CANDIDATE / OFFICEHOLDER FORM C/OH COVER SHEET PG 1 CAMPAIGN FINANCE REPORT 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. N/A MS / MRS / MR FIRST 3 CANDIDATE / OFFICE USE ONLY **OFFICEHOLDER** ٧. Mr Mark NAME SUFFIX NICKNAME LAST 9 Denham ADDRESS / PO BOX: APT / SUITE #: STATE: ZIP CODE CITY: 4 CANDIDATE / OFFICEHOLDER 628 Bellingrath Park, Conroe, TX 77302 MAILING River Plantation MUD **ADDRESS** Change of Address EXTENSION AREA CODE PHONE NUMBER Date Hand-delivered or Date Postmarked 5 CANDIDATE/ OFFICEHOLDER (832)257-3394 PHONE Amount \$ Receipt # MS / MRS / MR FIRST 6 CAMPAIGN **TREASURER** Mark Mr. Date Processed NAME LAST SHEERY NICKNAME Date Imaged Robins ZIP CODE STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; STATE: CITY: 7 CAMPAIGN TREASURER 646 Bellingrath Park, Conroe, TX 77302 **ADDRESS** (Residence or Business) PHONE NUMBER EXTENSION AREA CODE CAMPAIGN TREASURER PHONE (936 499-5097 9 REPORT TYPE 15th day after campaign 30th day before election Runoff January 15 treasurer appointment (Officeholder Only) Exceeded Modified Final Report (Attach C/OH - FR) July 15 8th day before election Reporting Limit Year 10 PERIOD Day Year Month COVERED 6 30 / 24 24 1 THROUGH ELECTION DATE ELECTION TYPE 11 ELECTION Primary Runoff Other Month Day Description General Special 24 5 4 13 OFFICE SOUGHT (if known) OFFICE HELD (if any) 12 OFFICE Director 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 OFFICEHOLDER'S ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. 14 NOTICE FROM **POLITICAL** COMMITTEE(S) COMMITTEE NAME COMMITTEE TYPE COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS **GO TO PAGE 2**

CANDIDATE / OFFICEHOLDER River Plantation MUD FORM C/OH **CAMPAIGN FINANCE REPORT COVER SHEET PG 2** 15 C/OH NAME Mark V. Denham 16 Filer ID (Ethics Commission Filers) N/A 17 CONTRIBUTION TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN **TOTALS** PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **EXPENDITURE** 3 TOTAL UNITEMIZED POLITICAL EXPENDITURE. **TOTALS** TOTAL POLITICAL EXPENDITURES CONTRIBUTION TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY BALANCE OF REPORTING PERIOD **OUTSTANDING** TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LOAN TOTALS LAST DAY OF THE REPORTING PERIOD 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 _, 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 (2) Unsworn Declaration _, and my date of birth is _ (state) (zip code) (country) __ , on the <u>13</u> day of <u>J</u>ບຸນ ຄ OMERY County, State of IEXAS

Signature of Candidate/Officeholder (Declarant)

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

River Plantation MUD

FORM C/OH - FR

		FORW C/OH - FR	
	The Instruction Guide explains how to complete this	form.	
	∘ Complete only if "Report Type" on page 1 is marked "F	Final Report" ••	
1 0	/OH NAME	2 Filer ID (Ethics Commission Filers)	
Mar	k V. Denham	N/A	
3 5	GIGNATURE		
	do not expect any further political contributions or political expenditures in connection wit designating a report as a final report terminates my campaign treasurer appointment. I also campaign contributions or make any campaign expenditures without a campaign treasurer.	so understand that I may not accept any	
4	FILER WHO IS NOT AN OFFICEHOLDER Complete A & B below only if you are not an officeholder.		
	A. CAMPAIGN FUNDS		
	Check only one:		
	I do not have unexpended contributions or unexpended interest or income earner	ed from political contributions.	
	I have unexpended contributions or unexpended interest or income earned from may not convert unexpended political contributions or unexpended interest or personal use. I also understand that I must file an annual report of unexpended unexpended contributions or unexpended interest or income earned on political filing this final report. Further, I understand that I must dispose of unexpended interest or income earned on political contributions in accordance with the requirements.	income earned on political contributions to ded contributions and that I may not retain contributions longer than six years after political contributions and unexpended	
1	B. ASSETS		
	Check only one:		
	I do not retain assets purchased with political contributions or interest or other in	ncome from political contributions.	
	I do retain assets purchased with political contributions or interest or other incort that I may not convert assets purchased with political contributions or interest or personal use. I also understand that I must dispose of assets purchased with perequirements of Election Code, § 254.204.	r other income from political contributions to	
		Signature of Candidate	
	OFFICEHOLDER • Complete this section <i>only</i> if you are an officeholder ••		
	I am aware that I remain subject to filing requirements applicable to an officeholder file. I am also aware that I will be required to file reports of unexpended contributi an officeholder, I retain political contributions, interest or other income from politic political contributions or interest or other income from political contributions.	ons if, after filing the last required report as cal contributions, or assets purchased with	
1		Signature of Officeholder	

CAMPAIGI	FORM C/OH COVER SHEET PG 1			
The C/OH Instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers) N/A			2 Total pages filed:	
3 CANDIDATE / OFFICEHOLDER NAME	Mr. First Thomas	мі L .	OFFICE USE ONLY	
	Tom Last Vandever	SUFFIX	Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; 515 Williamsburg Park, Conros	CITY; STATE; ZIP CODE P, TX 77302	River Plantation MUD	
Change of Address				
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (281) 433-2871	EXTENSION	Date Hand-delivered or Date Postmarked	
6 CAMPAIGN TREASURER	MS / MRS / MR FIRST Self	MI	Receipt # Amount \$	
NAME	NICKNAME LAST	SUFFIX	Date Processed	
			Date Imaged	
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / S Same as above	SUITE #; CITY;	STATE; ZIP CODE	
(Residence or Business)				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER () Same as above	extension extension		
9 REPORT TYPE	January 15 30th day before	election Runoff	15th day after campaign treasurer appointment (Officeholder Only)	
	July 15 8th day before el	lection Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month Day Year 1 / 1 / 24	THROUGH 6	Day Year / 30 / 24	
11 ELECTION	ELECTION DATE Month Day Year Primary	Description		
	5 / 4 / 24 Genera	Special		
12 OFFICE	OFFICE HELD (If any) Director	13 OFFICE SOUGHT (If know	/n)	
14 NOTICE FROM POLITICAL	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTION: THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITUR: CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQU	ES MAY HAVE BEEN MADE WITHOUT THE CAI	NDIDATE'S OR OFFICEHOLDER'S KNOW! EDGE OF	
COMMITTEE(S)	COMMITTEE TYPE COMMITTEE NAME			
Additional Pages	GENERAL COMMITTEE ADDRESS			
	SPECIFIC COMMITTEE CAMPAIGN TO	REASURER NAME		
	COMMITTEE CAMPAIGN T	REASURER ADDRESS		
GO TO PAGE 2				

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT River Plantation MUD FORM C/OH **COVER SHEET PG 2** 15 C/OH NAME Thomas L. Vandever 16 Filer ID (Ethics Commission Filers) 17 CONTRIBUTION N/A 1 TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN TOTALS PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **EXPENDITURE** TOTALS 3. TOTAL UNITEMIZED POLITICAL EXPENDITURE. TOTAL POLITICAL EXPENDITURES 4. CONTRIBUTION TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY BALANCE OF REPORTING PERIOD OUTSTANDING TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LOAN TOTALS LAST DAY OF THE REPORTING PERIOD 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: JAIME BARNES (1) Affidavit Notary Public, State of Texas Comm. Expires 08-18-2020 Notary ID 128352263 NOTARY STAMP/SEAL Vardever this the 18 day of JUNE Sworn to, and subscribed before me by , 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 _ _____, and my date of birth is My address is (street) (city) (state) (zip code) (country) Executed in ______ County, State of ______ , on the ____ (month) Signature of Candidate/Officeholder (Declarant)

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

River Plantation MUD

	THAL REPORT	FORM C/OH - FR		
The Instruction Guide explains how to complete this form.				
Complete only if "Report Type" on page 1 is made at the				
1 C/OH				
	Vandever	2 Filer ID (Ethics Commission Filers) N/A		
3 SIGNA	ATURE			
I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file. Signature of Candidate / Officeholder				
•• Cor	RWHO IS NOT AN OFFICEHOLDER nplete A & B below <i>only</i> if you are not an officeholder. ••			
A.	CAMPAIGN FUNDS			
Chec	ck only one:			
	I do not have unexpended contributions or unexpended interest or income earned for	rom political contributions.		
	I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.			
B.	ASSETS	, s == 1.25 i.		
Chec	ck only one:			
	I do not retain assets purchased with political contributions or interest or other inco	ome from political contributions.		
	I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.			
		Signature of Candidate		
5 OFFICEHOLDER Complete this section <i>only</i> if you are an officeholder				
	I am aware that I remain subject to filing requirements applicable to an officeholder who file. I am also aware that I will be required to file reports of unexpended contributions an officeholder, I retain political contributions, interest or other income from political contributions or interest or other income from political contributions.	if, after filing the last required report as		

Signature of Officeholder

CANDIDATE / OFFICEHOLDER FORM C/OH CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. N/A MS / MRS / MR 3 CANDIDATE / МІ OFFICE USE ONLY **OFFICEHOLDER** Mr. **James** Α. NAME Date Received NICKNAME LAST SUFFIX Baldridge Sr. 4 CANDIDATE / ADDRESS / PO BOX: APT / SUITE #; ZIP CODE CITY; STATE; **OFFICEHOLDER** 636 Stonewall Jackson Dr., Conroe, TX 77302 MAILING River Plantation MUD **ADDRESS** Change of Address 5 CANDIDATE/ AREA CODE PHONE NUMBER EXTENSION Date Hand-delivered or Date Postmarked **OFFICEHOLDER** (936)828-1948 PHONE Receipt # Amount \$ MS / MRS / MR 6 CAMPAIGN FIRST МІ TREASURER Mr. James Date Processed NAME NICKNAME LAST SUFFIX Date Imaged Baldridge Sr. STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY: CAMPAIGN STATE: ZIP CODE **TREASURER** Same as above **ADDRESS** (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER EXTENSION TREASURER PHONE Same as above 9 REPORT TYPE 30th day before election Runoff 15th day after campaign January 15 treasurer appointment (Officeholder Only) **Exceeded Modified** July 15 8th day before election Final Report (Attach C/OH - FR) Reporting Limit 10 PERIOD Month Day Year Day COVERED 24 6 30 24 **THROUGH** ELECTION TYPE 11 ELECTION **ELECTION DATE** Primary Year Month Day Description General Special 24 13 OFFICE SOUGHT (if known) 12 OFFICE ONE Director THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT 14 NOTICE FROM THIS BOX IS FOR NOTICE OF POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE'S OR OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDER'S ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. **POLITICAL** COMMITTEE(S) COMMITTEE NAME COMMITTEE TYPE COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

River Plantation MUD

FORM C/OH

CAMPAIGN	FINANCE REPORT	COVE	IN ONEET . O =		
15 C/OH NAME James A. Baldridge, S	r.	16 Filer ID (Ethics Commission Filers)		
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.99		
	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$	828.2		
	4. TOTAL POLITICAL EXPENDITURES	\$	828.00		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	T DAY \$	0.00		
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	THE \$	0.00		
	wear, or affirm, under penalty of perjury, that the accompanying report is true uired to be reported by me under Title 15, Election Code.	and correct	and includes all information		
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 administeri	ng oath Printed name of officer administering oath	Title	e of officer administering oath		
OR					
(2) Unsworn Declaration					
My name is JANUSS A BACORIDGE ST., and my date of birth is 9-2-96 My address is 636 Stonewell JANUSCO, TK, 77302 CLSA.					
My address is 636 Stowered Archgold City (state) (zip code) (country)					
(street) (city) (state) (zip code) (country) Executed in Mont government younty, State of TEXAS, on the 6 day of (month) (year) Signature of Candidate/Officeholder (Declarant)					

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

River Plantation MUD

FORM C/OH - FR

		FORM C/OH - FR		
The Instruction Guide explains how to complete this form.				
Complete only if "Report Type" on page 1 is marked "Final Report"				
1 C/OH	NAME	2 Filer ID (Ethics Commission Filers)		
3 SIGN	A. Baldridge, Sr.	N/A		
0.014	AT ORE			
I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file. Faure & Backely L. Signature of Candidate / Officeholder				
4 FILEF	RWHO IS NOT AN OFFICEHOLDER mplete A & B below only if you are not an officeholder. ••			
A.	CAMPAIGN FUNDS			
Che	ck only one:			
9	I do not have unexpended contributions or unexpended interest or income earned from	om political contributions.		
	I have unexpended contributions or unexpended interest or income earned from political contributions or unexpended interest or income personal use. I also understand that I must file an annual report of unexpended unexpended contributions or unexpended interest or income earned on political contribing this final report. Further, I understand that I must dispose of unexpended political interest or income earned on political contributions in accordance with the requirement	me earned on political contributions to contributions and that I may not retain ributions longer than six years after cal contributions and unexpended		
B.	ASSETS			
Chec	k only one:			
V	I do not retain assets purchased with political contributions or interest or other incom	e from political contributions.		
	I do retain assets purchased with political contributions or interest or other income from that I may not convert assets purchased with political contributions or interest or other personal use. I also understand that I must dispose of assets purchased with political requirements of Election Code, § 254.204.	er income from political contributions to		
OFFICEHOLDER •• Complete this section only if you are an officeholder ••				
I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.				
	Si	gnature of Officeholder		