

**CAND DATE / OFF CEHOLDER
CA PA GN F A CE REPORT**

**FORM C/OH
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.

3 CANDIDATE / OFFICEHOLDER NAME MS / MRS / MR Mr FIRST James MI P OFFICE USE ONLY

NICKNAME LAST SUFFIX Jim Westerheid

Date Received

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2714 Clublake Trail McKinney TX 75072

Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE AREA CODE PHONE NUMBER EXTENSION Date Hand-delivered or Date Postmarked (214) 585-0053

6 CAMPAIGN TREASURER MS / MRS / MR James MI G Receipt # Amount \$

NAME NICKNAME LAST SUFF X Date Imaged Jim Herblin III

7 CAMPAIGN TREASURER ADDRESS STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 901 Main Street, Suite 600 Dallas TX 75202

(Residence or Business)

8 CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION (214) 979-2303

9 REPORT TYPE January 15 30th day before election Runoff 15th day after campaign treasurer appointment (Officeholder Only) July 15 8th day before election Exceeded Modified Reporting Limit Final Report (Attach C/OH - FR)

10 PERIOD COVERED Month Day Year 4 / 27 23 THROUGH Month Day Year 6 / 30 23

ELECTION TYPE

Month Day Year Primary Runoff Other Description

SUBTOTALS - C/O

FORM C/OH
COVER SHEET PG 3

19 FILER NAME

Jim Westerheid

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 714.00
2	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$ 8,640.00
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 12,268.00
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 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: **2**

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

Jim Westerheid

4 Date

5 Full name of contributor

out-of-state PAC

7 Amount of contribution (\$)

04/27/2023

Rachel Elliott

6 Contributor address;

City;

State; Zip Code

20021 [redacted] McKinney, Texas 75070

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Full name of contributor

Amount of contribution (\$)

10

out-of-state PAC (ID#)

04/27/2023

Contributor address;

City;

State; Zip Code

9224 Water Willow Way McKinney TX: 75071

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: _____

3 Filer ID (Ethics Commission Filers) _____

out-of-state PAC

out-of-state PAC

Jim Westerheid

4 Date

5 Full name of contributor

7 Amount of contribution (\$)

Christy White

06/00/0000

Date

6 Contributor address;

out-of-state PAC

City; State; Zip Code

4609 Forest Cove Dr; McKinney; TX; 75071

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

out-of-state PAC (ID#): _____

Amount of contribution (\$)

Contributor address;

City;

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Full name of contributor

Amount of contribution (\$)

Contributor address;

City;

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

LOANS

SCHEDULE E

DO NOT WRITE IN THESE SPACES

out-of-state PAC ID#

out-of-state PAC ID#

City:

2 FILER NAME

Jim Westerheid

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$

5 Date of loan

7 Name of lender

9 Loan Amount (\$)

04/27/2023

Jim Westerheid

8,400.00

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the information is not **DO NOT** include this in the

EXPENDITURE CATEGORIES FOR BOX 8(a)

Contribution to Candidate
Loan
Purchase
Solicitation/Fundraising Expense

The Instruction Guide explains how to complete this form

1. Total pages Schedule F1 2. FILER NAME 3. Filer ID (Ethics Commission Filers)

2. **Jim Westerheid**

4. Date 5. Payee name
04/27/2023 Garrison Management

6. Amount (\$) 7. Payee address; City; State; Zip Code
2,445.00 800 W 47th Street Kansas City MO 64112

8. Description
Flyers

PURPOSE OF EXPENDITURE

(c) Office sought Office held

[REDACTED]

Expenditure to benefit C/OH

Date Payee name
04/27/2023 Garrison Management

Amount (\$) Payee address; City; State; Zip Code
8,390.00 800 W. 47th Street Kansas City MO 64112

Description
Flyers

PURPOSE OF EXPENDITURE

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held
Date Payee name

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not **DO NOT** include this in the EXPENDITURE CATEGORIES FOR BOX 8(a)

1 Total pages Schedule F1 2 FILER NAME **Jim Westerheid** 3 Filer ID (Ethics Commission Filers)

4 Date 5 Payee name

[REDACTED]

1,100.00 1540 Keller Pkwy Keller TX 76248

8 (b) Description
PURPOSE OF EXPENDITURE

(c)
Candidate / Officeholder name Office sought Office held

Date Payee name

Amount (\$) Payee address; City; State; Zip Code

Description

PURPOSE OF EXPENDITURE

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Payee name

Amount (\$) Payee address;

**CANDIDATE / OFFICEHOLDER REPORT:
DESIGNATION OF FINAL REPORT**

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)

Jim Westerheid

3 SIGNATURE

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.

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 have received distributions or unexpended interest or income earned from political contributions.

I have received distributions or unexpended interest

political