

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

The C/OH Instruction Guide explains how to complete this form.		<b>1</b> Filer ID (Ethics Commission Filers)	<b>2</b> Total pages filed:								
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR                      FIRST                      MI Mr.                                      Duane                      G. ----- NICKNAME                              LAST                      SUFFIX Crocker	<b>OFFICE USE ONLY</b> Date Received <div style="text-align: center; font-size: 1.2em; font-weight: bold;">RECEIVED <u>JAN 3</u> 2024</div> City Secretary <div style="text-align: right; margin-top: 10px;"> <i>4:42pm</i>                      Date Hand-delivered or Date Postmarked                      JAN 3 2024                 </div> <table border="1" style="width:100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width:50%; padding: 2px;">Receipt #</td> <td style="width:50%; padding: 2px;">Amount \$</td> </tr> <tr> <td colspan="2" style="padding: 2px;">Date Processed</td> </tr> <tr> <td colspan="2" style="padding: 2px;">Date Imaged</td> </tr> </table>		Receipt #	Amount \$	Date Processed		Date Imaged			
Receipt #	Amount \$										
Date Processed											
Date Imaged											
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS <small>Change of Address</small>	ADDRESS / PO BOX;                      APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE P. O. Box 2661, Victoria, Texas 77902										
<b>5</b> CANDIDATE / OFFICEHOLDER PHONE	AREA CODE                      PHONE NUMBER                      EXTENSION ( 361 )                      935-0585		Date Hand-delivered or Date Postmarked JAN 3 2024								
<b>6</b> CAMPAIGN TREASURER NAME	MS / MRS / MR                      FIRST                      MI Mrs.                                      Monica ----- NICKNAME                              LAST                      SUFFIX Crocker		Receipt #								
<b>7</b> CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE);                      APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE 306 Vista Cove, Victoria, Texas 77904										
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE                      PHONE NUMBER                      EXTENSION ( 361 )                      935-3720		Amount \$								
<b>9</b> REPORT TYPE	<table style="width:100%; border: none;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input checked="" type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded Modified Reporting Limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table>			<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)
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<b>10</b> PERIOD COVERED	<table style="width:100%; border: none;"> <tr> <td style="text-align: center;">Month      Day      Year</td> <td style="text-align: center;">THROUGH</td> <td style="text-align: center;">Month      Day      Year</td> </tr> <tr> <td style="text-align: center;">1      /      16      /      23</td> <td></td> <td style="text-align: center;">1      /      3      /      24</td> </tr> </table>			Month      Day      Year	THROUGH	Month      Day      Year	1      /      16      /      23		1      /      3      /      24		
Month      Day      Year	THROUGH	Month      Day      Year									
1      /      16      /      23		1      /      3      /      24									
<b>11</b> ELECTION	ELECTION DATE Month      Day      Year 2      /      3      /      24	ELECTION TYPE Primary      Runoff      Other Description General <input checked="" type="checkbox"/> Special									
<b>12</b> OFFICE	OFFICE HELD (if any) Victoria City Council, Dist. 3	<b>13</b> OFFICE SOUGHT (if known) Mayor-City of Victoria									
<b>14</b> 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.										
Additional Pages	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; padding: 2px;">COMMITTEE TYPE</td> <td style="padding: 2px;">COMMITTEE NAME</td> </tr> <tr> <td style="padding: 2px;">GENERAL</td> <td style="padding: 2px;">COMMITTEE ADDRESS</td> </tr> <tr> <td style="padding: 2px;">SPECIFIC</td> <td style="padding: 2px;">COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td style="padding: 2px;"></td> <td style="padding: 2px;">COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>	COMMITTEE TYPE	COMMITTEE NAME	GENERAL	COMMITTEE ADDRESS	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS		
COMMITTEE TYPE	COMMITTEE NAME										
GENERAL	COMMITTEE ADDRESS										
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

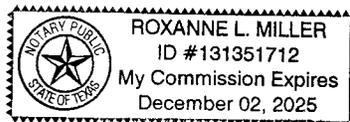
<b>15 C/OH NAME</b> Duane G. Crocker		<b>16 Filer ID (Ethics Commission Filers)</b>
<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 18,495.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 2,874.98
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 19,361.90
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1,000.00

**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.

*[Handwritten Signature]*  
\_\_\_\_\_  
Signature of Candidate or Officeholder

**Please complete either option below:**

**(1) Affidavit**



NOTARY STAMP / SEAL

Sworn to and subscribed before me by Duane G. Crocker this the 3rd day of January,

2024, to certify which, witness my hand and seal of office.

*[Signature]* Roxanne L. Miller Notary Public  
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**

<b>19 FILER NAME</b> Duane G. Crocker	<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	\$ 18,495.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4. SCHEDULE E: LOANS	\$ 1,000.00
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 2,874.98
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0.00
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0.00
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.00

**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: 14
2 FILER NAME Duane G. Crocker		3 Filer ID (Ethics Commission Filers)
4 Date 12/18/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Jon & Susan New ..... 6 Contributor address; City; State; Zip Code 405 Creekrige Drive, Victoria, Tx 77904	7 Amount of contribution (\$)  <b>500.00</b>
8 Principal occupation / Job title (See Instructions) Petroleum Marketing		9 Employer (See Instructions)
Date 12/18/2023	Full name of contributor out-of-state PAC (ID#: _____) Paul Cohen ..... Contributor address; City; State; Zip Code 809 Champions Row, Victoria, Tx 77904	Amount of contribution (\$)  <b>100.00</b>
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 12/18/2023	Full name of contributor out-of-state PAC (ID#: _____) Travis & Cally Fromme ..... Contributor address; City; State; Zip Code P. O. Box 2171, Victoria, Tx 77902	Amount of contribution (\$)  <b>500.00</b>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/18/2023	Full name of contributor out-of-state PAC (ID#: _____) Kelly Park ..... Contributor address; City; State; Zip Code 404 Kelly Drive, Victoria, Tx 77904	Amount of contribution (\$)  <b>250.00</b>
Principal occupation / Job title (See Instructions) Banker		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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 14
2 FILER NAME Duane G. Crocker		3 Filer ID (Ethics Commission Filers)
4 Date 12/18/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Hernan Tejera & Denise McCue 6 Contributor address; City; State; Zip Code 1701 N. Main Street, Victoria, Tx 77901	7 Amount of contribution (\$) <b>250.00</b>
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions)
Date 12/18/2023	Full name of contributor out-of-state PAC (ID#: _____) Bobby & Jan Jacob Contributor address; City; State; Zip Code 6041 Country Club Drive, Victoria, Tx 77904	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/18/2023	Full name of contributor out-of-state PAC (ID#: _____) Spencer & Rachel Klotzman Contributor address; City; State; Zip Code 2301 N. Wheeler, Victoria, Tx 77901	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See Instructions) Attorneys		Employer (See Instructions)
Date 12/18/2023	Full name of contributor out-of-state PAC (ID#: _____) Bruce & Vicki Bauknight Contributor address; City; State; Zip Code 3123 Country Club Drive, Victoria, Tx 77904	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See Instructions) Retired		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.		

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2 FILER NAME Duane G. Crocker		3 Filer ID (Ethics Commission Filers)
4 Date 12/18/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Don Pozzi 6 Contributor address; City; State; Zip Code 6012 B. Country Club Drive, Victoria, Tx 77904	7 Amount of contribution (\$)  <b>100.00</b>
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/18/2023	Full name of contributor out-of-state PAC (ID#: _____) William R. Blanchard Contributor address; City; State; Zip Code 408 Tampa Drive, Victoria, Tx 77904	Amount of contribution (\$)  <b>250.00</b>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/18/2023	Full name of contributor out-of-state PAC (ID#: _____) Rajesh B. Panchal Contributor address; City; State; Zip Code 6603 NE Zac Lentz Pkwy, Victoria, Tx 77904	Amount of contribution (\$)  <b>250.00</b>
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions)
Date 12/18/2023	Full name of contributor out-of-state PAC (ID#: _____) Jeanie Bauer Contributor address; City; State; Zip Code 101 Tampa Drive, Victoria, Tx 77904	Amount of contribution (\$)  <b>100.00</b>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
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# MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 14
2 FILER NAME Duane G. Crocker		3 Filer ID (Ethics Commission Filers)
4 Date 12/18/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Gary & B.J. Middleton 6 Contributor address; City; State; Zip Code 6003C Country Club Drive, Victoria, Tx 77904	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/18/2023	Full name of contributor out-of-state PAC (ID#: _____) June Stone Contributor address; City; State; Zip Code 107 Ridge View, Victoria, Tx 77904	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See Instructions) Business Owner - O&G		Employer (See Instructions)
Date 12/18/2023	Full name of contributor out-of-state PAC (ID#: _____) Paul Guthrie Contributor address; City; State; Zip Code 36 Meadow View, Victoria, Tx 77904	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/18/2023	Full name of contributor out-of-state PAC (ID#: _____) Jason & Sharon Elder Contributor address; City; State; Zip Code 114 Creekside Drive, Victoria, Tx 77904	Amount of contribution (\$) <b>1,000.00</b>
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

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2 FILER NAME Duane G. Crocker		3 Filer ID (Ethics Commission Filers)
4 Date 12/18/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Trey Ruschhaupt 6 Contributor address; City; State; Zip Code 6028 Country Club Drive, Victoria, Tx 77904	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See Instructions) Rancher		9 Employer (See Instructions)
Date 12/18/2023	Full name of contributor out-of-state PAC (ID#: _____) Buddy & Jerra Lee Contributor address; City; State; Zip Code 6107 Country Club Drive, Victoria, Tx 77904	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See Instructions) Rancher		Employer (See Instructions)
Date 12/18/2023	Full name of contributor out-of-state PAC (ID#: _____) Loretta Jones Contributor address; City; State; Zip Code 1904 Bon Aire, Victoria, Tx 77901	Amount of contribution (\$) <b>50.00</b>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/18/2023	Full name of contributor out-of-state PAC (ID#: _____) Alfred Allen Kopecky, MD Contributor address; City; State; Zip Code 112 Hollywood Blvd, Victoria, Tx 77904	Amount of contribution (\$) <b>50.00</b>
Principal occupation / Job title (See Instructions) Retired		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

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2 FILER NAME Duane G. Crocker		3 Filer ID (Ethics Commission Filers)
4 Date 12/18/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Randy & Becky Pilsner 6 Contributor address; City; State; Zip Code 23802 US Hwy 77 N, Yoakum. Tx 77995	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See Instructions) Retired/Church Director		9 Employer (See Instructions)
Date 12/19/2023	Full name of contributor out-of-state PAC (ID#: _____) Lee & Dixie Swearingen Contributor address; City; State; Zip Code 203 Leisure Lane, Victoria, Tx 77904	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions)
Date 12/20/2023	Full name of contributor out-of-state PAC (ID#: _____) Dale & Janet Hunt Contributor address; City; State; Zip Code 204 Willow Way, Victoria, Texas 77904	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions)
Date 12/20/2023	Full name of contributor out-of-state PAC (ID#: _____) Ben & Gay Heilker Contributor address; City; State; Zip Code Box 3882, Victoria, Texas 77903	Amount of contribution (\$) <b>2,000.00</b>
Principal occupation / Job title (See Instructions) Business Owner		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.		

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2 FILER NAME Duane G. Crocker		3 Filer ID (Ethics Commission Filers)
4 Date 12/20/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Craig Friemel 6 Contributor address; City; State; Zip Code 91 Post Oak Road, Inez, Texas 77968	7 Amount of contribution (\$)  <b>500.00</b>
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/20/2023	Full name of contributor out-of-state PAC (ID#: _____) Steve & LaJuana Roth Contributor address; City; State; Zip Code 6118 Country Club Drive, Victoria, Texas 77904	Amount of contribution (\$)  <b>200.00</b>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/20/2023	Full name of contributor out-of-state PAC (ID#: _____) Barry & Tammy Hartman Contributor address; City; State; Zip Code 305 Creekridge Drive, Victoria, Texas 77904	Amount of contribution (\$)  <b>250.00</b>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/20/2023	Full name of contributor out-of-state PAC (ID#: _____) Melody & John Handley Contributor address; City; State; Zip Code 801 N. Washington Street, Victoria, Texas 77901	Amount of contribution (\$)  <b>250.00</b>
Principal occupation / Job title (See Instructions) Financial Advisor		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

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2 FILER NAME Duane G. Crocker		3 Filer ID (Ethics Commission Filers)
4 Date 12/20/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Dr. Tom & Nancy Ashy 6 Contributor address; City; State; Zip Code 104 Albany Street, Victoria, Texas 77904	7 Amount of contribution (\$)  <b>100.00</b>
8 Principal occupation / Job title (See Instructions) Retired Physician		9 Employer (See Instructions)
Date 12/21/2023	Full name of contributor out-of-state PAC (ID#: _____) Dr. George & Debra Boozalis Contributor address; City; State; Zip Code 810 Champions Row, Victoria, Texas 77904	Amount of contribution (\$)  <b>1,000.00</b>
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions)
Date 12/21/2023	Full name of contributor out-of-state PAC (ID#: _____) Howard Marek Contributor address; City; State; Zip Code 119 Newport, Victoria, Texas 77904	Amount of contribution (\$)  <b>100.00</b>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 12/26/2023	Full name of contributor out-of-state PAC (ID#: _____) Gary & Kathie Breech Contributor address; City; State; Zip Code 2406 Loma Vista, Victoria, Texas 77901	Amount of contribution (\$)  <b>250.00</b>
Principal occupation / Job title (See Instructions) Insurance Agent		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.		

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2 FILER NAME Duane G. Crocker		3 Filer ID (Ethics Commission Filers)
4 Date 12/26/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Robby & Tami A. Burdge 6 Contributor address; City; State; Zip Code 101 Willow Way, Victoria, Texas 77904	7 Amount of contribution (\$)  <b>1,000.00</b>
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions)
Date 12/26/2023	Full name of contributor out-of-state PAC (ID#: _____) Ann Calhoun Contributor address; City; State; Zip Code 225 Charleston Drive, Victoria, Texas 77904	Amount of contribution (\$)  <b>500.00</b>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/26/2023	Full name of contributor out-of-state PAC (ID#: _____) Ben & Kathleen Keating Contributor address; City; State; Zip Code 5802 N. Navarro Street, Victoria, Texas 77904	Amount of contribution (\$)  <b>500.00</b>
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions)
Date 12/26/2023	Full name of contributor out-of-state PAC (ID#: _____) Dr. John L. McNeill, DO Contributor address; City; State; Zip Code P. O. Box 4348, Victoria, Texas 77903	Amount of contribution (\$)  <b>250.00</b>
Principal occupation / Job title (See Instructions) Physician		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.		

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2 FILER NAME Duane G. Crocker		3 Filer ID (Ethics Commission Filers)
4 Date 12/26/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Paul C. Teinert 6 Contributor address; City; State; Zip Code 209 Fenway, Victoria, Texas 77904	7 Amount of contribution (\$)  <b>250.00</b>
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions)
Date 12/27/2023	Full name of contributor out-of-state PAC (ID#: _____) Pamela Pozzi Contributor address; City; State; Zip Code 203 Lamorak, Victoria, Texas 77904	Amount of contribution (\$)  <b>50.00</b>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/27/2023	Full name of contributor out-of-state PAC (ID#: _____) Matt & Missy Manning Contributor address; City; State; Zip Code 201 Parsons Road, Victoria, Texas 77904	Amount of contribution (\$)  <b>50.00</b>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/27/2023	Full name of contributor out-of-state PAC (ID#: _____) Edwina & Dick Mabray Contributor address; City; State; Zip Code 304 Tampa Drive, Victoria, Texas 77904	Amount of contribution (\$)  <b>50.00</b>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
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: 14
2 FILER NAME Duane G. Crocker		3 Filer ID (Ethics Commission Filers)
4 Date 12/27/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Troy Tucker 6 Contributor address; City; State; Zip Code 6038 Country Club Drive, Victoria, Texas 77904	7 Amount of contribution (\$) <b>250.00</b>
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions)
Date 12/27/2023	Full name of contributor out-of-state PAC (ID#: _____) Mike & Audra Garvel Contributor address; City; State; Zip Code 83 Shannon Valley Drive, Victoria, Texas 77904	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions)
Date 12/27/2023	Full name of contributor out-of-state PAC (ID#: _____) Mark Zafereo Contributor address; City; State; Zip Code 125 Kreekview Drive, Victoria, Texas 77904	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See Instructions) Financial Advisor		Employer (See Instructions)
Date 12/27/2023	Full name of contributor out-of-state PAC (ID#: _____) Lesli & James Gietz Contributor address; City; State; Zip Code 26 Meadow View, Victoria, Texas 77904	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 14
2 FILER NAME Duane G. Crocker		3 Filer ID (Ethics Commission Filers)
4 Date 12/29/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Dr. Aaron Muegge 6 Contributor address; City; State; Zip Code 203 Masters Drive, Victoria, Texas 77904	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See Instructions) Dentist		9 Employer (See Instructions)
Date 12/29/2023	Full name of contributor out-of-state PAC (ID#: _____) David H. Robinson, Jr. Contributor address; City; State; Zip Code 5506 Country Club Drive, #3, Victoria, Texas 77904	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See Instructions) Rancher		Employer (See Instructions)
Date 12/29/2023	Full name of contributor out-of-state PAC (ID#: _____) Hal Redmon Contributor address; City; State; Zip Code 125 Kreekview Drive, Victoria, Texas 77904	Amount of contribution (\$) <b>45.00</b>
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions)
Date 12/29/2023	Full name of contributor out-of-state PAC (ID#: _____) John & Judy Clegg Contributor address; City; State; Zip Code 16400 NW Zac Lentz Pkwy, Victoria, Texas 77905	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See Instructions) Business Owner		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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 14
2 FILER NAME Duane G. Crocker		3 Filer ID (Ethics Commission Filers)
4 Date 01/02/2024	5 Full name of contributor out-of-state PAC (ID#: _____) Don & Allison Whitaker 6 Contributor address; City; State; Zip Code 6110 Country Club Drive, Victoria, Texas 77904	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See Instructions) CFO		9 Employer (See Instructions)
Date 01/02/2024	Full name of contributor out-of-state PAC (ID#: _____) Mike Rippamonti Contributor address; City; State; Zip Code P. O. Box 549, Yorktown, Texas 78164	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/02/2024	Full name of contributor out-of-state PAC (ID#: _____) Hardik & Parul Patel Contributor address; City; State; Zip Code 307 Fieldstone, Victoria, Texas 77901	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions)
Date 01/02/2024	Full name of contributor out-of-state PAC (ID#: _____) Charles & Darla Reithmeier Contributor address; City; State; Zip Code 206 CreekrIDGE Drive, Victoria, Texas 77904	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 14
2 FILER NAME Duane G. Crocker		3 Filer ID (Ethics Commission Filers)
4 Date 01/02/2024	5 Full name of contributor out-of-state PAC (ID#: _____) James N. Stofer 6 Contributor address; City; State; Zip Code 2408 N. Wheeler, Victoria, Texas 77901	7 Amount of contribution (\$) <b>250.00</b>
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 01/03/2024	Full name of contributor out-of-state PAC (ID#: _____) Jay & Barbara Lack Contributor address; City; State; Zip Code 102 Creekside, Victoria, Texas 77904	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
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**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	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 F1: 1	<b>2</b> FILER NAME Duane G. Crocker	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 12/08/2023	<b>5</b> Payee name The UPS Store
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<b>6</b> Amount (\$) 408.48	<b>7</b> Payee address; 1708 N. Navarro, Victoria, Texas 77901	City;	State;	Zip Code
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing expense	<b>(b)</b> Description Print & address correspondence & envelopes
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <span style="float: right;">Check if Austin, TX, officeholder living expense</span>	

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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<b>Date</b> 12/11/2023	<b>Payee name</b> United States Postal Service
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<b>Amount (\$)</b> 171.60	<b>Payee address;</b> 312 S. Main Street, Victoria, Texas 77901	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Other - postage	<b>Description</b> Postage Stamps
	Check if travel outside of Texas. Complete Schedule T. <span style="float: right;">Check if Austin, TX, officeholder living expense</span>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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<b>Date</b> 12/21/2023	<b>Payee name</b> Watermark Graphics, Inc.
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<b>Amount (\$)</b> 2,294.90	<b>Payee address;</b> 9201 US Highway 59N, Victoria, Texas 77905	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Advertising Expense	<b>Description</b> Campaign signs
	Check if travel outside of Texas. Complete Schedule T. <span style="float: right;">Check if Austin, TX, officeholder living expense</span>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**