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 (Ethio	cs Commission Filers)	2 Total pages filed:		
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST			МІ		OFFICE USE ONLY	
NAME	NICKNAME	LAST OMPLING		SUFFIX	Date Received	IBOBY	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX;	ESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE ROBOX 269 CVOUKULL TX 75876			Houston County Elections		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (936)	PHONE NUMBER EXTENSION 544 3255 X 231		Date Hand-delivered			
6 CAMPAIGN TREASURER	MS / MRS / MR	FIRST		МІ	Receipt # Date Processed	Amount \$	
NAME	NICKNAME LAST SUFFIX				Date Imaged		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT 1:	SUITE #; CI	ITY;	STATE;	ZIP CODE	
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTE	NSION			
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 Reporting Limit Final Report (Attach C/OH - FR)						
10 PERIOD COVERED	Month Day Year Month Day Year 1/16/25 THROUGH 1/16/24						
11 ELECTION	ELECTION DATE Month Day Year Primary Runoff Other Description General Special						
12 OFFICE	OFFICE HELD (if any)	vaso ver	13 OFFIC	CE SOUGHT (if known)		
14 NOTICE FROM POLITICAL COMMITTEE(S)	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						
Additional Pages	GENERAL COMMITTEE ADDRESS						
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME						
		COMMITTEE CAMPAIGN TE	REASURER ADDRESS	3			
GO TO 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	TOTAL UNITEMIZED POLITICAL CONTRIBUTION PLEDGES, LOANS, OR GUARANTEES OF L CONTRIBUTIONS MADE ELECTRONICALLY	LOANS, OR \$				
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUAR	RANTEES OF LOANS) \$				
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITU	URE. \$				
	4. TOTAL POLITICAL EXPENDITURES	\$ 0				
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTA	AINED AS OF THE LAST DAY \$				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTST/ LAST DAY OF THE REPORTING PERIOD	ANDING LOANS AS OF THE \$				
18 SIGNATURE I s	vear, or affirm, under penalty of perjury, that the accon	mpanying report is true and correct and includes all information				
rec	uired to be reported by me under Title 15, Election Code.					
		Signature of Candidate or Officeholder				
	Please complete eithe	er option below:				
(4) 8 55 1						
(1) Affidavit						
NOTARY STAMP/SEAL						
Sworn to and subscribed	pefore me by	this the day of				
Sworn to and subscribed before me by this the day of, 20, to certify which, witness my hand and seal of office.						
20, to certify	which, withess my hand and sear of office.					
Signature of officer administe	ing oath Printed name of officer administering	ing oath Title of officer administering oath				
	OR					
(2) Unsworn Declaration	n					
My name is	is Olivering, an	nd my date of birth is 4 20 55				
My address is	FOX 269 C1	nocklott ix 78855				
H_{A} .	(street)	(city) (state) (zip code) (country)				
Executed inCounty, State of, on theday of, 20, 20						
		Janis amoline				
		Signature of Candidate/Officeholder (Declarant)				

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

The Instruction Guide explains how to complete this form.								
		•• Complete only if "Report Type" on page 1 is marked	"Final Report" ••					
1	C/OH N	AME Janis Omelina	2 Filer ID (Ethics Commission Filers)					
3	SIGNATURE JAMA GAMALIMA							
	I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.							
		Sig	mature of Candidate / Officeholder					
4	FILER WHO IS NOT AN OFFICEHOLDER Complete A & B below only if you are not an officeholder.							
	A.	CAMPAIGN FUNDS						
	Checl	k only one:						
		I do not have unexpended contributions or unexpended interest or income earn	ned from political contributions.					
		I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filling this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.						
	B.	ASSETS						
	Check 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 interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204. Signature of Candidate							
			<i>V</i> •					
5		EHOLDER uplete this section <i>only</i> if you are an officeholder ••						
	Į.	I am aware that I remain subject to filing requirements applicable to an officeholder file. I am also aware that I will be required to file reports of unexpended contribut an officeholder, I retain political contributions, interest or other income from political contributions or interest or other income from political contributions.	ions if, after filing the last required report as					
			Signature of Officeholder					