CANDIDA CAMPAIGI	FORM C/OH COVER SHEET PG 1				
The C/OH Instruction Guide explains how to complete this form.				s) 2 Total pages filed:	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr. NICKNAME	FIRST Jeffrey LAST	MI S. SUFFIX	HOLLY JHR MASE COUNTY, TEXAS	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX		e CITY: STATE: ZIP CODE per, Texas 7595	By Marconth DEPUTY	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (409) 50	PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr. NICKNAME	FIRST Charles LAST Shofner	MI SUFFIX Jr.	Receipt # Amount \$     Date Processed     Date Imaged	
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS	NO PO BOX PLEASE); APT / SU	JITE #; CITY;	STATE; ZIP CODE	
(Residence or Business) 8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Texas 75951	
9 REPORT TYPE	January 15	30th day before e		15th day after campaign treasurer appointment (Officeholder Only)	
10 PERIOD COVERED	July 15 Month	Day Year	Reporting Limit Mont	h Day Year	
11 ELECTION	ELECTION DA Month Day	Year Year 2024 General	ELECTION TY CRUNOff Other Description Special		
12 OFFICE	OFFICE HELD (if any) County Commissioner Pct   County Commissioner Pct   County Commissioner Pct				
14 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWL CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPEN COMMITTEE TYPE COMMITTEE NAME				
Additional Pages	GENERAL	COMMITTEE ADDRESS	ASURER NAME		
		COMMITTEE CAMPAIGN TRE	ASURER ADDRESS		
	l	GO TO	PAGE 2		

Forms provided by Texas Ethics Commission

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Revised 11/15/2022

## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 2

CAMPAIG	N FINANCE REPORT	· · · · · ·
15 C/OH NAME	·	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)	N \$ D
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	, \$ <del>0</del>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ Ø
	4. TOTAL POLITICAL EXPENDITURES	\$ Ø
CONTRIBUTION BALANCE	5. 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	SF THE \$
	wear, or affirm, under penalty of perjury, that the accompanying report is tru quired to be reported by me under Title 15, Election Code.	ie and correct and includes all information
ورومه مردد مرور الم		the-
AL COURY	Signature of C	andidate or Officeholder
(1) Affidavit COUNT	Please complete either option below	<b>N:</b>
NOTARY STAMP/SEA	Le le ffreu Setta Martindales no	16 TEMMORY

Sworn to and sul scribed before me by <u>Jeji</u> which, witness my hand and seal of offic 20 administering oath Title of officer Signature of officer dminister fing oath Printed name of officer adminis oath OR (2) Unsworn Declaration and my date of birth is \_ My name is \_ My address is (zip code) (country) (state) (street) (city) \_\_day of 20 County, State of , on the Executed in \_ (month) (year) Signature of Candidate/Officeholder (Declarant)