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 filed:	
3 CANDIDATE / OFFICEHOLDER NAME	IAS / MRS / IR	rustal	∠ MI	OFFICE USE ONLY	
NAME	NICKNAME	Dominu	SUFFIX	Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	PO C	APT/SUITE #: JO	OCING TO 7133	3 2024 9 2024 O COUI	
Change of Address 5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (281) [0	PHONE NUMBER 7:20	AXTENSION	Date Hand-delivered or Date Postmarked	
6 CAMPAIGN TREASURER NAME	MRS / XIR NICKNAME	1 PAST LAST	MI	Receipt Amount \$ Date Processor Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS	(NO PO BOX PLEASE): APT / SL	ol Spring TX	STATE: ZIP CODE 7733/	
3 CAMPAIGN TREASURER PHONE	AREA CODE (936) (PHONE NUMBER 06 8282	EXTENSION		
REPORT TYPE	January 15	30th day before el	ection Runoff	15th day after campaign treasurer appointment (Officeholder Only)	
	July 15	8th day before elec	etion Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)	
0 PERIOD COVERED	Month	Day Year	THROUGH (2)	Day Year	
1 ELECTION	ELECTION DA	Year Primary General	ELECTION TYPE Runoff Other Description Special		
2 OFFICE	OFFICE HELD (if any)	1,	13 OFFICE SOUGHT (if known San Jacinto C	ounty Pct 3 Commiss	
4 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFICE	EHOLDER. THESE EXPENDITURES	CCEPTED OR POLITICAL EXPENDITURES M	IADE BY POLITICAL COMMITTEES TO SUPPORT DIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR THEY RECEIVE NOTICE OF SUCH EXPENDITURES.	
5	COMMITTEE TYPE	COMMITTEE NAME		•	
Additional Pages	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC	COMMITTEE CAMPAIGN TREA	SURER NAME	*	
		COMMITTEE CAMPAIGN TRE	ASURER ADDRESS		

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 CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) 	\$ 8923.2
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$
EXPENDITURE TOTALS	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$8876.3
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	\$ 36.67
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	THE \$
	wear, or affirm, under penalty of perjury, that the accompanying report is true uired to be reported by me under Title 15, Election Code.	and correct and includes all information
	Signature of Cal	Omundidate or Officeholder
	Please complete either option below	r:
(1) Affidavit		
NOTARY STAMP/SEAL	•	
Swom to and subscribed b	pefore me by this the _	day of
	thich, witness my hand and seal of office.	
Signature of officer administeri	ng oath Printed name of officer administering oath	Title of officer administering oath
	OR	
(2) Unsworn Declaration	1	=
My name is	, and my date of birth is	9
My address is		
	- ·	ate) (zip code) (country)
Executed in	County, State of, on the day of(month)	20 (year)
	Signature of Candida	ate/Officeholder (Declarant)

-		ICEHOLDER CE REPORT		FORM C/OH COVER SHEET PG 1
The C/OH Instruction	Guide explains how	to complete this form.	1 Filer ID (Ethics Commission File	ers) 2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS (MRS) MR	Crusta/	MI	OFFICE USE ONLY Oats. Received
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX	G APT/SUITE#:	OITY; STATE; ZIP CODE	KECEAVE.
MAILING ADDRESS Change of Address	F. V. D	0x 1386	dspring, Tx m33	SAN JACINTO COUN
5 CANDIDATE/ OFFICEHOLDER PHONE	(201)	59 7204	/ EKTENSION	Date Hand-delivered or Date Postmarked Receipt # Amount 5
6 CAMPAIGN TREASURER NAME	MS MRS /MR	(FIRST SHA	MI SUFFIX	Date Processed
7 CAMPAIGN TREASURER	STREET ADDRESS	MILIAM. (NO PO BOX PLEASE); APT / S		Date Imaged STATE; ZIP CODE
ADDRESS (Residence or Business)	245 6	ake Road 00 Idspri	ng TX 17331	
8 CAMPAIGN TREASURER PHONE	(936)	1618282	EXTENSION	
9 REPORT TYPE	January 15	30lh day before e		15th day after campaign treasurer appointment (Officeholder Only)
10 PERIOD COVERED	July 15 Month	Day Year	Exceeded Modifier Reporting Limit Mor THROUGH	
11 ELECTION	ELECTION DAY	Year Primary General	Ruroff Other Description	
12 OFFICE	OFFICE HELD (if any		13 OFFICE SOUGHT (IF K	rounty Pc+3 Commission
14 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFIC CONSENT. CANDIDATE:	CEHOLDER. THESE EXPENDITURES S AND OFFICEHOLDERS ARE REQUIR	MAY HAVE BEEN MADE WITHOUT THE	ES MADE BY POLITICAL COMMITTEES TO SUPPORT CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.
Additional Pages	GENERAL	COMMITTEE NAME		
	SPECIFIC	COMMITTEE CAMPAIGN TRE		
		GO ТО	PAGE 2	

CANDIDATE / OFFICEHOLDER FORM C/OH **COVER SHEET PG 2 CAMPAIGN FINANCE REPORT** 15 C/OH NAME 16 Filer ID (Ethics Commission Filers) 17 CONTRIBUTION TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN TOTALS PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) 2. TOTAL POLITICAL CONTRIBUTIONS \$ (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) EXPENDITURE TOTAL UNITEMIZED POLITICAL EXPENDITURE TOTALS \$ 4. **TOTAL POLITICAL EXPENDITURES** CONTRIBUTION TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY 5 BALANCE OF REPORTING PERIOD OUTSTANDING TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LOAN TOTALS \$ LAST DAY OF THE REPORTING PERIOD 18 SIGNATURE 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 ______this the _____ day of ___ Sworn to and subscribed before me by ____ _, to certify which, witness my hand and seal of office; Signature of officer administering oath Printed name of officer administering cath Title of officer administering oath (2) Unsworn Declaration My name is and my date of birth is (street) (state) (country)

Signature of Candidate/Officeholder (Deglarant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	FILER NAME 20 Filer ID (E	thics Commission Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1,	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$8923.27
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3,	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 8872.30
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7,	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTION	NS \$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9,	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	s Appril
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF	C/OH \$
11,	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	s 4,00
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURN TO FILER	IED \$

		ICEHOLDER CE REPORT			FORM C/OH COVER SHEET PG 1
The C/OH Instruction	Guide explains ho	w to complete this form.	1 Filer ID (E	Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE/ OFFICEHOLDER NAME	ME MRS MR	Crusta	1		OFFICE USE ONLY
IVAIVIL	MICKNAME	MINU	· ·	SUFFIX	Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	PO C	\times : APT SUITE #: 0.04×386	CITY: ST.	ATE; ZIP CODE	A STATE
Change of Address		('Dld	spring.	12331	
5 CANDIDATE/ OFFICEHOLDER PHONE	(281)	159 7204	'V Jek	TÉNSION	Date Hand-delivered or Date Positinarked
6 CAMPAIGN TREASURER NAME	ME / MRS MR	Nristen	_	MI	Receipt # Amount \$
	NICKNAME	VI (l'iam	21	SUFFIX	Date Imaged
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS	(NO PO BOX PLEASE); APT I SI	Q. Anl	da a com	STATE: ZIP CODE 20 17331
(Residence or Business)			wy	wyrune	100011001
8 CAMPAIGN TREASURER PHONE	AREA CODE	1618282	EXT	TENSION O	
9 REPORT TYPE	January 15	30th day before el		Runoff Exceeded Modified	15th day after campaign treasurer appointment (Officeholder Only)
	3diy 13	8th day before elec	ction	Reporting Limit	Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month 7	Day Year / 202 4	THROUGH	Month	26/2024
11 ELECTION	ELECTION Day		Runoff	ELECTION TYPE Other Description	
	/ /	General	Special	-	
12 OFFICE	OFFICE HELD (if any		13 P.C-	F3 Count	Commissioner
I4 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFI	JEHOLDER. THESE EXPENDITURES	MAY HAVE DEEN M	うわこ はのナリクリエ ナリニ ぐっいつい	DE BY POLITICAL COMMITTEES TO SUPPORT DATE'S OR OFFICEHOLDER'S KNOWLEDGE OR EY RECEIVE NOTICE OF SUCH EXPENDITURES.
	COMMITTEE TYPE	COMMITTEE NAME			
Additional Pages	GENERAL	COMMITTEE ADDRESS			-
	SPECIFIC	COMMITTEE CAMPAIGN TREA	SURER NAME	-	
		COMMITTEE CAMPAIGN TREA	ASURER ADDRES	S	
		GO TO F	PAGE 2		

CANDIDATE / OFFICEHOLDER FORM C/OH **CAMPAIGN FINANCE REPORT COVER SHEET PG 2** 15 C/OH NAME 16 Filer ID (Ethics Commission Filers) 17 CONTRIBUTION TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN TOTALS PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) 2. **TOTAL POLITICAL CONTRIBUTIONS** \$ (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **EXPENDITURE** 3. TOTAL UNITEMIZED POLITICAL EXPENDITURE: TOTALS. 4. **TOTAL POLITICAL EXPENDITURES** CONTRIBUTION 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY BALANCE OF REPORTING PERIOD OUTSTANDING TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LOAN TOTALS \$ LAST DAY OF THE REPORTING PERIOD I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information 18 SIGNATURE required to be reported by me under Title 15, Election Code Please complete either option below: (1) Affidavit NOTARY STAMP/SEAL Sworn to and subscribed before me by _______ this the _____ day of ____ _, to certify which, witness my hand and seal of office. Signature of officer administering oath Printed name of officer administering oath Title of officer administering cath (2) Unsworn Declaration My name is ny date of birth Tacu My address is (street) (state) (zip code) (country) Executed in County, State of

Signature of Candidate/Officeholder (De-

SUBTOTALS - C/OH FORM C/OH **COVER SHEET PG 3** FILER HAME 19 20 Filer ID (Ethics Commission Filers) 21 SCHEDULE SUBTOTALS SUBTOTAL NAME OF SCHEDULE **AMOUNT** 1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ 3. SCHEDULE B: PLEDGED CONTRIBUTIONS 4 SCHEDULE E: LOANS \$ 5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS 6: SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 7. \$ SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS 8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ 9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS \$ 10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 1150 SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$

		ICEHOLDER CE REPORT				FORM C/OH SHEET PG 1
The C/OH Instruction	Guide explains ho	w to complete this form.	1 Filer ID (Ethics	Commission Filers)	2 Total page:	s filed:
3 CANDIDATE/ OFFICEHOLDER NAME	NICKNAME	FIRST Y S	tal miny	MI	OFFK	DE USE ONLY
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS (PO BO	BOX 138	b Sprin	ZIP CODE	SIVE	7 2024 TO COUT
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	59 720	Y EXTENS		Date Handydelva	red or Date Postmarked
6 CAMPAIGN TREASURER NAME	ME MRS JAR (Infisten William	ims	MI SUFFIX	Date Imaged	SAN
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS	(NO = BOYPLEASE, APT / SU LAKE	re city	ing,	STATE;	733 I
8 CAMPAIGN TREASURER PHONE	484 CODE	1661 828	2	on J		
9 REPORT TYPE	January 15 July 15	30th day before elec	tion Exp	noff coded Modified orting Limit	treasurer (Streeno	after campaign appointment (der Only) port (Attach C/OH - FR)
10 PERIOD COVERED	Month	126/2021	THROUGH	10 Month	27/S	1124 1124
11 ELECTION	Month Day	Year Primary General	Runoff Special	Other Description		
12 OFFICE	OFFICE HELD (if any)		13 OFFICE S	OUGHT (if known)		
14 NOTICE FROM POLITICAL COMMITTEE(S)	CONSENT, CANDIDATES	CE OF POLITICAL CONTRIBUTIONS A CEHOLDER, THESE EXPENDITURES S AND OFFICEHOLDERS ARE REQUIRE	MAY HAVE BEEN MADE V	VITHOUT THE CAND	IDATE'S OR OFFICEH	OLDER'S KNOWLEDGE DR
Additional Pages	GENERAL	COMMITTEE NAME COMMITTEE ADDRESS			11	
_	SPECIFIC	COMMITTEE CAMPAIGN TREA				
		GO TO F	PAGE 2			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

5 C/OH NAME		
		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 8923.2
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	TDAY \$ 24,67
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	THE \$
	Please complete either option below	•
1) Affidavit		
1) Affidavit NOTARY STAMP/SEAL	-	
NOTARY STAMP/SEAL		day of
NOTARY STAMP/SEAL	before me by this the _ which, witness my hand and seal of office.	day of Title of officer administering oath
Gworn to and subscribed	before me bythis the	

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	FILER NAME	mmission Filers)				
	21 SCHEDULE SUBTOTALS NAME OF SCHEDULE					
Ĭ.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$8923.2				
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTION	\$				
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$			
4.	SCHEDULE E: LOANS		\$			
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL	\$ 8894.1				
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$				
7,,,	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITIC	\$				
8,	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$				
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS				
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH				
11;:	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS				
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTR TO FILER	IBUTIONS RETURNED	\$			