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 Co	ommission Filers)	2 Total pages filed: 3
3 CANDIDATE!/ OFFICEHOLDER NAME	MS / MRS / MR	FIRST STEVE		мı [.] D	OFFICE USE ONLY
	NICKNAME DAVID	HUNTER		SUFFIX	at 12:59 o'clock P
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; PO BOX 180	CLEVELAND TI	CITY; STATE; EXAS 77328	ZIP CODE	OCT 28 2024 LEE H. CHAMBERS COUNTY CLERK, IJBERTY COUNTY, TEXA BY ALLONDEPUT
.5 CANDIDATE/ OFFICEHOLDER PHONE:	AREA CODE	PHONE NUMBER	EXTENSI	ON	Date Hand-delivered or Date Postmarked Receipt.# Amount \$
6 CAMPAIGN TREASURER NAME	MRS / MRS / MR MRS	FIRST MELANIE LAST		MI	Date Processed
		HUNTER	T .		Date Imaged
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT	SÚITE #; CITY;		STATE, ZIP CODE
(Residence or Business)				.*	
8 CAMPAIGN TREASURER PHONE			10	N	
9 REPORT TYPE	January 15	30th day before	e election . Run	off	15th day after campaign treasurer appointment (Officeholder Only)
	July 15	8th day before	Ciccion I	eeded Modified' orting Limit	Final Report (Attach C/OH - FR)
10 PERIOD	Month	Day Year		Month	Day Year
COVERED	10	/ 5 / 24	THROUGH	10	/ 29 / 24
11 ELECTION	ELECTION DA Month Day	TE Year Primar		ELECTION TYPE Other	
	11 / 5 /		al Special	Description	:
12 OFFICE	OFFICE HELD (If any).	NTY CONSTABLE F	P .	OUGHT (If known	Y CONSTABLE PCT 5
14 NOTICE FROM POLITICAL	THE CANDIDATE / OFFIC	EHOLDER, <i>THESE EXPENDITUI</i>	RES MAY HAVE BEEN MADE V	VITHOUT THE CANE	IADE BY POLITICAL COMMITTEES TO SUPPORT DIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR HEY RECEIVE NOTICE OF SUCH EXPENDITURES.
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME			
Additional Pages	GENERAL	COMMITTEE ADDRESS			· · · · · · · · · · · · · · · · · · ·
	SPECIFIC.	COMMITTEE CAMPAIGN T	REASURER NAME	•,•	·
		COMMITTEE CAMPAIGN T	REASURER: ADDRESS		
	<u> </u>			 	
	•••	GO TO	PAGE 2		

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

	FILER NAME EVE DAVID HUNTER	mmission Filers)
	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$.
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	\$ 0.00
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	\$.

CANDIDATE / OFFICEHOLDER FORM C/OH **CAMPAIGN FINANCE REPORT** COVER SHEET PG 2 15 C/OH NAME 16 Filer ID (Ethics Commission Filers) STEVE DAVID HUNTER 17 CONTRIBUTION TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN TOTALS 0.00 PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR : CONTRIBUTIONS MADE ELECTRONICALLY) 2. TOTAL POLITICAL CONTRIBUTIONS \$ 0.00: (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **EXPENDITURE** 3 TOTAL UNITEMIZED POLITICAL EXPENDITURE. **TOTALS** \$ 0.004. **TOTAL POLITICAL EXPENDITURES** 0.00 CONTRIBUTION TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$ 0.00° **BALANCE** OF REPORTING PERIOD OUTSTANDING TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE 6. 0.00· LOAN TOTALS LAST DAY OF THE REPORTING PERIOD \$ 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 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 (2) Unsworn Declaration My name is My address i (street) (state). (country) County, State of Signature of Candidate/Officeholder (Declarant)