

# 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 Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI
	NICKNAME	LAST	SUFFIX
MRS		SHERRY	L
MRS		RUSHING	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  Change of Address	ADDRESS / PO BOX;	APT / SUITE #;	CITY; STATE; ZIP CODE
	MARSHALL TX 75672		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	( 903 )	926-6413	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
	NICKNAME	LAST	SUFFIX
MRS		SHERRY	L
MRS		RUSHING	
7 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY; STATE; ZIP CODE
	MARSHALL TX 75672		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	( 903 )	926-6413	
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
	RECEIVED JAN 02 2024 HARRISON COUNTY ELECTIONS OFFICE 15th day after campaign treasurer appointment (Officeholder Only)		
10 PERIOD COVERED	Month	Day	Year
7 / 1 / 23	THROUGH	12 / 31 / 23	
11 ELECTION	ELECTION DATE		ELECTION TYPE
	Month	Day	Year
		Primary	Runoff
		General	Special
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	
	COUNTY TREASURER		
14 NOTICE FROM POLITICAL COMMITTEE(S)  Additional Pages	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	
	GENERAL	COMMITTEE ADDRESS	
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	

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# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

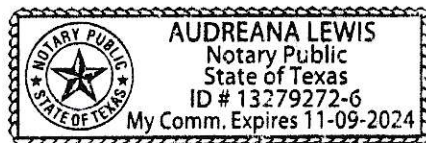
15 C/OH NAME SHERRY RUSHING		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 10.00
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.

*Sherry Rushing*  
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



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JAN 02 2024

HARRISON COUNTY  
ELECTIONS OFFICE

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Sherry Rushing this the 2 day of January, 2024, to certify which, witness my hand and seal of office.

*Audreana Lewis*  
Signature of officer administering oath

Audreana Lewis  
Printed name of officer administering oath

First Assistant County Auditor  
Title of officer administering oath

OR

(2) Unsworn Declaration

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.  
(street) (city) (state) (zip code) (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
(month) (year)

Signature of Candidate/Officeholder (Declarant)

# APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA  
PG 1

See CTA Instruction Guide for detailed instructions.

1 Total pages filed:

2 CANDIDATE NAME	MS / MRS / MR	FIRST	MI			
	MRS	SHERRY	L.			
		NICKNAME	LAST	SUFFIX		
		RUSHING				
3 CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX:	APT / SUITE #:	CITY:	STATE:	ZIP CODE	
				MARSHALL	TX	75672
4 CANDIDATE PHONE	AREA CODE	PHONE NUMBER	EXTENSION			
	( 903 )	926-6413				
5 OFFICE HELD (if any)	COUNTY TREASURER					
6 OFFICE SOUGHT (if known)						
7 CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST	MI	NICKNAME	LAST	SUFFIX
	MRS.	SHERRY	L.		RUSHING	
8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS:	APT / SUITE #:	CITY:	STATE:	ZIP CODE	
				MARSHALL	TX	75672
9 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION			
	( 903 )	926-6413				
10 CANDIDATE SIGNATURE	<p>I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code.</p> <p>I am aware of my responsibility to file timely reports as required by title 15 of the Election Code.</p> <p>I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.</p> <p><u>Sherry Rushing</u> Signature of Candidate</p> <p><u>12/30/23</u> Date Signed</p>					

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

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HARRISON COUNTY ELECTIONS OFFICE

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**CANDIDATE MODIFIED  
REPORTING DECLARATION**

**FORM CTA  
PG 2**

11 CANDIDATE  
NAME

12 MODIFIED  
REPORTING  
DECLARATION

**COMPLETE THIS SECTION ONLY IF YOU ARE  
CHOOSING MODIFIED REPORTING**

**•• This declaration must be filed no later than the 30th day before  
the first election to which the declaration applies. ••**

**•• The modified reporting option is valid for one election cycle only. ••**  
(An election cycle includes a primary election, a general election, and any related runoffs.)

**•• Candidates for the office of state chair of a political party  
may NOT choose modified reporting. ••**

I do not intend to accept more than \$1,010 in political contributions  
or make more than \$1,010 in political expenditures (excluding filing  
fees) in connection with any future election within the election  
cycle. I understand that if either one of those limits is exceeded, I  
will be required to file pre-election reports and, if necessary, a  
runoff report.

\_\_\_\_\_  
Year of election(s) or election cycle to  
which declaration applies

\_\_\_\_\_  
Signature of Candidate

**This appointment is effective on the date it is filed with the appropriate filing authority.**

TEC Filers may send this form to the TEC electronically at [treasappoint@ethics.state.tx.us](mailto:treasappoint@ethics.state.tx.us)

or mail to  
Texas Ethics Commission  
P.O. Box 12070  
Austin, TX 78711-2070

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**JAN 02 2024**

Non-TEC Filers must file this form with the local filing authority  
**DO NOT SEND TO TEC**

**HARRISON COUNTY  
ELECTIONS OFFICE**

For more information about where to file go to:  
<https://www.ethics.state.tx.us/filinginfo/QuickFileAReport.php>