

# 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: <div style="font-size: 2em; text-align: center;">5</div>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST <div style="font-size: 1.5em; text-align: center;">Daniel</div>	MI <div style="font-size: 1.5em; text-align: center;">C.</div>
	NICKNAME	LAST <div style="font-size: 1.5em; text-align: center;">Law</div>	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <div style="font-size: 1.2em;">285 Hilliard Road Unit B San Marcos, TX 78666</div>		
	5 CANDIDATE / OFFICEHOLDER PHONE AREA CODE PHONE NUMBER EXTENSION <div style="font-size: 1.2em;">(512) 644-6145</div>		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST <div style="font-size: 1.5em; text-align: center;">Linda</div>	MI
	NICKNAME	LAST <div style="font-size: 1.5em; text-align: center;">Coker</div>	SUFFIX
7 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <div style="font-size: 1.2em;">153 Tallow Trail San Marcos, TX 78666</div>		
	8 CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION <div style="font-size: 1.2em;">(512) 216-0500</div>		
9 REPORT TYPE			
<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)			
10 PERIOD COVERED			
Month Day Year    Month Day Year <div style="font-size: 1.2em;">03 / 05 / 2024    THROUGH    07 / 15 / 2023</div>			
11 ELECTION			
ELECTION DATE		ELECTION TYPE	
Month Day Year <div style="font-size: 1.2em;">03 / 05 / 2024</div>		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE		13 OFFICE SOUGHT (if known)	
OFFICE HELD (if any)		<div style="font-size: 1.5em; text-align: center;">Sheriff</div>	
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	COMMITTEE NAME	
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	
	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	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1047.72
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 347.72
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 700.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

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.

*Daniel C. Law*  
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by Daniel Law this the 17 day of July, 2023, to certify which, witness my hand and seal of office.  
Johanna Carter Johanna Carter Notary Public  
 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.  
 My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.  
 (street) (city) (state) (zip code) (country)  
 Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
 (month) (year)

Signature of Candidate/Officeholder (Declarant)



# SUBTOTALS - C/OH

## FORM C/OH COVER SHEET PG 3

19 FILER NAME		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 700.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 347.72
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>1</b>
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>David L. Peterson</b>	7 Amount of contribution (\$) <b>\$200.00</b>
<b>04/06/2023</b>	6 Contributor address; City; State; Zip Code <b>509 Boulder Bluff San Marcos, TX 78666</b>	
8 Principal occupation / Job title (See Instructions) <b>Law Enforcement</b>		9 Employer (See Instructions) <b>Hays County</b>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>William Musser</b>	Amount of contribution (\$) <b>\$500.00</b>
<b>06/30/2023</b>	Contributor address; City; State; Zip Code <b>868 Bottle Brush Dr. Kyle, TX 78640</b>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.



# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

If the requested information is not applicable, **DO NOT** include this page in the report.

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: <div style="text-align: center;">1</div>	<b>2</b> FILER NAME <div style="text-align: center;">Daniel C. Law</div>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <div style="text-align: center;">06/08/2023</div>	<b>5</b> Payee name <div style="text-align: center;">Daniel C. Law</div>		
<b>6</b> Amount (\$) <div style="text-align: center;">\$261.16</div> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code <div style="text-align: center;">285 Hilliard Road Unit B San Marcos, TX 78666</div>		
<b>8</b> <div style="text-align: center;">PURPOSE OF EXPENDITURE</div>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <div style="text-align: center;">Political Advertisement</div>		<b>(b)</b> Description <div style="text-align: center;">5000 BUSINESS/Push Cards</div>
	<div style="display: flex; justify-content: space-between;"> <span><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</span> <span><input type="checkbox"/> Check if Austin, TX, officeholder living expense</span> </div>		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
<div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>			
<div style="display: flex; justify-content: space-between;"> <div style="width: 20%;"> <b>Date</b> <div style="text-align: center;">07/03/2023</div> </div> <div style="width: 80%;"> <b>Payee name</b> <div style="text-align: center;">Daniel C. Law</div> </div> </div>			
<div style="display: flex; justify-content: space-between;"> <div style="width: 20%;"> <b>Amount (\$)</b> <div style="text-align: center;">\$86.54</div> <input checked="" type="checkbox"/> Reimbursement from political contributions intended         </div> <div style="width: 80%;"> <b>Payee address; City; State; Zip Code</b> <div style="text-align: center;">285 Hilliard Road Unit B San Marcos, TX 78666</div> </div> </div>			
<div style="display: flex; justify-content: space-between;"> <div style="width: 20%;"> <b>PURPOSE OF EXPENDITURE</b> </div> <div style="width: 40%;"> <b>Category</b> (See Categories listed at the top of this schedule) <div style="text-align: center;">Political Advertisement</div> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.         </div> <div style="width: 40%;"> <b>Description</b> <div style="text-align: center;">1-Sign(2x3) + 1-Name Badge</div> <input type="checkbox"/> Check if Austin, TX, officeholder living expense         </div> </div>			
<div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
<div style="display: flex; justify-content: space-between;"> <div style="width: 20%;"> <b>Date</b> </div> <div style="width: 80%;"> <b>Payee name</b> </div> </div>			
<div style="display: flex; justify-content: space-between;"> <div style="width: 20%;"> <b>Amount (\$)</b>  <input type="checkbox"/> Reimbursement from political contributions intended         </div> <div style="width: 80%;"> <b>Payee address; City; State; Zip Code</b> </div> </div>			
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<div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>			