CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction C	Guide explains how	to complete this form.	1 Filer ID (Ethic	cs Commission Filers)	2 Total pages filed:		
3 CANDIDATE / OFFICEHOLDER NAME	Ms/MRs/MR Mrs.	Gwendolyn		L ^{M'}	OFFICE USE ONLY		
	NICKNAME Leann Mo	nk		SUFFIX NO	Date Received		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; 630 Count	Road 4755, Warre	en, TX 7766	4	JUL 17 2024		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (409)	PHONE NUMBER 200-1866	EXTE	nsion B	Date Hand delivered on Date Posturerked.		
6 CAMPAIGN TREASURER NAME	Mrs. NICKNAME Leann Mon	Gwendolyn LAST		MI L SUFFIX	Date Processed Date Imaged		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)		no po box please); apt / st y Road 4755, Warr		_{іту;} 64	STATE; ZIP CODE		
8 CAMPAIGN TREASURER PHONE	AREA CODE (409) 20	PHONE NUMBER	EXTER	NSION			
9 REPORT TYPE	January 15 July 15	30th day before electrical and a second seco	ction E	Runoff Exceeded Modified Reporting Limit	15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month 01	Day Year / 15 / 2024	THROUGH	Month 07	Day Year / 15 / 2024		
11 ELECTION	Month Day	Year Primary General	Runoff Special	Other Description			
12 OFFICE	OFFICE HELD (if any) County Tr	easurer	Outset Sterrodone	ty Treasurer			
14 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFIC	EHOLDER. THESE EXPENDITURES	MAY HAVE BEEN MAD	DE WITHOUT THE CAND	IADE BY POLITICAL COMMITTEES TO SUPPORT DIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR THEY RECEIVE NOTICE OF SUCH EXPENDITURES.		
Additional Pages	GENERAL COMMITTEE ADDRESS						
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS						
		COMMITTEE CAMPAIGN TRE	ASUKEK ADDRESS				
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	r Filers)					
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00					
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0.00					
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00					
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00					
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	\$ 0.00					
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OLAST DAY OF THE REPORTING PERIOD	\$ 0.00					
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code Signature of Candidate or Officeholder Please complete either option below:							
(1) Affidavit NOTARY STAMP/SEAL Sworn to and subscribed before me by the state of office this the state of office the state of officer administering oath Signature of officer administering oath OR							
(2) Unsworn Declarati	on						
My name is	, and my date of birth is		·				
My address is							
,		state) (zip code) (coun	try)				
Executed in	County, State of , on the day of (month	, 20 (year)					
	Signature of Candid	date/Officeholder (Declarant)					