

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: <p style="text-align: center; font-size: 1.2em;">3</p>																			
3 CANDIDATE / OFFICEHOLDER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; font-size: 0.8em;">MS / MRS / MR</td> <td style="width:25%;">Mrs.</td> <td style="width:15%; font-size: 0.8em;">FIRST</td> <td style="width:25%;">Kristin</td> <td style="width:10%; font-size: 0.8em;">MI</td> <td style="width:10%;">D</td> </tr> <tr> <td style="font-size: 0.8em;">NICKNAME</td> <td></td> <td style="font-size: 0.8em;">LAST</td> <td>Green</td> <td style="font-size: 0.8em;">SUFFIX</td> <td></td> </tr> </table>	MS / MRS / MR	Mrs.	FIRST	Kristin	MI	D	NICKNAME		LAST	Green	SUFFIX		OFFICE USE ONLY								
MS / MRS / MR	Mrs.	FIRST	Kristin	MI	D																	
NICKNAME		LAST	Green	SUFFIX																		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; font-size: 0.8em;">ADDRESS / PO BOX;</td> <td style="width:25%; font-size: 0.8em;">APT / SUITE #;</td> <td style="width:25%; font-size: 0.8em;">CITY;</td> <td style="width:10%; font-size: 0.8em;">STATE;</td> <td style="width:15%; font-size: 0.8em;">ZIP CODE</td> </tr> <tr> <td>305 W College Street</td> <td></td> <td>Lewisville</td> <td>TX</td> <td>75057</td> </tr> </table> <input type="checkbox"/> Change of Address			ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	305 W College Street		Lewisville	TX	75057									
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5 CANDIDATE / OFFICEHOLDER PHONE	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; font-size: 0.8em;">AREA CODE</td> <td style="width:40%; font-size: 0.8em;">PHONE NUMBER</td> <td style="width:35%; font-size: 0.8em;">EXTENSION</td> </tr> <tr> <td>(214)</td> <td>729-8733</td> <td></td> </tr> </table>			AREA CODE	PHONE NUMBER	EXTENSION	(214)	729-8733		Date Hand-delivered or Date Postmarked												
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6 CAMPAIGN TREASURER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; font-size: 0.8em;">MS / MRS / MR</td> <td style="width:25%;">Mrs.</td> <td style="width:15%; font-size: 0.8em;">FIRST</td> <td style="width:25%;">Kristin</td> <td style="width:10%; font-size: 0.8em;">MI</td> <td style="width:10%;">D</td> </tr> <tr> <td style="font-size: 0.8em;">NICKNAME</td> <td></td> <td style="font-size: 0.8em;">LAST</td> <td>Green</td> <td style="font-size: 0.8em;">SUFFIX</td> <td></td> </tr> </table>			MS / MRS / MR	Mrs.	FIRST	Kristin	MI	D	NICKNAME		LAST	Green	SUFFIX		Receipt #						
MS / MRS / MR	Mrs.	FIRST	Kristin	MI	D																	
NICKNAME		LAST	Green	SUFFIX																		
				Amount \$																		
7 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:45%; font-size: 0.8em;">STREET ADDRESS (NO PO BOX PLEASE);</td> <td style="width:15%; font-size: 0.8em;">APT / SUITE #;</td> <td style="width:20%; font-size: 0.8em;">CITY;</td> <td style="width:10%; font-size: 0.8em;">STATE;</td> <td style="width:10%; font-size: 0.8em;">ZIP CODE</td> </tr> <tr> <td>305 W College Street</td> <td></td> <td>Lewisville TX</td> <td></td> <td>75057</td> </tr> </table>			STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE;	ZIP CODE	305 W College Street		Lewisville TX		75057	Date Processed								
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9 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 (Officerholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)																					
10 PERIOD COVERED	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; font-size: 0.8em;">Month</td> <td style="width:10%; font-size: 0.8em;">Day</td> <td style="width:15%; font-size: 0.8em;">Year</td> <td style="width:20%;"></td> <td style="width:10%; font-size: 0.8em;">Month</td> <td style="width:10%; font-size: 0.8em;">Day</td> <td style="width:10%; font-size: 0.8em;">Year</td> </tr> <tr> <td>07</td> <td>01</td> <td>2019</td> <td style="text-align: center;">THROUGH</td> <td>12</td> <td>31</td> <td>2019</td> </tr> </table>			Month	Day	Year		Month	Day	Year	07	01	2019	THROUGH	12	31	2019					
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11 ELECTION	<table style="width:100%; border-collapse: collapse;"> <tr> <td colspan="3" style="font-size: 0.8em;">ELECTION DATE</td> <td colspan="3" style="font-size: 0.8em;">ELECTION TYPE</td> </tr> <tr> <td style="font-size: 0.8em;">Month</td> <td style="font-size: 0.8em;">Day</td> <td style="font-size: 0.8em;">Year</td> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> Other Description</td> </tr> <tr> <td>05</td> <td>04</td> <td>2019</td> <td><input checked="" type="checkbox"/> General</td> <td><input type="checkbox"/> Special</td> <td></td> </tr> </table>	ELECTION DATE			ELECTION TYPE			Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description	05	04	2019	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special				
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05	04	2019	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special																		
12 OFFICE	OFFICE HELD (if any) Lewisville City Council Place 5		13 OFFICE SOUGHT (if known)																			

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

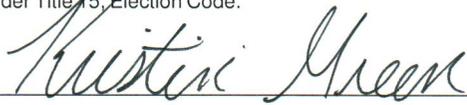
14 C/OH NAME Kristin Green	15 Filer ID (Ethics Commission Filers)
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16 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. 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.		
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME	
	COMMITTEE ADDRESS		
	COMMITTEE CAMPAIGN TREASURER NAME		
	COMMITTEE CAMPAIGN TREASURER ADDRESS		

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.39
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0.39
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 24.40
	4. TOTAL POLITICAL EXPENDITURES	\$ 24.40
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 2,010.78
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

18 AFFIDAVIT

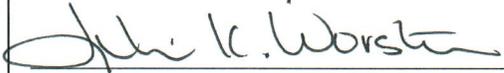
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



 Signature of Candidate or Officeholder

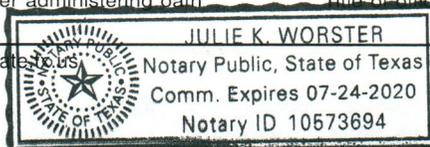
AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Kristin Green, this the 14th day of January, 2020, to certify which, witness my hand and seal of office.



 Notary Public

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath



SUBTOTALS - C/OH

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

19 FILER NAME Kristin Green		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 0.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0.00
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0.00
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.00