CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how to complete this form.	D (Ethics Commission Filers) 2	Total pages filed:		
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST Brandon	H	OFFICE USE ON	ILY	
	NICKNAME LAST Burton	OL INTERNAL	TILE FOR RECO	RD	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; 2981 St Huoy 199 Conton R 7510		JAN 3 0 2025		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION Date Hand-delivered or Date Postmarke				
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST	MI	aceipt # Amount	5	
	NICKNAME LAST Burton	SUFFIX	ate Imaged		
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE				
(Residence or Business)	Conton TX 75	105			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (903) 386-6821	EXTENSION			
9 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 Final Report (Attach C/OH - FR)				
	July 15 8th day before election	Reporting Limit			
10 PERIOD COVERED	Month Day Year Month Day Year 07/15/21 THROUGH 01/15/2025				
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year Primary Runoff Other Description General Special				
12 OFFICE	OFFICE HERD (If any) (ONSTable PCT2 13 OFFICE Spught (If known) CONStable PCT2 CONStable PCT2				
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 TREASURER NAME				
	COMMITTEE CAMPAIGN TREASURER AD	DRESS			
	GO TO PAGE 2	2			

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

		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)	\$ Ø
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ Ø
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST D OF REPORTING PERIOD	AY \$
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF TH LAST DAY OF THE REPORTING PERIOD	IE \$ 0
	equired to be reported by me under Title 15, Election Code Signature of Candid	date or Officeholder
	Please complete either option below:	
(1) Affidavit	STEPHANIE MCKNIGHT Notary Public STATE OF TEXAS ID# 134740404 My Comm. Exp. Feb. 1, 2028	
~		
		O day of Jakuana
Sworn to and subscribed	t before me by <u>Heath Burton</u> this the <u>3</u> which, witness my hand and seal of office.	O day of Jahuary
Sworn to and subscribed	this the <u>3</u> which, witness my hand and seal of office.	0
Swom to and subscribed 20 to certify Signature Hofficer administer	a before me by <u>Heath Burton</u> this the <u>3</u> which, witness my hand and seal of office. <u>Stephanic McLMbh</u> ering oath Printed name of officer administering oath OR	0
Sworn to and subscribed	a before me by <u>Heath Burton</u> this the <u>3</u> which, witness my hand and seal of office. <u>Stephanic McLMbh</u> ering oath Printed name of officer administering oath OR	0
Sworn to and subscribed 20 to certify Signature officer administer (2) Unsworn Declaration	a before me by <u>Heath Burton</u> this the <u>3</u> which, witness my hand and seal of office. <u>Stephanic McLMbh</u> ering oath Printed name of officer administering oath OR	Title of officer administering oath
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Sworn to and subscribed 20 to certify Signature of officer administer (2) Unsworn Declaration My name is My address is	a before me by <u>Heath Burton</u> this the <u>3</u> which, witness my hand and seal of office. <u>Heath Market McLuby</u> ering oath Printed name of officer administering oath OR ion (street) (city) (state	Title of officer administering oath
Sworn to and subscribed 20 to certify Signature of officer administer (2) Unsworn Declaration My name is My address is	a before me by <u>Heath Burton</u> this the <u>3</u> which, witness my hand and seal of office. <u>Stephanic McLuight</u> ering oath Printed name of officer administering oath OR ion , and my date of birth is	Title of officer administering oath