

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 | 2 Total pages filed: 52 | | | | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR | FIRST Christine | MI | OFFICE USE ONLY | | | |
| | NICKNAME | LAST Sederquist | SUFFIX | | | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 1428 Bovina Dr. Leander, TX 78641 | | | Date Received 04.01.2021 DCrabtree | | | |
| | | | | Date Hand-delivered or Date Postmarked | | | |
| | | | | Receipt # Amount | | | |
| | | | | Date Processed | | | |
| | | | Date Imaged | | | | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR | FIRST Christine | MI | | | | |
| | NICKNAME | LAST Sederquist | SUFFIX | | | | |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1428 Bovina Dr. Leander, TX 78641 | | | | | | |
| | | | | | | | |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE | PHONE NUMBER | EXTENSION | | | | |
| | (512) | 921-9181 | | | | | |
| 8 REPORT TYPE | <input type="checkbox"/> January 15 <input checked="" 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 | Month | Day | Year | |
| | 01 | 01 | 2021 | THROUGH | 03 | 22 | 2021 |
| 10 ELECTION | ELECTION DATE Month Day Year 05/01/2021 | | | 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) Leander City Council, Place 4 | | | 12 OFFICE SOUGHT (if known) Leander Mayor | | | |
| | | | | | | | |

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