

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

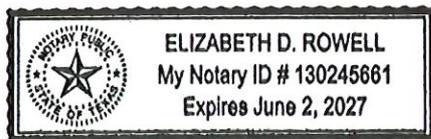
15 C/OH NAME <u>CRIMER, DAVID A</u>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ <u>50.00</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>70,125.00</u>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ <u>0.00</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>750.00</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>115,789.80</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>0.00</u>

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.

[Signature]
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by Elizabeth D. Rowell this the 12 day of January,

20 24, to certify which, witness my hand and seal of office.

Elizabeth D. Rowell Elizabeth D. Rowell Administrative Assistant
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

19 FILER NAME <i>CHINEN, DAVID A</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>70,125.00</i>
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>750.00</i>
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

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: 10
2 FILER NAME CRINER, DANA A		3 Filer ID (Ethics Commission Filers)
4 Date 7-27-2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAMS, LYNNE	7 Amount of contribution (\$) \$ 1000⁰⁰
6 Contributor address; City; State; Zip Code 1209 W. Cuthers Midland, TX 79701		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 8-11-2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COVLEN, STACE	Amount of contribution (\$) 2500⁰⁰
Contributor address; City; State; Zip Code 4013 CAROLINE L. Midland, TX 79701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 8-16-2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, CHARLIE	Amount of contribution (\$) 1000⁰⁰
Contributor address; City; State; Zip Code 5606 Canyon Midland, TX 79701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 8-17-2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENT, WILLIAM	Amount of contribution (\$) 15,000⁰⁰
Contributor address; City; State; Zip Code P.O. Box 708001 Midland, TX 79701		
Principal occupation / Job title (See Instructions)		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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <u>10</u>
2 FILER NAME <u>CRINER, DAVID A</u>		3 Filer ID (Ethics Commission Filers)
4 Date <u>8-20-2023</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>MORAN, JON</u>	7 Amount of contribution (\$) <u>\$ 2000⁰⁰</u>
6 Contributor address; City; State; Zip Code <u>1324 BOAT RANKS CR. FREDERICKSBURG, VA 22405</u>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <u>8-21-2023</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>WOLF, JOAN</u>	Amount of contribution (\$) <u>\$ 2000⁰⁰</u>
Contributor address; City; State; Zip Code <u>4909 RUSTIC TRAIL MARIETTA, GA 30067</u>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>8-22-2023</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>GRUJE, DAVI</u>	Amount of contribution (\$) <u>\$ 5000⁰⁰</u>
Contributor address; City; State; Zip Code <u>3009 GARSON LANE MARIETTA, GA 30067</u>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>8-25-2023</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>RISKAN, GAIL</u>	Amount of contribution (\$) <u>\$ 500⁰⁰</u>
Contributor address; City; State; Zip Code <u>217 BLACKBERRY CR. MARIETTA, GA 30067</u>		
Principal occupation / Job title (See Instructions)		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: 10
2 FILER NAME ORINEN, DAVID A		3 Filer ID (Ethics Commission Filers)
4 Date 9-1-2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ECHOLS, JUAN	7 Amount of contribution (\$) \$ 1000⁰⁰
6 Contributor address; City; State; Zip Code 6003 Meadowview Ln Midland, TX 79701		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 9-5-2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLeod - Greene, CAROL	Amount of contribution (\$) \$ 200⁰⁰
Contributor address; City; State; Zip Code 5002 GARDNER G Midland, TX 79701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 7-5-2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUSHMAN, EVA	Amount of contribution (\$) \$ 1000⁰⁰
Contributor address; City; State; Zip Code 2809 CHESTER PL Midland, TX 79701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9-10-2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, GARY	Amount of contribution (\$) \$ 50⁰⁰
Contributor address; City; State; Zip Code 2517 Quaker Pt Midland, TX 79701		
Principal occupation / Job title (See Instructions)		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: 10
2 FILER NAME CLINTON, DANN A		3 Filer ID (Ethics Commission Filers)
4 Date 9/10/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRY JOETTO	7 Amount of contribution (\$) 503
6 Contributor address; City; State; Zip Code 2517 DUAL B. MOUNT, J. TX		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 9/19/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALES, MARK	Amount of contribution (\$) 5000.00
Contributor address; City; State; Zip Code P.O. Box 2472 Midland, TX 79701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9-21-2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANCKOCK, GARY	Amount of contribution (\$) 1000
Contributor address; City; State; Zip Code 203 W. WALKER #1200 MIDLAND, TX 79701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9-21-2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARREN, STEPHEN	Amount of contribution (\$) 51000
Contributor address; City; State; Zip Code 22 LA CAMPANA DR ODENIA, TX 79755		
Principal occupation / Job title (See Instructions)		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: 10
2 FILER NAME CRINER, JAMES A		3 Filer ID (Ethics Commission Filers)
4 Date 9-25-2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANRONE, GEORGE	7 Amount of contribution (\$) \$1000⁰⁰
6 Contributor address; City; State; Zip Code 6700 PARSONS LN, MIDLAND, TX 79707		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 9-29-2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLSHAN, ADAM	Amount of contribution (\$) \$1000⁰⁰
Contributor address; City; State; Zip Code 908 Lady Leo Dr Midland, TX 79701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10-4-2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUNSA, JACK	Amount of contribution (\$) \$3000⁰⁰
Contributor address; City; State; Zip Code 13998 W. Highway 1701 Midland, TX 79705		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10-11-2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, WILSON	Amount of contribution (\$) \$5000⁰⁰
Contributor address; City; State; Zip Code P.O. Box 8558 Midland, TX 79708		
Principal occupation / Job title (See Instructions)		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: 10
2 FILER NAME CRINER, DAVID A		3 Filer ID (Ethics Commission Filers)
4 Date 10-12-2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANTON, TOM	7 Amount of contribution (\$) \$ 300⁰⁰
6 Contributor address; City; State; Zip Code 4000 Sinclair Midland, TX 79707		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10-19-2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNS, MARRV	Amount of contribution (\$) \$ 100⁰⁰
Contributor address; City; State; Zip Code 2003 WIDENUNG DR. Midland, TX 79707		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10-27-2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, JIM	Amount of contribution (\$) \$ 250⁰⁰
Contributor address; City; State; Zip Code 219 WINDRIDGE CR Midland, TX 79707		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11-1-2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEORGE, CHARLES	Amount of contribution (\$) \$ 100⁰⁰
Contributor address; City; State; Zip Code 2809 Stuz Midland, TX 79705		
Principal occupation / Job title (See Instructions)		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: 10
2 FILER NAME CRIMER, DAVID A		3 Filer ID (Ethics Commission Filers)
4 Date 12.6.2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADY, PATRICIA	7 Amount of contribution (\$) \$ 200⁰⁰
6 Contributor address; City; State; Zip Code 3500 BLUESHAW LN MIDLAND, TX 79709		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12.6.2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOMLIN, DON	Amount of contribution (\$) \$ 1000⁰⁰
Contributor address; City; State; Zip Code 24 DAKLAW PARK MIDLAND, TX 79705		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12.6.2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRAMER, APRIL	Amount of contribution (\$) \$ 300⁰⁰
Contributor address; City; State; Zip Code 6713 VALER LN MIDLAND, TX 79701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12.6.2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, NITA	Amount of contribution (\$) \$ 100⁰⁰
Contributor address; City; State; Zip Code 5101 COMANC MIDLAND, TX 79707		
Principal occupation / Job title (See Instructions)		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: 10
2 FILER NAME CRINGER, DAVID A		3 Filer ID (Ethics Commission Filers)
4 Date 12-6-2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUNJON, LAQUITA	7 Amount of contribution (\$) \$ 500⁰⁰
	6 Contributor address; City; State; Zip Code 4100 JANFORD MIDLAND, TX 79707	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12-1-2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELZER, JIMMY	Amount of contribution (\$) \$ 100⁰⁰
	Contributor address; City; State; Zip Code 4529 LORSAIR MIDLAND, TX 79701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12-6-2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLST, PATRICIA	Amount of contribution (\$) \$ 500⁰⁰
	Contributor address; City; State; Zip Code 5524 CYPRESS CT MIDLAND, TX 79701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12-6-2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYNUM, WILLIAM	Amount of contribution (\$) \$ 125⁰⁰
	Contributor address; City; State; Zip Code 1986 CROCKET RIDGE MIDLAND, TX 79701	
Principal occupation / Job title (See Instructions)		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: 10
2 FILER NAME CRIMER, DAVID A		3 Filer ID (Ethics Commission Filers)
4 Date 12-11-2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GABARDA, JUDY	7 Amount of contribution (\$) \$ 1000⁰⁰
6 Contributor address; City; State; Zip Code 6507 WCR 44 MIDLAND, TX 79709		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12-11-2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUZOWA, FILIBERT	Amount of contribution (\$) \$ 10000.00
Contributor address; City; State; Zip Code P.O. BOX 80400 MIDLAND, TX 79708		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12-12-2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, JEE	Amount of contribution (\$) \$ 500⁰⁰
Contributor address; City; State; Zip Code 1030 Ardora Hwy # 105 Midland, TX 79701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12-18-2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDS, REYBER	Amount of contribution (\$) \$ 500⁰⁰
Contributor address; City; State; Zip Code 4301 CORONADO CT MIDLAND, TX 79701		
Principal occupation / Job title (See Instructions)		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: 10
2 FILER NAME CRINER, DAVID A		3 Filer ID (Ethics Commission Filers)
4 Date 12-16-2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONALDSON, NIANNAH	7 Amount of contribution (\$) \$ 100.00
6 Contributor address; City; State; Zip Code P.O. Box 51990 MIDLAND, TX 79710		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12-20-2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STACCHINI, KYLIE	Amount of contribution (\$) \$ 5,000.00
Contributor address; City; State; Zip Code P.O. Box 10217 Midland, TX 79702		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12-21-2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWDEN, LINDA	Amount of contribution (\$) \$ 2,000.00
Contributor address; City; State; Zip Code 5 LAKE DRIVE Midland, TX 79704		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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.

1 Total pages Schedule F1:	2 FILER NAME <i>Crissy Davis A</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>11-11-2022</i>	5 Payee name <i>MIDLAND COUNTY REVENUE PARKS</i>	
6 Amount (\$) <i>\$ 750.00</i>	7 Payee address; <i>407 E. 11th, Midland, TX 79701</i>	City; State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>FEES</i>	(b) Description <i>MIDLAND FEE</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date	Payee name	City; State; Zip Code
Amount (\$)	Payee address;	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date	Payee name	City; State; Zip Code
Amount (\$)	Payee address;	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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