# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### RECEIVED

FORM C/OH JAN 10 2025 OVER SHEET PG 1

The C/OH Instruction G	uide explains how	to complete this form.	1 Filer ID (And Simple Coo)	T · · · · /	
3 CANDIDATE / OFFICEHOLDER	Ms/MRs/MR Mr.	FIRST Wesley	мі О	OFFICE USE ONLY	
NAME	NICKNAME	LAST Peschel	SUFFIX	Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; 1326 Industr	y Rd Industry, Tx 7	city; state; zip code 78944	DEC 10/2024	
Change of Address				ELECTIONS	
5 CANDIDATE/ OFFICEHOLDER PHONE	(979 )	251-0194	EXTENSION	Date Hand-delivered or Date Postmarked  Receipt #   Amount \$	
6 CAMPAIGN TREASURER	Ms/MRs/MR Mrs	FIRST Lisa	MI		
NAME	NICKNAME	LAST	SUFFIX	Date Processed	
	NICKNAME	Kaspar	30111/	Date Imaged	
7 CAMPAIGN TREASURER ADDRESS	1	NO PO BOX PLEASE); APT / S Hwy 159 West Ne		STATE; ZIP CODE	
(Residence or Business)					
8 CAMPAIGN	AREA CODE	PHONE NUMBER	EXTENSION		
TREASURER PHONE	(979) 421-0095				
9 REPORT TYPE	January 15	30th day before e	election Runoff	15th day after campaign treasurer appointment (Officeholder Only)	
	July 15	8th day before ele	ection Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month 10	Day Year / 27 / 24	THROUGH 12	Day Year  / 31 / 24	
11 ELECTION ELECTION DATE ELECTION TYPE			<b>E</b>		
	Month Day	Day Year Primary Runoff Other Description			
	11 / 5	24 General	- Charles		
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if know JP pct 2	n)	
14 NOTICE FROM POLITICAL	THE CANDIDATE / OFFIC	EHOLDER. THESE EXPENDITURE	S MAY HAVE BEEN MADE WITHOUT THE CAN	MADE BY POLITICAL COMMITTEES TO SUPPORT IDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR THEY RECEIVE NOTICE OF SUCH EXPENDITURES.	
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME			
Additional Pages	GENERAL	COMMITTEE ADDRESS			
, additional Lague	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TR	EASURER ADDRESS		
GO TO PAGE 2					

## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM C/OH COVER SHEET PG 2

	11 117 110 - 1121 0111				
15 C/OH NAME Wesley Peschel			16 Filer I	D (Ethics C	Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		N	\$	1,200.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		)	\$	1,200.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICA	L EXPENDITURE.		\$	403.00
	4. TOTAL POLITICAL EXPEND	ITURES		\$	403.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTOR REPORTING PERIOD	ΓΙΟΝS MAINTAINED AS OF THE LA	ST DAY	\$	1,025.77
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT O LAST DAY OF THE REPORTIN	F ALL OUTSTANDING LOANS AS C G PERIOD	OF THE	\$	0.00
(2.010) IA TUBE	swear, or affirm, under penalty of perjury,	that the accompanying raport is tru	up and cor	rect and in	cludes all information
	guired to be reported by me under Title 15, E		de and con	root and in	olugoo uli iliioilliatioil
16	quired to be reported by the dilder title 19, i				
			7/1/		
		Signature of C	andidate o	or Officehol	der
	Please comp	olete either option belo	w:		
(1) Affidavit					
NOTARY STAMP/SEA	AL.				
Swarn to and subscribed	I before me by	this the	<b>.</b>	day of	1
		uno uno			*
20, to certify	which, witness my hand and seal of office.				
	40000				
Signature of officer administr	ering oath Printed name of of	ficer administering oath		Title of offic	cer administering oath
		OR			
(2) Unsworn Declarat	ion				
			004401	1000	
My name is Wesley Pe	schel	, and my date of birth	is	1982 	•
My address is 1326 Indi		Industry ,,	Гх <u>,</u> 7	8944 ,	US
	(street)	(city)	(state)	(zip code)	(country)
Executed in Austin	County, State of Texas	, on the 9 day of Janua	ary	_, <sub>20</sub> 25 (year)	·
		(mon	th)	(year)	
					- La
		Signature of Cano	udate/Office	enolaer (De	eciarant)

#### **SUBTOTALS - C/OH**

### FORM C/OH COVER SHEET PG 3

1	FILER NAME esley Peschel  20 Filer ID (Ethics Co	mmiss	ion Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	1,200.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	3. SCHEDULE B: PLEDGED CONTRIBUTIONS		
4.	SCHEDULE E: LOANS	\$	
5.	■ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$	403.00
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$	
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/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

#### MONETARY POLITICAL CONTRIBUTIONS

#### SCHEDULE A1

If the reques	ted information is not applicable, <b>DO NOT i</b>	nclude this page in the r	eport.
The	Instruction Guide explains how to complete th	is form.	1 Total pages Schedule A1: 1
2 FILER NAME Wesley Pes	chel		3 Filer ID (Ethics Commission Filers)
4 Date 10/21/2024	5 Full name of contributor out-of-state Pa Wesley Peschel	7 Amount of contribution (\$)	
10/21/2024	6 Contributor address; City; 1326 Industry rd Industry,	200.00	
8 Principal occu Firefighter	pation / Job title (See Instructions)	9 Employer (See Instruct City of Houston	ions)
Date	Full name of contributor out-of-state PAC (ID#:		Amount of contribution (\$)
11/13/2024	Contributor address; City; PO box 1246 New Ulm,	State; Zip Code	500.00
Principal occup	 pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date		PAC (ID#:)	Amount of contribution (\$)
11/13/2024	13/2024 RW Ranch Industries, LLC  Contributor address; City; State; Zip Code  2602 Westlake Drive Austin, Tx 78746		500.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor out-of-state F	PAC (ID#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	tions)
	ATTACH ADDITIONAL COPIE	S OF THIS SCHEDULE AS N	

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

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
Credil Card Payment

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/ The Instruction Guide explains how to		Other (enter a category not listed above)
1 Total pages Schedule F1:			Filer ID (Ethics Commission Filers)
4 Date 10/31/2024	5 Payee name Bellville TImes		
6 Amount (\$)	7 Payee address;	City;	State; Zip Code
256.00	106 East Palm Bellville, Tx 77418		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Advertising expense	News paper arti	cle
	(c) Check if travel outside of Texas, Complete Schedule T.	Check if Austin, 1	TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name  Wesley Peschel	Office sought JP2	Office held
Date	Payee name		
11/22/2024	Bellville TImes		
Amount (\$)	Payee address;	City;	State; Zip Code
147.00	106 East Palm Bellville, Tx 77418		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Advertising expense	News paper art	icle
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin,	TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
Amount (\$)	Payee address;	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	Check if travel outside of Texas. Complete Schedule T.	Check If Austin,	TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Ol	Candidate / Officeholder name H	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THI	S SCHEDULE AS NEED	DED