CANDIDATE / OFFICEHOLDER FORM C/OH CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 2 Total pages filed: 1 Filer ID (Ethics Commission Filers) The C/OH Instruction Guide explains how to complete this form. MS / MRS (MR) 3 CANDIDATE/ FIRST OFFICE USE ONLY **OFFICEHOLDER** Luke NAME Date Received NICKNAME SUFFIX Sucene APT / SUITE #; 4 CANDIDATE / ADDRESS / PO BOX; ZIP CODE OFFICEHOLDER III Ridgeway Dr. MAILING **ADDRESS** Coldspring TX 77331 Change of Address 5 CANDIDATE/ AREA CODE PHONE NUMBER EXTENSION OFFICEHOLDER (713) 906-5748 PHONE Receig ME / MRS / MR FIRST 6 CAMPAIGN TREASURER \mathcal{D} Date Processed NAME NICKNAME SUFFIX Date Imaged STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; 7 CAMPAIGN CITY: STATE: ZIP CODE TREASURER 521 Camilla **ADDRESS** (Residence or Business) 8 CAMPAIGN AREA CODE PHONE NUMBER EXTENSION TREASURER PHONE (**936**) 524-4031 9 REPORT TYPE January 15 15th day after campaign 30th day before election Runoff treasurer appointment (Officeholder Only) Exceeded Modified July 15 8th day before election Final Report (Attach C/OH - FR) Reporting Limit 10 PERIOD COVERED 05 / 19/ 06 30/24 THROUGH 11 ELECTION ELECTION DATE ELECTION TYPE Primary Runoff Other Description **K** General 05/ Special 12 OFFICE OFFICE HELD (if any) 13 OFFICE SOUGHT (if known) SJC Coty Commissioner Pot 1 14 NOTICE FROM THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE I 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. **POLITICAL** COMMITTEE(S) COMMITTEE NAME COMMITTEE TYPE COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS **GO TO PAGE 2**

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME			1	6 Filer ID (Ethics Commission Filers)			
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ \$				
		AL CONTRIBUTIONS EDGES, LOANS, OR GUARA	NTEES OF LOANS)	\$ Ø			
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE:		\$ \$				
	4. TOTAL POLITICAL EXPENDITURES			\$ 6			
CONTRIBUTION BALANCE	5 TOTAL POLITICAL OF REPORTING PE	CONTRIBUTIONS MAINTAIN	NED AS OF THE LAST	DAY \$ Ø			
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTAN REPORTING PERIOD	IDING LOANS AS OF T	**************************************			
18 SIGNATURE I st	vear, or affirm, under nenalty of	of negligy that the accomp	anvina report is true a	and correct and includes all information			
	uired to be reported by me unde		t the a	ind correct and includes an intermation			
	, ,	, , , , , , , , , , , , , , , , , , , ,					
			Signature of Cand	idate or Officeholder			
	Place	o complete cither	antion halour				
	Please complete either option below:						
(1) Affidavit							
NOTARY STAMP/SEAL							
Sworn to and subscribed b	pefore me by		this the	day of			
20 to certifica	hich, witness my hand and seal	of office					
20 to certify w	riich, widless my hand and seal	or office.					
Signature of officer administeri	ng oath Printed	name of officer administering	oath	Title of officer administering oath			
STEEL LAND		OR	- To 18 19	8 18 50 5 N 28 5 1 1 W			
(2) Unsworn Declaratio	7						
(2) Olisworn Deciaratio	•						
My name is Luke	D SWEEDE	man Pe	ILLOUVER AND COMPANIES IN THE	11/02/1961			
111 0	1000000	1 0 1 d	my date of birth is				
My address isK	lagellay Dr.	Colas	spring 1x	<u> 777331</u> USA			
	(street)	- Lh-	(city) (state				
Executed in San Jac	County, State of 1X	on the	day of July	20 24			
	- 0000000 500	7	(month)	(year)			
		for	-4-				
		′ s	signature of Candidate	/Officeholder (Declarant)			

CANDIDA CAMPAIG	FORM C/OH COVER SHEET PG 1				
The C/OH Instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission)		1 Filer ID (Ethics Commission Filers)	2 Total pages filed:		
3 CANDIDATE/ OFFICEHOLDER	MS / MRS MR	FIRST	MI	OFFICE USE ONLY	
NAME	NICKNAME	Sweeney	SUFFIX	Date Received	
4 CANDIDATE/ OFFICEHOLDER MAILING ADDRESS		deway Dr.	EITY; STATE; ZIP CODE	ECEIVED	
Change of Address	· AREA CODE	PHONE NUMBER	77331 EXTENSION	OCT 0 2 2024	
5 CANDIDATE/ OFFICEHOLDER PHONE		106-5748	SA	Date Handshilletted at Date Hashinakid Receipt in Amount S	
6 CAMPAIGN TREASURER	MS (MRS) MR	FIRST	<i>∂</i> .	Date Processed	
NAME	NICKNAME	Butler	SUFFIX	Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	_	(NO PO BOX PLEASE): APT / S		STATE: ZIP CODE	
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER 524-4031	EXTENSION		
9 REPORT TYPE	January 15	30th day before e		15th day after campaign treasurer appointment (Officeholder Only)	
	July 15	8th day before ele	ction Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month	ol/a4	THROUGH 69	as / a4	
11 ELECTION	Month Day	Year Primary A4 Seneral	ELECTION TYPE Runoff Other Description Special		
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (If known	mmissioner Pot 1	
14 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFR	CEHOLDER. THESE EXPENDITURES S AND OFFICEHOLDERS ARE REQUIR COMMITTÉE NAME	MAY HAVE BEEN MADE WITHOUT THE CAND	ADE BY POLITICAL COMMITTEES TO SUPPORT MDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR HEY RECEIVE NOTICE OF SUCH EXPENDITURES.	
Additional Pages	GENERAL	COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME			
-	10	COMMITTEE CAMPAIGN TRE		33 59	
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	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	THAN \$		
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR GUARANTEES OF LOANS)	DANS) \$ Ø		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ \$		
	4. TOTAL POLITICAL EXPENDITURES	\$ \$		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED; AS OF THE LAST DAY \$ OF REPORTING PERIOD			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$			
	wear, or affirm, under penalty of perjury, that the accompanying report juired to be reported by me under Title 15, Election Code.	is true and correct and includes all information		
		3		
	Signature	of Candidate or Officeholder		
		t v iš		
	Please complete either option b	elow:		
(1) Affidavit				
NOTARY STAMP/SEAL				
Swom to and subscribed	before me by this	the day of		
	which, witness my hand and seal of office.	day of		
Signature of officer administer	ing oath Printed name of officer administering oath	Title of officer administering oath		
MARINE WAR IN	OR	생님, 살 모르다는 살인, 작가 없다.		
(2) Unsworn Declaratio	n			
1 12	7 6	1 1 -		
My name is Luke		Harrier of Sept. The Advance Sept.		
My address isKi) ,	TX 77331 USA		
Executed in San Jaco	(street) County. State of on the day of	(state) (zip code) (country)		
executed in	County. State of X on the 2 day of C	oct. 20 <u>24</u> (year)		
*	fuhe			
Solbox	@ Umail. Com Signature of C	andidate/Officeholder (Declarant)		