

**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

**COPY**

**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: **3**

CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: Ms. FIRST: Leashondria MI: Y  
NICKNAME: LAST: Harden SUFFIX:

**OFFICE USE ONLY**

Date Received

**RECEIVED**

JAN 15 2026

HARRISON COUNTY ELECTIONS OFFICE

CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX: PO Box 509 APT / SUITE #: Marshall, Tx 75071 CITY: STATE: ZIP CODE

CANDIDATE / OFFICEHOLDER PHONE

AREA CODE: (903) PHONE NUMBER: 578-0250 EXTENSION:

Date Hand-delivered or Date Postmarked

Receipt # Amount \$

CAMPAIGN TREASURER NAME

MS / MRS / MR: Ms. FIRST: Nsika MI:  
NICKNAME: LAST: Harden SUFFIX:

Date Processed

Date Imaged

CAMPAIGN TREASURER ADDRESS

STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: Marshall, Tx 75070 CITY: STATE: ZIP CODE

CAMPAIGN TREASURER PHONE

AREA CODE: (903) PHONE NUMBER: 471-2308 EXTENSION:

REPORT TYPE

January 15  30th day before election  Runoff  15th day after campaign treasurer appointment (Officeholder Only)  
 July 15  8th day before election  Exceeded Modified Reporting Limit  Final Report (Attach C/OH - FR)

PERIOD COVERED

Month Day Year: 12 / 3 / 2025 THROUGH Month Day Year: 12 / 31 / 2025

ELECTION

ELECTION DATE: Month Day Year: 3 / 3 / 2024  
ELECTION TYPE:  Primary  Runoff  Other Description  
 General  Special

OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known): Harrison County Clerk

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.

Additional Pages

COMMITTEE TYPE:  GENERAL  SPECIFIC  
COMMITTEE NAME:  
COMMITTEE ADDRESS:  
COMMITTEE CAMPAIGN TREASURER NAME:  
COMMITTEE CAMPAIGN TREASURER ADDRESS:

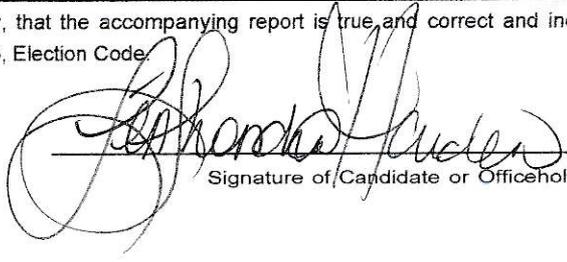
# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

C/OH NAME LeaShondra Harden 16 Filer ID (Ethics Commission Filers)

CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 0
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 0
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

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:**

**Affidavit**

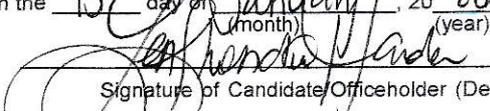
NOTARY STAMP / SEAL

Sworn to and subscribed before me by \_\_\_\_\_ this the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, 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

**Unsworn Declaration**

name is LeaShondra Harden, and my date of birth is April 12, 1983  
 address is \_\_\_\_\_ Marshall TX 75270 USA  
(street) (city) (state) (zip code) (country)  
 executed in Harrison County, State of Texas, on the 15<sup>th</sup> day of January, 20 26  
(month) (year)  
  
 Signature of Candidate/Officeholder (Declarant)



# AFFIDAVIT FOR CANDIDATE OR OFFICEHOLDER: ELECTRONIC FILING EXEMPTION

An exemption affidavit must be submitted with each paper report.

Beginning on January 1, 2026, a candidate or officeholder who has accepted more than \$34,890 in political contributions or made more than \$34,890 in political expenditures in any calendar year must file all subsequent reports electronically.

OFFICE USE ONLY	
Date Received	
Date Hand-delivered or Date Postmarked	
Receipt #	Amount \$
Date Processed	
Date Imaged	

Filer name <u>Lea Shondria Harden</u>	Filer ID #
--	------------

- I swear or affirm that I have not accepted more than \$34,890 in political contributions or made more than \$34,890 in political expenditures in a calendar year.
- I further swear or affirm that I do not use computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- I further swear or affirm that no person acting as my agent or consultant, and no person with whom I contract, uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- I further swear or affirm that I understand that I am required to file my campaign finance reports electronically if I, my agent or consultant, or a person with whom I contract exceeds \$34,890 in political contributions or political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- I am filing this affidavit with the Semi-Annual report due on Jan. 15, 2026. I understand that this affidavit is required to be filed with each campaign finance report for which I am claiming an exemption from electronic filing.

### Please complete either option below:

#### (1) Affidavit

\_\_\_\_\_  
Signature of Filer

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 Lea Shondria Harden and my date of birth is April 12, 1983

My address is \_\_\_\_\_ (street), Marshall (city), Tx (state), 75670 (zip code), \_\_\_\_\_ (country)

Executed in Harrison County, State of Texas, on the 15<sup>th</sup> day of January, 20 26.

(month) (year)

Lea Shondria Harden  
Signature of Filer (Declarant)

**FILERS WHO ARE EXEMPT FROM THE ELECTRONIC FILING REQUIREMENT  
ARE STILL REQUIRED TO FILE CAMPAIGN FINANCE REPORTS ON PAPER**