

# 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:								
3 CANDIDATE / OFFICEHOLDER NAME	<div style="display: flex; justify-content: space-between;"> <span>MS / MRS / MR</span> <span>FIRST</span> <span>MI</span> </div> <div style="display: flex; justify-content: space-between;"> <span>Dr.</span> <span>Ann</span> <span></span> </div> <hr style="border: 0.5px dotted black;"/> <div style="display: flex; justify-content: space-between;"> <span>NICKNAME</span> <span>LAST</span> <span>SUFFIX</span> </div> <div style="display: flex; justify-content: space-between;"> <span></span> <span>Snyder</span> <span></span> </div>	<div style="border: 1px solid black; padding: 5px;">OFFICE USE ONLY</div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Date Received</div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Date Hand-delivered or Date Postmarked</div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <div style="display: flex; justify-content: space-between;"> <span>Receipt #</span> <span>Amount \$</span> </div> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Date Processed</div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Date Imaged</div>									
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	<div style="display: flex; justify-content: space-between;"> <span>ADDRESS / PO BOX;</span> <span>APT / SUITE #;</span> <span>CITY;</span> <span>STATE;</span> <span>ZIP CODE</span> </div> <div style="display: flex; justify-content: space-between;"> <span>17 Topside Rd</span> <span>The Woodlands, Tx 77381</span> </div>	<div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Date Hand-delivered or Date Postmarked</div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <div style="display: flex; justify-content: space-between;"> <span>Receipt #</span> <span>Amount \$</span> </div> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Date Processed</div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Date Imaged</div>									
5 CANDIDATE / OFFICEHOLDER PHONE	<div style="display: flex; justify-content: space-between;"> <span>AREA CODE</span> <span>PHONE NUMBER</span> <span>EXTENSION</span> </div> <div style="display: flex; justify-content: space-between;"> <span>( 713 )</span> <span>305-2931</span> </div>										
6 CAMPAIGN TREASURER NAME	<div style="display: flex; justify-content: space-between;"> <span>MS / MRS / MR</span> <span>FIRST</span> <span>MI</span> </div> <div style="display: flex; justify-content: space-between;"> <span>Dr.</span> <span>Scott</span> <span></span> </div> <hr style="border: 0.5px dotted black;"/> <div style="display: flex; justify-content: space-between;"> <span>NICKNAME</span> <span>LAST</span> <span>SUFFIX</span> </div> <div style="display: flex; justify-content: space-between;"> <span></span> <span>Young</span> <span></span> </div>										
7 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	<div style="display: flex; justify-content: space-between;"> <span>STREET ADDRESS (NO PO BOX PLEASE);</span> <span>APT / SUITE #;</span> <span>CITY;</span> <span>STATE;</span> <span>ZIP CODE</span> </div> <div style="display: flex; justify-content: space-between;"> <span>6 N Player Crest Circle</span> <span>The Woodlands, Tx 77382</span> </div>										
8 CAMPAIGN TREASURER PHONE	<div style="display: flex; justify-content: space-between;"> <span>AREA CODE</span> <span>PHONE NUMBER</span> <span>EXTENSION</span> </div> <div style="display: flex; justify-content: space-between;"> <span>( 281 )</span> <span>705-5385</span> </div>										
9 REPORT TYPE	<div style="display: flex; justify-content: space-between;"> <div> <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)         </div> <div> <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)         </div> </div>										
10 PERIOD COVERED	<div style="display: flex; justify-content: space-between;"> <div> <div style="display: flex; justify-content: space-between;"> <span>Month</span> <span>Day</span> <span>Year</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10</span> <span>07</span> <span>2023</span> </div> </div> <div>THROUGH</div> <div> <div style="display: flex; justify-content: space-between;"> <span>Month</span> <span>Day</span> <span>Year</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10</span> <span>30</span> <span>2023</span> </div> </div> </div>										
11 ELECTION	<div style="display: flex; justify-content: space-between;"> <div> <div style="display: flex; justify-content: space-between;"> <span>ELECTION DATE</span> </div> <div style="display: flex; justify-content: space-between;"> <span>Month</span> <span>Day</span> <span>Year</span> </div> <div style="display: flex; justify-content: space-between;"> <span>11</span> <span>07</span> <span>2023</span> </div> </div> <div> <div style="display: flex; justify-content: space-between;"> <span>ELECTION TYPE</span> </div> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Primary                             <input type="checkbox"/> Runoff                             <input type="checkbox"/> Other Description                         </div> <div> <input checked="" type="checkbox"/> General                             <input type="checkbox"/> Special                         </div> </div> </div> </div>										
12 OFFICE	OFFICE HELD (if any) Chairman	13 OFFICE SOUGHT (if known) The Woodlands Township Position 6									
14 NOTICE FROM POLITICAL COMMITTEE(S)  <input type="checkbox"/> Additional Pages	<div style="border: 1px solid black; padding: 5px;"> <p style="font-size: 0.8em; margin: 0;">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> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; padding: 5px; vertical-align: top;">COMMITTEE TYPE</td> <td style="padding: 5px;">COMMITTEE NAME</td> </tr> <tr> <td style="padding: 5px; vertical-align: top;"><input type="checkbox"/> GENERAL</td> <td style="padding: 5px;">COMMITTEE ADDRESS</td> </tr> <tr> <td style="padding: 5px; vertical-align: top;"><input type="checkbox"/> SPECIFIC</td> <td style="padding: 5px;">COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td style="padding: 5px; vertical-align: top;"></td> <td style="padding: 5px;">COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table> </div>			COMMITTEE TYPE	COMMITTEE NAME	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS
COMMITTEE TYPE	COMMITTEE NAME										
<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS										
<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME										
	COMMITTEE CAMPAIGN TREASURER ADDRESS										

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 2

15 C/OH NAME

16 Filer ID (Ethics Commission Filers)

17 CONTRIBUTION  
TOTALS1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN  
PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR  
CONTRIBUTIONS MADE ELECTRONICALLY)

\$ 1,000.00

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

EXPENDITURE  
TOTALS

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.

\$

4. TOTAL POLITICAL EXPENDITURES

\$ 155.00

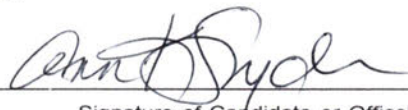
CONTRIBUTION  
BALANCE5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  
OF REPORTING PERIOD

\$ 17,893.92

OUTSTANDING  
LOAN TOTALS6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE  
LAST DAY OF THE REPORTING PERIOD

\$

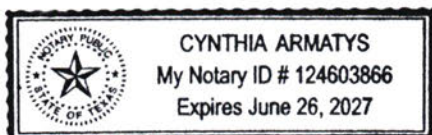
18 SIGNATURE

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.


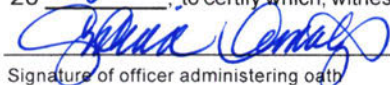
Signature of Candidate or Officeholder

Please complete either option below:

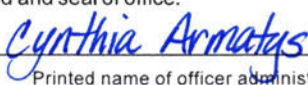
(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by Ann K. Snyder this the 25<sup>th</sup> day of October,20 23, to certify which, witness my hand and seal of office.


Signature of officer administering oath



Printed name of officer administering oath



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

19 FILER NAME

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,000.00
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 checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 155.00
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/>	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 FILER NAME <b>Ann Snyder</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>10/12/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Cheryl and Mike Pilgrim</b> 6 Contributor address; City; State; Zip Code <div style="background-color: black; width: 150px; height: 1.2em; display: inline-block;"></div> <b>The Woodlands, Tx 77375</b>	7 Amount of contribution (\$)  <b>\$100.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>10/12/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Barry and Cindy Millenson</b> Contributor address; City; State; Zip Code <div style="background-color: black; width: 150px; height: 1.2em; display: inline-block;"></div> <b>, The Woodland, Tx 77381</b>	Amount of contribution (\$)  <b>\$500.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>10/12/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>William Mattern</b> Contributor address; City; State; Zip Code <div style="background-color: black; width: 150px; height: 1.2em; display: inline-block;"></div> <b>The Woodlands, Tx 77381</b>	Amount of contribution (\$)  <b>\$100.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>10/12/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>John and Debbie Powers</b> Contributor address; City; State; Zip Code <div style="background-color: black; width: 150px; height: 1.2em; display: inline-block;"></div> <b>The Woodands, Tx 77381</b>	Amount of contribution (\$)  <b>\$100.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

**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 FILER NAME <div style="text-align: center;">Ann Snyder</div>		3 Filer ID (Ethics Commission Filers)
4 Date <div style="text-align: center;">10/04/2023</div>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <div style="text-align: center;">Richard and Janet Jakovac</div> <hr/> 6 Contributor address; City; State; Zip Code <div style="text-align: center;">[REDACTED] The Woodlands, Tx 77375</div>	7 Amount of contribution (\$) <div style="text-align: center;">\$100.00</div>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <div style="text-align: center;">10/04/2023</div>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <div style="text-align: center;">Richard and Diane Bass</div> <hr/> Contributor address; City; State; Zip Code <div style="text-align: center;">[REDACTED] Conroe, Tx 77384</div>	Amount of contribution (\$) <div style="text-align: center;">\$100.00</div>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <hr/> Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <hr/> Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# 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  
Credit Card Payment

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

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  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:		<b>2</b> FILER NAME Ann K. Snyder		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 10/19/2023		<b>5</b> Payee name adWhite Marketing and Design			
<b>6</b> Amount (\$)  \$155.00		<b>7</b> Payee address; City; State; Zip Code  33300 Egypt Ln Ste H200, Magnolia, Tx 77354			
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Advertising INV#20304		<b>(b)</b> Description		
	<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					
Date		Candidate / Officeholder name			
Payee name		Office sought			
Amount (\$)		Office held			
Payee address;		City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)		Description		
	<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					
Date		Candidate / Officeholder name			
Payee name		Office sought			
Amount (\$)		Office held			
Payee address;		City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)		Description		
	<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					
Date		Candidate / Officeholder name			
Payee name		Office sought			
Amount (\$)		Office held			
Payee address;		City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)		Description		
	<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					
Date		Candidate / Officeholder name			
Payee name		Office sought			
Amount (\$)		Office held			
Payee address;		City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)		Description		
	<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					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED