

# 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>17</b>								
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR                      FIRST                      MI MR                                      Christopher                      J ----- NICKNAME                              LAST                              SUFFIX Goth	<b>OFFICE USE ONLY</b>									
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS <small>Change of Address</small>	ADDRESS / PO BOX;                      APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE 29961 Premiere Bulverde, TX 78163	Date Received  04-25-2024 @ 4:30pm 									
<b>5</b> CANDIDATE / OFFICEHOLDER PHONE	AREA CODE                      PHONE NUMBER                      EXTENSION ( 619 )                      518-3802	Date Hand-delivered or Date Postmarked <b>Emailed</b>									
<b>6</b> CAMPAIGN TREASURER NAME	MS / MRS / MR                      FIRST                      MI MR                                      Christopher                      J ----- NICKNAME                              LAST                              SUFFIX Goth	Receipt #                      Amount \$	Date Processed								
<b>7</b> CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE);                      APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE 29961 Premiere Bulverde, TX 78163										
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE                      PHONE NUMBER                      EXTENSION ( 619 )                      518-3802										
<b>9</b> REPORT TYPE	<table style="width:100%; border: none;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input 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 checked="" type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded Modified Reporting Limit</td> <td><input checked="" type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table>			<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 type="checkbox"/> July 15	<input checked="" type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded Modified Reporting Limit	<input checked="" type="checkbox"/> Final Report (Attach C/OH - FR)
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<input type="checkbox"/> July 15	<input checked="" type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded Modified Reporting Limit	<input checked="" type="checkbox"/> Final Report (Attach C/OH - FR)								
<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;">3      /      26      /      24</td> <td></td> <td style="text-align: center;">4      /      26      /      24</td> </tr> </table>			Month      Day      Year	THROUGH	Month      Day      Year	3      /      26      /      24		4      /      26      /      24		
Month      Day      Year	THROUGH	Month      Day      Year									
3      /      26      /      24		4      /      26      /      24									
<b>11</b> ELECTION	ELECTION DATE Month      Day      Year 5      /      4      /      24	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special									
<b>12</b> OFFICE	OFFICE HELD (if any)	<b>13</b> OFFICE SOUGHT (if known) <b>Bulverde City Council Place 6</b>									
<b>14</b> NOTICE FROM POLITICAL COMMITTEE(S)  <small>Additional Pages</small>	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  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE NAME ----- COMMITTEE ADDRESS ----- 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> Christopher Goth		<b>16 Filer ID</b> (Ethics Commission Filers)
<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 1,415.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,415.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 2,296.10
	4. TOTAL POLITICAL EXPENDITURES	\$ 2,296.10
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**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.

\_\_\_\_\_  
Signature of Candidate or Officeholder

**Please complete either option below:**

**(1) Affidavit**

NOTARY STAMP/ SEAL

Sworn to and subscribed before me by \_\_\_\_\_ this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

**OR**

**(2) Unsworn Declaration**

My name is Christopher Goth, and my date of birth is 02/28/85.

My address is 29961 Premeire, Bulverde, TX, 78163, USA.  
(street) (city) (state) (zip code) (country)

Executed in Comal County, State of TX, on the 25 day of April, 2024.  
(month) (year)

Christopher J Goth  
Digitally signed by Christopher J Goth  
Signature of Candidate/Officeholder (Declarant)      Date: 2024.04.25 16:26:09 -05'00'

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

<b>19</b> FILER NAME <b>Christopher Goth</b>		<b>20</b> Filer ID (Ethics Commission Filers)
<b>21</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. ■ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 1,415.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. ■ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 2,296.10
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$
12. 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:

1

2 FILER NAME

Christopher Goth

3 Filer ID (Ethics Commission Filers)

4 Date

04/25/2024

5 Full name of contributor

Gofundme contributors

out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

1,415.00

6 Contributor address;

City;

State;

Zip Code

8 Principal occupation / Job title (See Instructions)

varied

9 Employer (See Instructions)

varied

Date

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address;

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address;

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address;

City;

State;

Zip Code

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.**

# 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: <b>2</b>	<b>2</b> FILER NAME <b>Christopher Goth</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>03/12/2024</b>	<b>5</b> Payee name <b>Barbera Productions, LLC</b>	
<b>6</b> Amount (\$) <b>525.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>20079 Stone Oak Parkway STE 1105-195 San Antonio, TX 78258</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>Advertising</b>	<b>(b)</b> Description <b>quarter page ad</b>
	<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		
Date <b>04/11/2024</b>	Candidate / Officeholder name <b>Officemax</b>	
Amount (\$) <b>162.38</b>	Office sought <b>17700 US HWY 281 N STE 800 San Antonio, TX 78232</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Advertising</b>	Description <b>flyers</b>
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right;">Check if Austin, TX, officeholder living expense</span>	
Candidate / Officeholder name <b>Officemax</b>		
Office sought <b>17700 US HWY 281 N STE 800 San Antonio, TX 78232</b>		
Office held		
Date <b>04/08/2024</b>	Candidate / Officeholder name <b>Signs on the cheap</b>	
Amount (\$) <b>280.50</b>	Office sought <b>11525 Stonehollow Dr B220 Austin TX, 78758</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Advertising</b>	Description <b>large signs</b>
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right;">Check if Austin, TX, officeholder living expense</span>	
Candidate / Officeholder name <b>Signs on the cheap</b>		
Office sought <b>11525 Stonehollow Dr B220 Austin TX, 78758</b>		
Office held		

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# 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: <b>2</b>	<b>2</b> FILER NAME <b>Christopher Goth</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>04/11/2024</b>	<b>5</b> Payee name <b>makeplayingcards.com</b>	
<b>6</b> Amount (\$) <b>29.22</b>	<b>7</b> Payee address; City; State; Zip Code <b>21/F, Kings Wing Plaza 2, 1 On Kwan Street, Shatin, Shek Mun, New Territories, Hong Kong</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>Advertising</b>	<b>(b)</b> Description <b>custom playing cards with campaign flyer graphics</b>
	<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		
Date <b>04/17/2024</b>	Payee name <b>Ray's Sign Shop</b>	
Amount (\$) <b>1,299.00</b>	Payee address; City; State; Zip Code <b>4001 South Presa San Antonio, TX 78233</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Advertising</b>	Description <b>signs</b>
	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		
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description
	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		
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description
	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 <span style="float:right;">Office sought</span> <span style="float:right;">Office held</span>		

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

The Instruction Guide explains how to complete this form.

•• Complete only if "Report Type" on page 1 is marked "Final Report" ••

1 C/OH NAME

Christopher Goth

2 Filer ID (Ethics Commission Filers)

3 SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

Christopher J Goth

Digitally signed by Christopher J  
Goth  
Date: 2024.04.25 16:26:38 -05'00'

Signature of Candidate / Officeholder

4 FILER WHO IS NOT AN OFFICEHOLDER

•• Complete A & B below *only* if you are not an officeholder. ••

A. CAMPAIGN FUNDS

Check only one:



I do not have unexpended contributions or unexpended interest or income earned from political contributions.



I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

B. ASSETS

Check only one:



I do not retain assets purchased with political contributions or interest or other income from political contributions.



I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

Christopher J Goth

Digitally signed by Christopher J  
Goth  
Date: 2024.04.25 16:26:55 -05'00'

Signature of Candidate

5 OFFICEHOLDER

•• Complete this section *only* if you are an officeholder ••

I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

Signature of Officeholder



Search For individuals ▾ For charities



Your fundraisers Christopher ▾

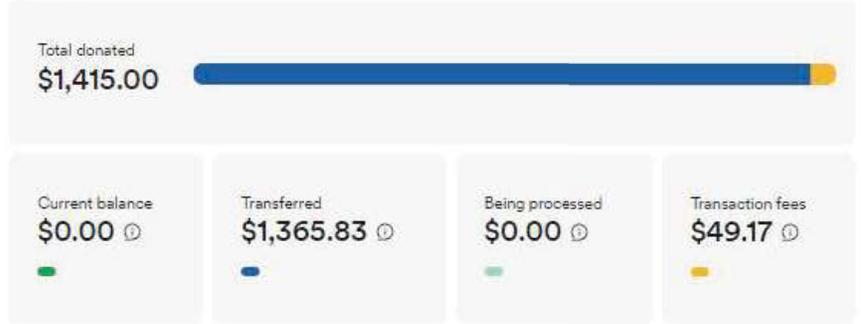
- Dashboard
- Donations
- Transfers**
- Updates

### Activity

Apr 17	Deposited	Transfer to	<b>\$48.25</b>
Apr 16	Deposited	Transfer to	<b>\$96.80</b>
Apr 15	Deposited	Transfer to	<b>\$265.82</b>

[View all](#)

### Breakdown



**Need help?**  
Visit our [help center](#) for more information.

Download our free app

RAY'S SIGN SHOP  
4001 S PRESA ST  
SAN ANTONIO, TX 78223  
210-533-9980

**SALE**

MID: 6790955 REF#: 00000002  
TID: 002 DID: 0001  
Batch #: 162001 RRN: 00000002  
04/11/24 13.32.03  
AVS: Z CVD: M  
APPR CODE: 067980  
VISA Manual CNP  
\*\*\*\*\*5251

**AMOUNT \$660.00**

APPROVED

**INVOICE  
4978**

**RAY'S  
SIGN SHOP**

4001 SOUTH PRESA  
SAN ANTONIO, TX 78223  
(210) 533-9980

Name: C. Guth

Address: \_\_\_\_\_

Telephone: ( ) \_\_\_\_\_

Sign Size: \_\_\_\_\_ Sign Material: \_\_\_\_\_ Sign Color: \_\_\_\_\_  
Letter Color: \_\_\_\_\_ Type Style: \_\_\_\_\_ UC U/L LC

Number of Signs: \_\_\_\_\_ 1 Side \_\_\_\_\_ 2 Sides

Copy/Layout: \_\_\_\_\_

300 18x24 1 side yellow coro  
300 WIRE STAND FRAMES  
Political Signs

RAY'S SIGN SHOP  
4001 S PRESA ST  
SAN ANTONIO, TX 78223  
210-533-9980

**SALE**

MID: 6790955 REF#: 00000003  
TID: 002 DID: 0001  
Batch #: 108001 RRN: 00000003  
04/17/24 13.22.22  
AVS: Z CVD: M  
APPR CODE: 074150  
VISA Manual CNP  
\*\*\*\*\*5251

**AMOUNT \$650.00**

APPROVED

Price: \$1200<sup>00</sup>  
Other: \_\_\_\_\_

Subtotal: \_\_\_\_\_

Sales tax: 99.00

Total: 1,299.00

Less deposit: 650.00

Balance: \$650<sup>00</sup>



Date: 4/17/24

Approved: \_\_\_\_\_

Terms: Balance due upon completion.

Thank You  
Please Come Again

CUSTOMER COPY

# Order Confirmation #360734165-001

From: officedepotorders@officedepot.com

To: christopher.goth@yahoo.com

Date: Monday, April 8, 2024 at 09:08 PM CDT

## In-Store Pickup for: CHRISTOPHER GOTH

OfficeMax Store # 6464  
17700 US HWY 281 N STE800 SAN ANTONIO, TX 78232



# Thanks, CHRISTOPHER GOTH. We're on it.

We've received your order. We're working to get it ready for pick up at the Office Depot Store you've selected.

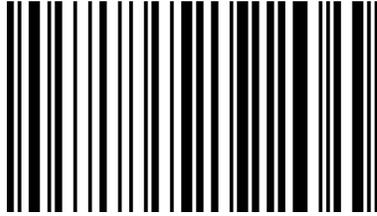
### In This Pickup Order:

	<p><b>Copies</b> Quantity Ordered: 250 Item # 870284</p>	<p><b>\$0.60</b></p>
--	--	----------------------

## Order Summary

**Order Number**  
[360734165-001](#)  
**Order Date**  
04/08/2024

**Delivery Method**  
In-Store Pickup  
**Status**  
In Process



360734165001

### Payment Summary

<b>Subtotal</b>	\$187.50
<b>Tax</b>	\$12.38
<b>Delivery Fee</b>	\$0.00
<b>Misc.</b>	(37.50)
<b>Total</b>	<b>\$162.38</b>

Visa, last 4 digits: 5251

### Questions? We're here to help.

Visit our [Help Center](#)  
 Start a [self-service return](#)  
[Chat](#) or [Text](#) with us

 Sign up for **emails** & get  
**25% off** one qualifying regular priced item.  
 Exclusions apply. Online only. [Sign Up](#)

### Download our App for Exclusive Offers



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Office Depot has paid the CA Electronic Waste Recycling fee on your behalf for all online and telephone purchases made in or to CA.

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Thank you for ordering from SignsOnTheCheap! Your Order Number is 90823638!

From: Signs On The Cheap (service@signsonthecheap.com)

To: christopher.goth@yahoo.com

Date: Monday, April 8, 2024 at 09:36 PM CDT

To view this email as a web page, go [here](#).

# SIGNS ON THE CHEAP

Need help? Call us at 1-866-661-9239

**Thank you for ordering from SignsOnTheCheap  
Your Order Number is 90823638**

[Track My Order](#)

Make sure to print out this page or write down your order number for your records.  
Here is a summary of the order you placed on **4/8/2024**:

### Billing & Shipping Information

**Bill To:**

Christopher J  
29961 Premiere  
Bulverde, TX, 78163  
United States

**Ship To:**

Christopher J  
29961 Premiere  
Bulverde, TX, 78163  
United States

**Contact Info:**

[christopher.goth@yahoo.com](mailto:christopher.goth@yahoo.com)  
6195183802

**Shipping Method:**

Ground

**Your order should arrive by:**  
4/16/2024

### Order Item Information

Item Description	Material	Size	Unit Price	Qty	Total
------------------	----------	------	------------	-----	-------



**Sides:**

\$5.44      10      \$54.40

26" Beefy  
Stakes (2 each)



Corrugated Plastic	24" x 36"	\$41.10	10	\$411.00
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Custom Sign  
(ID: 891522881)

**Sides:** Double Sided

**Please Note:** Your stakes, frames, or accessories may ship sooner than your custom printed signs. Even if part of your order arrives early, rest assured that your signs will arrive by the delivery date listed above.

### Payment Information

**This email is your receipt, so please print out a copy for your records.** We'll email you a shipping notification as soon as your order is carefully packaged and on its way. If necessary, we'll send you additional shipping updates about your order.

### Summary of Charges:

<b>Subtotal:</b>	\$465.40
<b>Promotion:</b>	(\$258.10)
<b>Shipping:</b>	\$51.82
<b>Tax:</b>	\$21.38
<hr/>	
<b>Total:</b>	\$280.50

Questions or concerns? Contact us at: [service@signsonthecheap.com](mailto:service@signsonthecheap.com) or 1-866-661-9239  
This email was sent by: **Signs On The Cheap**  
11525 Stonehollow Dr B220 Austin, TX, 78758, US

## Your order: 160312246311 received

From: MakePlayingCards.com (webinfo@makeplayingcards.com)

To: christopher.goth@yahoo.com

Date: Monday, March 11, 2024 at 11:04 PM CDT

Replies to this email are not monitored. If you require assistance [click here](#) to contact customer service.
[Print invoice](#) | [Order History](#) | [Site](#)
**Hello Christopher Goth,**

Thank you for your order at MakePlayingCards.com placed on 2024/03/11 20:48:43 (PST).

Your order number 160312246311 has been successfully entered into our production system and will complete in 1-2 business days. Keep track of it and print your invoice at

[https://www.makeplayingcards.com/account/acc\\_order\\_details.aspx?orderNo=5E664BAD742C7F5B539ED7F8137BDEE6](https://www.makeplayingcards.com/account/acc_order_details.aspx?orderNo=5E664BAD742C7F5B539ED7F8137BDEE6).

Once your order is on its way to you, we'll send another email.

**Your order details****Billing Address:**

Christopher Goth 29961 Premiere  
Bulverde Texas 78163 United States  
6195183802  
christopher.goth@yahoo.com

**Shipping Address:**

Christopher Goth 29961 Premiere  
Bulverde Texas 78163 United States  
6195183802  
christopher.goth@yahoo.com

No.	Item#	Product Name	Unit Price	Qty	Total Price
1	 PC12AC26-07A Preview	<b>Window tuck box for 54 poker playing cards</b> Card accessories  Project Name: [Project-vGsEajdr5k] Last modified 2024/03/11 20:46:17 (PST)	\$0.60	1	\$0.60
2	 PC1401E26-05 Preview	<b>Custom Back Standard MPC Playing Cards</b> Playing Cards 2.48" x 3.46" (63x88mm) (54 cards) Card stock: (M31) Linen Card finishing: BETA playing card finish Packaging: Shrink-wrapped  Project Name: [Project-KYZYoSpI9a] Last modified 2024/03/11 20:45:28 (PST)	\$17.40	1	\$17.40

<b>Product(s) Total:</b>	\$18.00
<b>Shipping Charges:</b>	\$8.99
<b>US sales tax:</b>	\$2.23
<b>Order Total:</b>	<b>\$29.22</b>

**Payment by:** Credit Card

**Transport mode:** Standard - with tracking 8-12 business days

**When will my parcel arrive?**

Estimated to arrive between: Fri 3/22/2024 - Thu 3/28/2024

(You may expect a longer delivery time of additional 3-5 days on top of the normal transit time for remote areas.)

We appreciate your business and look forward to serving you again in the near future.

Yours

<https://www.makeplayingcards.com>

**Stay connected with us**

