CAMPAIG		CEHOLDER E 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 Mr	FIRST Kirby	MI J	OFFICE USE ONLY
TUTANE	NICKNAME	Brumby	SUFFIX	RECEIVED
CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX	APT / SUITE #;	CITY; STATE: ZIP CODE	JAN 1/0 2025 By:
OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand-delivered en Des Boodmarked
B CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs. NICKNAME	Debby LAST Brumby	MI R SUFFIX	NORMA G. EDISON Detections Amount 5 NORMA G. EDISON Detections Amount 5 Detections Amount 5 Detections Amount 5 Detections Amount 5 Amount 5 Amount 5 Amount 5 Amount 5 Amount 5 Detections Amount 5 Detections Amount 5 Amount 5 Detections Amount 5 Amount 5 Detections A
CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS	NO PO BOX PLEASE); APT / S	SUITE #: CITY:	RECEIVED
CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	By: Yhu
REPORT TYPE	January 15 July 15	30th day before	H	15th day after comparint treasurer appointment (Officeholder Only) Final Report (Attach COH - FR)
0 PERIOD COVERED	Month Day Year Mooth 7 / 1 / 24 THROUGH 12			Day Your / 31 / 24
H ELECTION	Month Day	Year Primary 24 General	Runoff Other Description Special	
2 OFFICE	OFFICE HELD (If any) County Commissioner County Commissioner			
4 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTIVE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY / COMSENT, CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO COMMITTEE TYPE COMMITTEE NAME GENERAL COMMITTEE ADDRESS		S MAY HAVE BEEN MADE WITHOUT THE CAND	NDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR
Additional Pages	GENERAL			

CANDIDATE / OFFICEHOLDER FORM C/OH **COVER SHEET PG 2** CAMPAIGN FINANCE REPORT 15 C/OH NAME 16 Filer ID (Ethics Commission Filers) Kirby J Brumby 17 CONTRIBUTION TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) \$ 0.00 TOTALS TOTAL POLITICAL CONTRIBUTIONS 2. 0.00 (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) EXPENDITURE TOTAL UNITEMIZED POLITICAL EXPENDITURE. \$ 0.00 TOTALS 0.00 TOTAL POLITICAL EXPENDITURES \$ CONTRIBUTION TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD 0.00 BALANCE TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD OUTSTANDING 0.00 LOAN TOTALS I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information 18 SIGNATURE required to be reported by me under Title 15, Election Code. edidate or Officeholder Please complete either option below: Sarah Ontiveros otary Public, State of Texas (1) Affidavit m. Expires 07-14-2027 Notary ID 134384450 NOTARY STAMP SEAL Sworm to and subscribed before me by KIY DU rtify which, witness my hand and seal of office Printed name of officer administering oath Signature of officer administering oath (2) Unsworn Declaration and my date of birth is My name is My address is (zip code) (country) (street) (city) Executed in County, State of (month) Signature of Candidate/Officeholder (Declarant)

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

	The Instruction Guide explains ho	
	→ Complete only if "Report Type" on page	2 Filer ID RECEIVED
C/OF	HNAME KIRBY Brunby	JAN 1 3 2025
SIGN	NATURE	By: Mu
desig	not expect any further political contributions or political expenditure gnating a report as a final report terminates my campaign treasure paign contributions or make any campaign expenditures without a	appointment. I also understand that I may not accept any
	ER WHO IS NOT AN OFFICEHOLDER omplete A & B below only if you are not an officeholder	RECEIVED
A.	CAMPAIGN FUNDS	JAN 1 0 2025
Ch	eck only one:	By:
	I do not have unexpended contributions or unexpended interes	st or income earned from political contributions.
	may not convert unexpended political contributions or unexp personal use. I also understand that I must file an annual r unexpended contributions or unexpended interest or income of filing this final report. Further, I understand that I must dispose interest or income earned on political contributions in accordance.	eport of unexpended contributions and that I may not retail sarned on political contributions longer than six years after e of unexpended political contributions and unexpended
В.	ASSETS	
Ch	eck only one:	
	I do not retain assets purchased with political contributions or	interest or other income from political contributions.
	I do retain assets purchased with political contributions or inte that I may not convert assets purchased with political contribu- personal use. I also understand that I must dispose of assets requirements of Election Code, § 254.204.	tions or interest or other income from political contributions to
		Signature of Candidate
	ICEHOLDER omplete this section only if you are an officeholder	
	I am aware that I remain subject to filing requirements applicable file. I am also aware that I will be required to file reports of unex an officeholder, I retain political contributions, interest or other is political contributions or interest or other income from political	spended contributions if, after filing the last required report as accome from political contributions, or assets purchased with
		Signature of Officeholder