

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

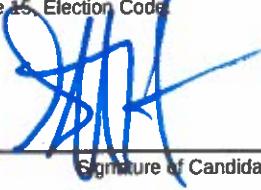
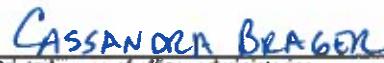
**FORM C/OH
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.			1 Filer ID	2 Total pages filed: 6		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Stuart	MI	OFFICE USE ONLY RECEIVED Date Received		
	NICKNAME	LAST Hene	SUFFIX	JUL 11 2025		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; P.O. Box 7612			ZIP CODE		
	Tyler, TX 75711			Date Hand-delivered or Date Postmarked CITY CLERK'S OFFICE Receipt # City Clerk		
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Ron	MI			
	NICKNAME	LAST Vickery	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 7270 Crosswater Ave. Suite A Tyler, TX 75703		APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE (903)	PHONE NUMBER 504-5490	EXTENSION			
8 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 checked="" 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 06/09/2025	Day	Year	Month 06/30/2025	Day	Year
10 ELECTION	ELECTION DATE Month Day Year 05/02/2026		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) Tyler City Council District 1			12 OFFICE SOUGHT (if known) Tyler Mayor		

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2
2 of 6**

13 C / OH NAME	Hene, Stuart		14 Filer ID																				
15 NOTICE FROM POLITICAL COMMITTEE(S)	<p>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"> <tr> <td>16 Additional Pages</td> <td>COMMITTEE TYPE</td> <td colspan="2">COMMITTEE NAME</td> </tr> <tr> <td></td> <td><input type="checkbox"/> GENERAL</td> <td colspan="2"></td> </tr> <tr> <td></td> <td><input type="checkbox"/> SPECIFIC</td> <td colspan="2">COMMITTEE ADDRESS</td> </tr> <tr> <td></td> <td></td> <td colspan="2">COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td></td> <td colspan="2">COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>			16 Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			<input type="checkbox"/> GENERAL				<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS				COMMITTEE CAMPAIGN TREASURER NAME				COMMITTEE CAMPAIGN TREASURER ADDRESS	
16 Additional Pages	COMMITTEE TYPE	COMMITTEE NAME																					
	<input type="checkbox"/> GENERAL																						
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS																					
		COMMITTEE CAMPAIGN TREASURER NAME																					
		COMMITTEE CAMPAIGN TREASURER ADDRESS																					
16 CONTRIBUTION TOTALS	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)		\$ 3,750.00																				
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00																				
	4. TOTAL POLITICAL EXPENDITURES		\$ 174.50																				
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 4,075.50																				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 500.00																				
17 AFFIDAVIT	<p>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.</p> <p></p> <p>_____ Signature of Candidate or Officeholder</p>																						
<p>AFFIX NOTARY STAMP / SEAL ABOVE</p> <p>Sworn to and subscribed before me, by the said <u>Stuart Hene</u>, this the <u>11th</u> day of <u>July</u>, 20<u>25</u>, to certify which, witness my hand and seal of office.</p> <p> Signature of officer administering</p> <p> Printed name of officer administering</p> <p> Title of officer administering oath</p>																							

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

3 of 6

18 FILER NAME Hene, Stuart	19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS	
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/6</p>
<p>2 FILER NAME Hene, Stuart</p>		<p>3 Filer ID</p>
<p>4 Date 06/17/2025</p>	<p>5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Dinger, Stephen</p>	<p>7 Amount of Contribution (\$) \$500.00</p>
	<p>6 Contributor address; City; State; Zip Code 3021 Forest Trail Tyler, TX 75703</p>	
<p>8 Principal occupation / Job title (See Instructions)</p>		<p>9 Employer (See Instructions)</p>
<p>Date 06/18/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Kaminski, Ken</p>	<p>Amount of Contribution (\$) \$2,500.00</p>
	<p>Contributor address; City; State; Zip Code 6987 Canal St. Tyler, TX 75703</p>	
<p>Principal occupation / Job title (See Instructions)</p>		<p>Employer (See Instructions)</p>
<p>Surgeon</p>		<p>Azalea Orthopedics</p>
<p>Date 06/19/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Langley, Blake</p>	<p>Amount of Contribution (\$) \$500.00</p>
	<p>Contributor address; City; State; Zip Code 4529 Brushy Creek Cove Tyler, TX 75703</p>	
<p>Principal occupation / Job title (See Instructions)</p>		<p>Employer (See Instructions)</p>
<p>Date 06/18/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Noble, Jim</p>	<p>Amount of Contribution (\$) \$150.00</p>
	<p>Contributor address; City; State; Zip Code 519 W 3rd St. Tyler, TX 75701</p>	
<p>Principal occupation / Job title (See Instructions)</p>		<p>Employer (See Instructions)</p>
<p>Date 06/17/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Stoltz, Michael</p>	<p>Amount of Contribution (\$) \$100.00</p>
	<p>Contributor address; City; State; Zip Code 401 W 7th St. Tyler, TX 75701</p>	
<p>Principal occupation / Job title (See Instructions)</p>		<p>Employer (See Instructions)</p>

LOANS**SCHEDULE E**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 5/6
2 FILER NAME Hene, Stuart		3 Filer ID
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 06/18/2025	7 Name of lender Hene, Stuart	<input type="checkbox"/> out-of-state PAC (ID# _____) 9 Loan Amount (\$) \$500.00
6 Is lender a financial institution? No	8 Lender address; 7310 Winterberry Cove Tyler, TX 75703	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions) Attorney		13 Employer (See Instructions) Tarry & Hene, PLLC
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account <input checked="" type="checkbox"/> (See Instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)
20 Principal occupation		21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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.

1 Total pages Schedule F1: Sch: 1/1 Rpt: 6/6	2 FILER NAME Hene, Stuart	3 Filer ID
4 Date 06/23/2025	5 Payee name Anedot	
6 Amount (\$) \$151.50	7 Payee address; City; State; Zip Code 5555 Hilton Ave. Suite 106 Baton Rouge, LA 70808	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 06/17/2025	Payee name Deluxe Checks	
Amount (\$) \$23.00	Payee address; City; State; Zip Code 801 S Marquette Ave. Minneapolis, MN 55402	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Checks
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held