

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: <div style="text-align: right; font-size: 1.2em;">2 ✓</div>																
3 CANDIDATE / OFFICEHOLDER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; font-size: 0.8em;">MS / MRS / MR</td> <td style="width:35%; font-size: 0.8em;">FIRST</td> <td style="width:15%; font-size: 0.8em;">MI</td> <td style="width:35%;"></td> </tr> <tr> <td></td> <td style="text-align: center;">Mr. Eugene</td> <td></td> <td></td> </tr> <tr> <td style="font-size: 0.8em;">NICKNAME</td> <td style="text-align: center;">LAST</td> <td style="font-size: 0.8em;">SUFFIX</td> <td></td> </tr> <tr> <td></td> <td style="text-align: center;">Gene Serene</td> <td></td> <td></td> </tr> </table>	MS / MRS / MR	FIRST	MI			Mr. Eugene			NICKNAME	LAST	SUFFIX			Gene Serene			OFFICE USE ONLY Date Received <div style="font-size: 1.2em; text-align: center;">1/9/17 @ 10:20 AM</div> <div style="text-align: center;">KCC</div>	
MS / MRS / MR	FIRST	MI																	
	Mr. Eugene																		
NICKNAME	LAST	SUFFIX																	
	Gene Serene																		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <div style="background-color: black; height: 40px; width: 100%;"></div>																		
<input type="checkbox"/> Change of Address																			
5 CANDIDATE / OFFICEHOLDER PHONE	[REDACTED]																		
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NICKNAME	LAST	SUFFIX																	
	Cindy Serene																		
		Date Processed																	
		Date Imaged																	
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10 PERIOD COVERED	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: center; font-size: 0.8em;">Month</td> <td style="text-align: center; font-size: 0.8em;">Day</td> <td style="text-align: center; font-size: 0.8em;">Year</td> <td style="width: 20%;"></td> <td style="text-align: center; font-size: 0.8em;">Month</td> <td style="text-align: center; font-size: 0.8em;">Day</td> <td style="text-align: center; font-size: 0.8em;">Year</td> </tr> <tr> <td style="text-align: center;">7</td> <td style="text-align: center;">1</td> <td style="text-align: center;">16</td> <td style="text-align: center;">THROUGH</td> <td style="text-align: center;">12</td> <td style="text-align: center;">31</td> <td style="text-align: center;">16</td> </tr> </table>			Month	Day	Year		Month	Day	Year	7	1	16	THROUGH	12	31	16		
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12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)																	
	Constable Pct. 3 Kendall County	Constable Pct. 3 Kendall County																	

GO TO PAGE 2

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14 C/OH NAME Eugene Serene 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.

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

Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 0
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 445.49
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 700.00

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.

Eugene Serene

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Eugene Serene, this the 6th day of January, 20 17, to certify which, witness my hand and seal of office.

Debby S. Hudson
Signature of officer administering oath

Debby S. Hudson
Printed name of officer administering oath

Notary Public
Title of officer administering oath