

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) 00090482		2 Total pages filed: 5	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Louis C.		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/13/2024		
	NICKNAME LAST SUFFIX Herrin III				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 1023 WISTERIA TRL Austin, TX 78753-5849		Date Hand-delivered or Date Postmarked		
			Receipt # Amount		
			Date Processed		
			Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Louis				
	NICKNAME LAST SUFFIX Herrin III				
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1023 WISTERIA TRL Austin, TX 78753-5849				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 567-9489				
8 REPORT TYPE	<input checked="" 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 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)				
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 07/01/2023 12/31/2023				
10 ELECTION	ELECTION DATE Month Day Year 11/03/2020		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Council Member, District 4 Place Austin District 4		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 5

13 C / OH NAME	Herrin III, Louis C.	14 Filer ID	(Ethics Commission Filers)
		00090482	

15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
	COMMITTEE TYPE	COMMITTEE NAME	
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	

16 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	3,146.14
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 AFFADAVIT		
<p>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.</p>		
<p>Louis C. Herrin III</p> <p>_____ Signature of Candidate or Officeholder</p>		
AFFIX NOTARY STAMP / SEAL ABOVE		
Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.		
_____ Signature of officer administering	_____ Printed name of officer administering	_____ Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

3 of 5

18 FILER NAME Herrin III, Louis C.		19 Filer ID (Ethics Commission Filers) 00090482	
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	
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 FROM POLITICAL CONTRIBUTIONS	\$	
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	1.72

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/2 Rpt: 4/5
2 FILER NAME Herrin III, Louis C.		3 Filer ID (Ethics Commission Filers) 00090482
4 Date 07/03/2023	5 Name of person from whom amount is received Woodforest National Bank	8 Amount (\$) \$0.13
	6 Address of person from whom amount is received; City; State; Zip Code P.O. Box 7889 The Woodlands, TX 77387-7889	
	7 Purpose for which amount is received bank interest <input type="checkbox"/> Check if political contribution returned to filer	
Date 08/03/2023	Name of person from whom amount is received Woodforest National Bank	Amount (\$) \$0.13
	Address of person from whom amount is received; City; State; Zip Code P.O. Box 7889 The Woodlands, TX 77387-7889	
	Purpose for which amount is received bank interest <input type="checkbox"/> Check if political contribution returned to filer	
Date 09/03/2023	Name of person from whom amount is received Woodforest National Bank	Amount (\$) \$0.13
	Address of person from whom amount is received; City; State; Zip Code P.O. Box 7889 The Woodlands, TX 77387-7889	
	Purpose for which amount is received Bank interest <input type="checkbox"/> Check if political contribution returned to filer	
Date 09/21/2023	Name of person from whom amount is received Woodforest National Bank	Amount (\$) \$0.15
	Address of person from whom amount is received; City; State; Zip Code P.O. Box 7889 The Woodlands, TX 77387-7889	
	Purpose for which amount is received bank interest <input type="checkbox"/> Check if political contribution returned to filer	
Date 10/03/2023	Name of person from whom amount is received Woodforest National Bank	Amount (\$) \$0.39
	Address of person from whom amount is received; City; State; Zip Code P.O. Box 7889 The Woodlands, TX 77387-7889	
	Purpose for which amount is received Bank interest <input type="checkbox"/> Check if political contribution returned to filer	

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:
Sch: 2/2 Rpt: 5/5

2 FILER NAME
Herrin III, Louis C.

3 Filer ID (Ethics Commission Filers)
00090482

4 Date 11/03/2023	5 Name of person from whom amount is received Woodforest National Bank	8 Amount (\$) \$0.40
	6 Address of person from whom amount is received; City; State; Zip Code P.O. Box 7889 The Woodlands, TX 77387-7889	
	7 Purpose for which amount is received bank interest <input type="checkbox"/> Check if political contribution returned to filer	

Date 12/02/2023	Name of person from whom amount is received Woodforest National Bank	Amount (\$) \$0.39
	Address of person from whom amount is received; City; State; Zip Code P.O. Box 7889 The Woodlands, TX 77387-7889	
	Purpose for which amount is received bank interest <input type="checkbox"/> Check if political contribution returned to filer	