

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH  
COVER SHEET PG 1**

<p>The C/OH Instruction Guide explains how to complete this form.</p>		<p><b>1</b> Filer ID (Ethics Commission Filers)</p>	<p><b>2</b> Total pages filed:</p>
<p><b>3</b> CANDIDATE / OFFICEHOLDER NAME</p>	<p>MS / MRS / MR                      FIRST                      MI</p> <p>MR                                      DAVID                      W</p> <hr/> <p>NICKNAME                              LAST                              SUFFIX</p> <p style="text-align: center;">VANDERKAAY</p>	<p><b>OFFICE USE ONLY</b></p> <div style="border: 2px solid blue; padding: 5px; display: inline-block;"> <p><b>RECEIVED</b></p> <p style="font-size: 1.2em; color: red;">FEB 23 2024</p> <p style="color: red; font-family: cursive;">R</p> </div> <p>Date Received</p> <hr/> <p>Date Hand-delivered or Date Postmarked</p> <p style="font-size: 1.2em; color: red;">2-23-2024</p> <p>Receipt #                      Amount \$</p> <p style="color: red;">—                              —</p> <p>Date Processed</p> <p style="font-size: 1.2em; color: red;">2-23-2024</p> <p>Date Imaged</p> <p style="font-size: 1.2em; color: red;">2-23-2024</p>	
<p><b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS</p> <p style="font-size: 0.8em;">Change of Address</p>	<p>ADDRESS / PO BOX;                      APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE</p> <p>P.O. BOX 416      JACKSBORO, TEXAS      76458</p>		
<p><b>5</b> CANDIDATE / OFFICEHOLDER PHONE</p>	<p>AREA CODE                      PHONE NUMBER                      EXTENSION</p> <p>( 940      )</p>		
<p><b>6</b> CAMPAIGN TREASURER NAME</p>	<p>MS / MRS / MR                      FIRST                      MI</p> <p>MRS                                      KAREN                      L</p> <hr/> <p>NICKNAME                              LAST                              SUFFIX</p> <p style="text-align: center;">VANDERKAAY</p>		
<p><b>7</b> CAMPAIGN TREASURER ADDRESS</p> <p style="font-size: 0.8em;">(Residence or Business)</p>	<p>STREET ADDRESS (NO PO BOX PLEASE);                      APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE</p> <p>P.O.BOX 416      JACKSBORO      TEXAS      76458</p>		
<p><b>8</b> CAMPAIGN TREASURER PHONE</p>	<p>AREA CODE                      PHONE NUMBER                      EXTENSION</p> <p>( 940      )                      507-0532</p>		
<p><b>9</b> REPORT TYPE</p>	<p> <input 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 checked="" type="checkbox"/> 8th day before election      <input type="checkbox"/> Exceeded Modified Reporting Limit      <input type="checkbox"/> Final Report (Attach C/OH - FR)                 </p>		
<p><b>10</b> PERIOD COVERED</p>	<p>Month                      Day                      Year                      Month                      Day                      Year</p> <p style="font-size: 1.2em; text-align: center;">1      /      26      /      24                      THROUGH                      2      /      24      /      24</p>		
<p><b>11</b> ELECTION</p>	<p>ELECTION DATE</p> <p>Month                      Day                      Year</p> <p style="font-size: 1.2em; text-align: center;">3      /      5      /      24</p>	<p>ELECTION TYPE</p> <p> <input checked="" type="checkbox"/> Primary      <input type="checkbox"/> Runoff      <input type="checkbox"/> Other Description  <input type="checkbox"/> General      <input type="checkbox"/> Special      _____                 </p>	
<p><b>12</b> OFFICE</p>	<p>OFFICE HELD (if any)</p>	<p><b>13</b> OFFICE SOUGHT (if known)</p> <p style="font-size: 1.2em; text-align: center;">CONSTABLE</p>	
<p><b>14</b> NOTICE FROM POLITICAL COMMITTEE(S)</p> <p style="font-size: 0.8em;">Additional Pages</p>	<p>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.</p> <p> <input type="checkbox"/> GENERAL      COMMITTEE NAME                  COMMITTEE ADDRESS  <input type="checkbox"/> SPECIFIC      COMMITTEE CAMPAIGN TREASURER NAME                  COMMITTEE CAMPAIGN TREASURER ADDRESS             </p>		

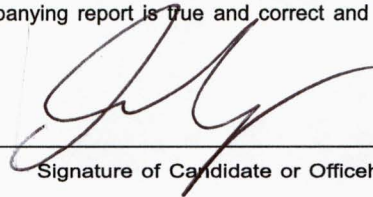
GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

<b>15 C/OH NAME</b> DAVID VANDERKAAY		<b>16 Filer ID</b> (Ethics Commission Filers)
<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 611.40
	4. TOTAL POLITICAL EXPENDITURES	\$ 611.40
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 0.00
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**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.

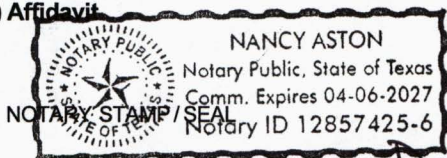


Signature of Candidate or Officeholder

Please complete either option below:



**(1) Affidavit**



Sworn to and subscribed before me by David Vanderkaay this the 23rd day of February, 2024 to certify which, witness my hand and seal of office.

Nancy Aston Signature of officer administering oath  
Nancy Aston Printed name of officer administering oath  
Notary Public 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)

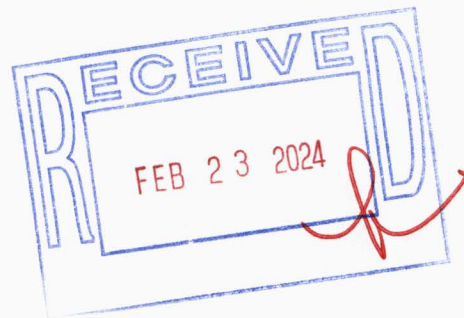
Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
 (month) (year)

Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

<b>19 FILER NAME</b> <b>DAVID VANDERKAAY</b>		<b>20 Filer ID (Ethics Commission Filers)</b>
<b>21 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		<b>SUBTOTAL AMOUNT</b>
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
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	\$ 611.40
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	\$



# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

**SCHEDULE G**

If the requested information is not applicable, **DO NOT** include this page in the report.

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: <b>1</b>	<b>2</b> FILER NAME <b>DAVID VANDERKAAY</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>01/31/2024</b>	<b>5</b> Payee name <b>GOOD GOVERNMENT CONSULTANTS</b>	
<b>6</b> Amount (\$) <b>384.90</b> <small>Reimbursement from political contributions intended</small>	<b>7</b> Payee address; City; State; Zip Code	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>ADVERTISING</b>	<b>(b)</b> Description <b>CARDS</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>DAVID VANDERKAAY</b>	Office sought <b>CONSTABLE</b>
Date <b>02/16/2024</b>	Payee name <b>PALO PINTO COMMUNICATIONS</b>	
Amount (\$) <b>113.25</b> <small>Reimbursement from political contributions intended</small>	Payee address; City; State; Zip Code <b>105 E. Main St., Suite 109A · Brenham TX · 77833</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>ADVERTISING</b>	Description <b>NEWSPAPER AD</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>DAVID VANDERKAAY</b>	Office sought <b>CONSTABLE</b>
Date <b>02/22/2024</b>	Payee name <b>PALO PINTO COMMUNICATIONS</b>	
Amount (\$) <b>113.25</b> <small>Reimbursement from political contributions intended</small>	Payee address; City; State; Zip Code <b>105 E. MAIN ST STE 109A BRENHAM TX 77833</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>ADVERTISING</b>	Description <b>NEWSPAPER AD</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>DAVID VANDERKAAY</b>	Office sought <b>CONSTABLE</b>



**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**



# AFFIDAVIT FOR CANDIDATE OR OFFICEHOLDER: ELECTRONIC FILING EXEMPTION

An exemption affidavit must be submitted with each paper report.

Beginning on January 1, 2024, a candidate or officeholder who has accepted more than \$32,810 in political contributions or made more than \$32,810 in political expenditures in any calendar year must file all subsequent reports electronically.

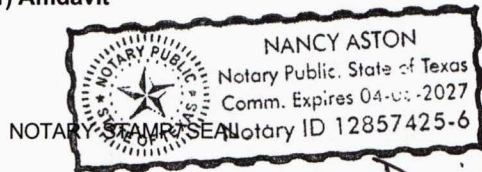
OFFICE USE ONLY	
Date Received	
Date Hand-delivered or Date Postmarked	
Receipt #	Amount \$
Date Processed	
Date Imaged	

Filer name <u>David VanderKaay</u>	Filer ID #
---------------------------------------	------------

- I swear or affirm that I have not accepted more than \$32,810 in political contributions or made more than \$32,810 in political expenditures in a calendar year.
- I further swear or affirm that I do not use computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- I further swear or affirm that no person acting as my agent or consultant, and no person with whom I contract, uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- I further swear or affirm that I understand that I am required to file my campaign finance reports electronically if I, my agent or consultant, or a person with whom I contract exceeds \$32,810 in political contributions or political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- I am filing this affidavit with the 8<sup>th</sup> day before election report due on 2-25-24. I understand that this affidavit is required to be filed with each campaign finance report for which I am claiming an exemption from electronic filing.

Please complete either option below:

### (1) Affidavit



[Signature]  
Signature of Filer

Sworn to and subscribed before me by David VanderKaay this the 23<sup>rd</sup> day of February, 2024 to certify which, witness my hand and seal of office.

<u>[Signature]</u> Signature of officer administering oath	<u>Nancy Aston</u> Printed name of officer administering oath	<u>Notary Public</u> Title of officer administering oath
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OR

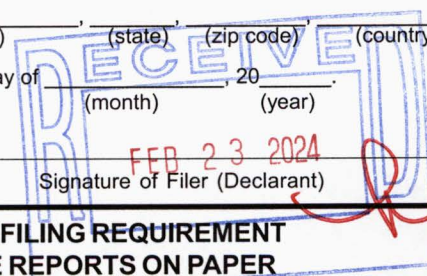
### (2) Unsworn Declaration

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 \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ (month) (year).

[Signature]  
Signature of Filer (Declarant)



**FILERS WHO ARE EXEMPT FROM THE ELECTRONIC FILING REQUIREMENT ARE STILL REQUIRED TO FILE CAMPAIGN FINANCE REPORTS ON PAPER**