CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

		w to complete this form.	Filer ID (Ethics Commission Filers) N/A	2 Total pages filed:		
3 CANDIDATE / OFFICEHOLDER	Ms/MRs/MR Mr.	_{FIRST} Jason	мі R.	OFFICE USE ONLY		
NAME	NICKNAME	LAST	SUFFIX	Date Received		
19		Moran				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX		CITY; STATE; ZIP CODE	6 2024 SOWA 6 2024 6 DIST. CLERK		
Change of Address	P.O. Box 345 Robert Lee, Texas 76945					
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand-delivered of Bate Postmerked		
6 CAMPAIGN	MS / MRS / MR	FIRST	MI	Receip Amount 1		
TREASURER	Mrs.	Eugenia	D.	Date Processed		
NAME	NICKNAME	LAST	SUFFIX	Date Processed		
	Total Control of Control	070074	241110	Date Imaged		
- 0111011011	Gina	Moran (NO PO BOX PLEASE): APT / SI	ATTA			
7 CAMPAIGN TREASURER ADDRESS			UITE #; CITY;	STATE; ZIP CODE		
(Residence or Business)	P.O. Box 345	<u> </u>	Robert Lee, T	exas 76945		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION			
9 REPORT TYPE	January 15	30th day before el	election Runoff	15th day after campaign treasurer appointment (Officeholder Only)		
	July 15	8th day before ele	ection Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)		
10 PERIOD	Month	Day Year	Month	Day Year		
COVERED	11 ,	/02 / 2023	THROUGH 12 /	/ 31 / 2023		
11 ELECTION	ELECTION DA		ELECTION TYPE			
	Month Day	Year Primary	Runoff Other Description			
	02 /05	2024 General	Special			
	03		T.a.			
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (If known)	,		
			County Commission			
14 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				
Additional Pages	GENERAL	COMMITTEE ADDRESS				
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TRE	ASURER ADDRESS			
GO TO PAGE 2						

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME		16 Filer ID (Ethics Commission Filers)			
The second of the second	n R. Moran	N/A			
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAI PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	-			
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	•			
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0			
	4. TOTAL POLITICAL EXPENDITURES	\$ ₀			
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LA OF REPORTING PERIOD	ST DAY \$			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS O LAST DAY OF THE REPORTING PERIOD	of the \$			
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.					
	1 de Ca				
	Signature of Ca	andidate or Officeholder			
	Diseas samplete either entire below				
	Please complete either option belov	v:			
(1) Affidavit					
(1) Anidaris					
NOTADY STAND/SEAL					
NOTARY STAMP/SEAL Sworn to and subscribed before me by					
Sworn to and subscribed before me by					
20 Z te 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 THE RESIDENCE OF THE PROPERTY OF THE PROPER					
(2) Unsworn Declaration					
My name is, and my date of birth is					
	, and my date of birth is	•			
, ==================================		state) (zip code) (country)			
Executed in	County, State of , on the day of (month	, , , , , , , , , , , , , , , , , , , ,			
\$200 Bishoon and the same and t	(month	n) (year)			
	Signature of Candid	date/Officeholder (Declarant)			