

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	MS / MRS / MR <i>Mrs</i>	FIRST <i>Kristin</i>	MI	OFFICE USE ONLY Date Received <div style="font-size: 2em; color: blue; font-weight: bold;">Received</div> <div style="font-size: 1.5em; color: blue; font-weight: bold;">FEB 24 20</div> Lewisville ISD Superintendent's Office
	NICKNAME <i>Kristi</i>	LAST <i>Hassett</i>	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <i>3500 Beringer Ct Flower Mound, TX 75022</i>			
	AREA CODE PHONE NUMBER EXTENSION <i>(214) 707-6391</i>			
5 CANDIDATE / OFFICEHOLDER PHONE	MS / MRS / MR <i>MS</i>	FIRST <i>Valerie</i>	MI <i>R.</i>	Date Hand-delivered or Date Postmarked
	NICKNAME <i>Price</i>	LAST <i>Price</i>	SUFFIX	Receipt # Amount \$
6 CAMPAIGN TREASURER NAME	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <i>312 Georgian Oak Ct Walle Dallas, TX 75065</i>			Date Processed
	AREA CODE PHONE NUMBER EXTENSION <i>(940) 321-0889</i>			Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <i>312 Georgian Oak Ct Walle Dallas, TX 75065</i>			
	AREA CODE PHONE NUMBER EXTENSION <i>(940) 321-0889</i>			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <i>(940) 321-0889</i>			
9 REPORT TYPE	<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 type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input checked="" type="checkbox"/> Final Report (Attach C/OH - FR)			
10 PERIOD COVERED	Month Day Year <i>1 / 15 / 2020</i>			Month Day Year <i>2 / 24 / 2020</i>
11 ELECTION	ELECTION DATE Month Day Year <i>5 / 2 / 2020</i>		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special <i>Local school board</i>	
	12 OFFICE OFFICE HELD (if any) <i>LPSD Trustee Place 6</i>		13 OFFICE SOUGHT (if known) <i>LPSD Trustee Place 6</i>	

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FORM C/OH
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14 C/OH NAME Kristi Hassett 15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

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.

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS
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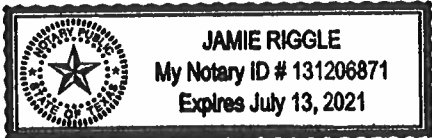
Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$	0
	4. TOTAL POLITICAL EXPENDITURES	\$	0
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$	0
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0

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.

Kristi Hassett
Signature of Candidate or Officeholder



JAMIE RIGGLE
My Notary ID # 131206871
Expires July 13, 2021

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Kristi Hassett, this the 24th day of February, 20 20, to certify which, witness my hand and seal of office.

Jamie Riggle Signature of officer administering oath
Jamie Riggle Printed name of officer administering oath
Notary Public Title of officer administering oath