## 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 fil	ed:	
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST		MI _	OFFICE USE ONLY		
NAME	NICKNAME	CURRY	SUFFIX	FILE FOR	RECORD	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  Change of Address		BUFFALO #9	JAN 1 5 2025  SUSAN STRICKLAND COUNTY CLERK VAN ZANDT COUNTY BY			
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand-delivered	or Date Postmarked	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	KOBIN	MI	Receipt #	Amount \$	
	NICKNAME	SHERWA	Date imaged	Date Imaged		
7 CAMPAIGN TREASURER ADDRESS	1400 FC	(NO PO BOX PLEASE); APT / S	SUITE #: CITY;	STATE;	ZIP CODE	
(Residence or Business)	CANTO	3N /x 75	1103			
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION			
9 REPORT TYPE	January 15 30th day before election Runoff 15th day after campaign treasurer appointment (Officeholder Only)					
	July 15	8th day before ele	ection Exceeded Modified Reporting Limit	Final Report	t (Attach C/OH - FR)	
10 PERIOD COVERED	Month Day Year  7 /1 / 2 4 THROUGH 12 / 31 / 2 4					
11 ELECTION	Month Day Year Primary Runoff Other Description  General Special					
12 OFFICE	OFFICE HELD (If any)  CRIMINAL DISTRICT STORNEY  13 OFFICE SOUGHT (If known)					
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 TR	EASURER ADDRESS			
		GO ТО	PAGE 2			

## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 2

		The second secon	
15 C/OH NAME			16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITIC     PLEDGES, LOANS, OR GUAR     CONTRIBUTIONS MADE ELECT		\$ 0
	2. TOTAL POLITICAL CONTRI (OTHER THAN PLEDGES, LOA	BUTIONS INS, OR GUARANTEES OF LOANS)	s ()
EXPENDITURE TOTALS	TOTAL UNITEMIZED POLITICAL EXPENDITURE.		\$ 76100
	4. TOTAL POLITICAL EXPEND	ITURES	\$ 76100
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTION     OF REPORTING PERIOD	TIONS MAINTAINED AS OF THE LAS	\$ 3410 29
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT O     LAST DAY OF THE REPORTIN	F ALL OUTSTANDING LOANS AS OF	* · O
(1) Affidavit	Please comp	olete either option below	r:
NOTARY STAMP/SEA	L		
	before me by	this the	day of,
20, to certify	which, witness my hand and seal of office.		
Signature of officer administe	ering oath Printed name of off	ficer administering oath	Title of officer administering oath
		OR	
(2) Unsworn Declarati	on		
My name is TONE		, and my date of birth is	2-8-63
My address is 207 5	Buffalo #99	CANTON ,T	= ,75/03, USA
Executed in VAN DAND	County, State of IEXAS	, on the day of (month	(country) (year) (date/Officeholder (Declarant)
		bignature of Candi	date/dilicellolder (Declarant)