Received 4/29/2024 FORM C/OH CANDIDATE / OFFICEHOLDER COVER SHEET PG 2 CAMPAIGN FINANCE REPORT 16 Filer ID (Ethics Commission Filers) 15 C/OH NAME JOHN K HOYLE, III TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN 17 CONTRIBUTION 0.00 S TOTALS PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) TOTAL POLITICAL CONTRIBUTIONS 765.00 (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) EXPENDITURE TOTAL UNITEMIZED POLITICAL EXPENDITURE. 3. 0.00TOTALS 211.09 TOTAL POLITICAL EXPENDITURES \$ CONTRIBUTION TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY 5 43.76 \$ BALANCE OF REPORTING PERIOD OUTSTANDING TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE S LOAN TOTALS LAST DAY OF THE REPORTING PERIOD I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information 18 SIGNATURE required to be reported by me under Title 15, Election Code. Candidate or Officeholder Please complete either option below: (1) Affidavit NOTARY STAMP/SEAL ___ day of_ _ this the ___ Sworn to and subscribed before me by __ 20 ______, to certify which, witness my hand and seal of office. Title of officer administering oath Signature of officer administering oath Printed name of officer administering cath

My name is JOHN K HOYLE, III

and my date of birth is

USA

My address is PO BOX 47836 L

SAN ANTONIO TX

78265

(country)

(street) County, State of TX

day of APRIL

(zip code) 2024

(year)

of Candidate/Officeholder (Declarant)

(state)

on the 24