CANDIDA	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	MS / MRS/ MR	FIRST	MI	OFFICE USE ONLY	
NAME	NICKNAME	LAST	SUFFIX	Date Received	
		Per	ry	RECEIVED	
4 CANDIDATE / OFFICEHOLDER MAILING	ADDRESS / PO BOX		CITY; V STATE; ZIP CODE	a: al 08 2025 -2	
ADDRESS	REL	DACT		O'CLOCK Sebien w	
Change of Address	AREA CODE	PHONE NUMBER	EXTENSION	THE PERSON NAMED OF THE PE	
OFFICEHOLDER PHONE	REDA	CTED	EATENSION	EDECTIONS VECKIR SOCIETINARIA LE	
6 CAMPAIGN TREASURER	MS / MRS) MR	FIRST	MI	Receipt # Amount \$	
NAME	NICKNAME	endrea	SUFFIX	Date Processed Date Imaged	
		Paru		Date inaged	
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS	(NO PO BOX PLEASE); APT /	JITE #; CITY;	STATE; ZIP CODE	
(Residence or Business)					
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
9 REPORT TYPE	January 15	30th day before e		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month	Day Year / 16 / 2024	THROUGH 7	Day Year S AD25	
11 ELECTION	Month Day	Year Primary General	Runoff Other Description Special		
12 OFFICE	OFFICE HELD (If any) 13 OFFICE SOUGHT (if known)				
14 NOTICE FROM POLITICAL	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(S)	COMMITTEE TYPE	COMMITTEE NAME			
Additional Pages	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC	COMMITTEE CAMPAIGN TRE	ASURER NAME		
		COMMITTEE CAMPAIGN TR	EASURER ADDRESS		
		GO ТО	PAGE 2		

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME			16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS		DLITICAL CONTRIBUTIONS (OTHER THAN GUARANTEES OF LOANS, OR E ELECTRONICALLY)	\$ 270.00
	2. TOTAL POLITICAL CO (OTHER THAN PLEDGE	ONTRIBUTIONS S. LOANS, OR GUARANTEES OF LOANS)	\$ 270.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED PO	DLITICAL EXPENDITURE.	\$ 0
	4. TOTAL POLITICAL EX	PENDITURES	\$ D
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CON- OF REPORTING PERIO	TRIBUTIONS MAINTAINED AS OF THE LA	ST DAY \$ ATOLOO
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMO LAST DAY OF THE REP	UNT OF ALL OUTSTANDING LOANS AS O	
	swear, or affirm, under penalty of pe quired to be reported by me under Tit	erjury, that the accompanying report is tru le 15, Election Code.	e and correct and includes all information
		Ordrea &	Jerry
(1) Affidavit	Notary ID# 13412905-8 My Commission Expires 01-05-2027 Please c	omplete either option below	v:
NOTARY STAMP/SEA	Andre	a Perry this the	8 day of July.
0.01	which, witness my hand and seal of o	ffice:	notary.
Signature of officer administr		EUVE C. FY arco	Title of officer administering oath
		OR	
(2) Unsworn Declarati	ion		
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(month	. 20 (year) .
		Signature of Candi	date/Officeholder (Declarant)