHOLDER'S KNOWLEDGE OR HEY RECEIVE NOTICE OF SUCH EXPENDITURES.
Additional Pages	SPECIFIC U000 W. FM 50 KULE, T COMMITTEE CAMPAIGN TREASURER NAME MARY NAT AUC COMMITTEE CAMPAIGN TREASURER ADDRESS	× 78640 NC SPRINGS, TY 786
	GO TO PAGE 2	

Forms provided by Texas Ethics Commission

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT		FORM JC/O COVER SHEET PG		
15 JC/OH NAME	ISTOPHER JOHNSON	16 Filer ID (Ethics Commission Filers)		
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	THAN \$		

	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 350.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 51.50
	4.	TOTAL POLITICAL EXPENDITURES	\$ 57.50
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 20,139.55
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	s Ø
18 SIGNATURE I SW	vear, or a	affirm, under penalty of perjury, that the accompanying report is true and co	rect and includes all information

NATURE	I swear, or affirm, under penalty of perjury,	, that the accompanying	report is true and c	orrect and includes all information
	required to be reported by me under Title 15,	Election Code.	1	

Signature of Candidate/Officeholder

Please complete either option below:

(1) Affidavit			My N Expin	ICHAEL MACIA: otary ID # 13215 is September 4,	8546 2023		•
Sworn to and subscribed		hristopher	Johnson		the the	_ day of _	······································
20 23, to certify Mill M	which, witness my hand	and seal of office. Michae	1 Macia			Texas No	tanj
Signature of officer administe	ering oath	Printed name of o	fficer administeri	ig oath		Title of office	r administering oath
	SIE C		OR				
(2) Unsworn Declarat	ion						
My name is			, an	d my date of bi	irth is		
My address is		•	······································			·	
	(street) .		(city)	(state)	(zip code)	(country)
Executed in	County, Stat	e of	, on the	day of(month)	, 20, (year)	·
			*	Signature of C	Candidate/Of	ficeholder (Dec	larant)

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

19 F	CHRISTOPHER JOHNSON 20 Filer ID (Ett	nics Commission Filers)					
	21 SCHEDULE SUBTOTALS NAME OF SCHEDULE						
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 350.00					
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	s					
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$					
4.	SCHEDULE E: LOANS	\$ /.					
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 57.50					
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	s					
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	s s					
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$					
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$					
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C	с/он \$					
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$					
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNE TO FILER	D \$					

MONET	ARY POLITICAL CONTRIBUT	TIONS	SCHEDULE A(J)1
If the reque	sted information is not applicable, DO NO	OT include this page in	n the report.
Т	he Instruction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1:
FILER NAME	LISTOPHER JOHNSO	N	3 Filer ID (Ethics Commission Filers)
Date	5 Full name of contributor in out-of-state PAC FIOYD AKERS 6 Contributor address; City; PO BOY 1179 SAN MARCOS,	ID#:) State; Zip Code	7 Amount of contribution (\$) \$ 100, 00
	wincipal occupation	9 Contributor's job title	
	TORNEY	ATTORNE	-4
Contributor's e	FICE OF FLOYP AKEKS	11 Law firm of contributor	's spouse (if any)
	a child, law firm of parent(s) (if any)		
Date		State; Zlp Code TV 780210	Amount of contribution $($)$
Contributor's p	TMENT BANKER	Contributor's job title	
H	THE INVESTMENTS UP	Law firm of contributor	's spouse (if any)
Date	Full name of contributor out-of-state PAC	iD#:) State: Zip Code	Appount of contribution (\$)
Contributor's p	principal occupation	Contributor's job title	L
Contributor's e	employer/law firm	Law firm of contributor	's spouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)	L	
II	ATTACH ADDITIONAL COPIES (contributor is out-of-state PAC, please see instr		

	OFFICE	USE ONLY	
AFFIDAVIT FOR			
CANDIDATE OR OFFICEHOLDER: ELECTRONIC FILING EXEMPTION	JAN 1	7 2023	
An exemption affidavit must be submitted with each paper report.	Date Hand-delivered	l or Date Postmarked	
Beginning on January 1, 2023, a candidate or officeholder who has accepted more than \$30,820 in political contributions or made more than \$30,820 in political expenditures in any calendar year must file all subsequent reports electronically.		Amount \$	
	Date Processed	-	
Filer name CHRISTOPHER JOHNSON Filer ID #	Date Imaged		

- 1. I swear or affirm that I have not accepted more than \$30,820 in political contributions or made more than \$30,820 in political expenditures in a calendar year.
- 2. I further swear or affirm that I do not use computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- I further swear or affirm that no person acting as my agent or consultant, and no person with whom I
 contract, uses computer equipment to keep current records of political contributions, political
 expenditures, or persons making political contributions to me.
- 4. I further swear or affirm that I understand that I am required to file my campaign finance reports electronically if I, my agent or consultant, or a person with whom I contract exceeds \$30,820 in political contributions or political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- 5. I am filing this affidavit with the <u>JCOH</u> report due on <u>1/15/∂-3</u>. I understand that this affidavit is required to be filed with each campaign finance report for which I am claiming an exemption from electronic filing.

Please complete either option below:

(1) Affidavit	MICHAEL MACIAS Notary ID # 132158546 pires September 4, 2023	Signature of Filer				
- 3	before me by <u>Christoph</u> which, witness my hand and seal of off <u>Mich</u> ering oath Printed nam	ice.			Teas N	
		OR				
(2) Unsworn Declaratio	on					
My name is		, and	my date of b	irth is		······································
My address is		ff	(city)	(state)	(zip code)	(country)
Executed in	County, State of	, on the	day of	(month)	, 20 (year)	-
			Si	gnature of Fil	er (Declarant)	
	ERS WHO ARE EXEMPT FRO E STILL REQUIRED TO FILE					