JUDICIAL CANDIDATE / OFFICEHOLDER FORM JC/OH CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 2 Total pages filed: 1 Filer ID (Ethics Commission Filers) The JC/OH Instruction Guide explains how to complete this form. MS / MRS / MR FIRST 3 CANDIDATE / NO STREET ON STR OFFICE USE ONLY **OFFICEHOLDER** D SHEILA NAME Date Received SUFFIX NICKNAME LINDEN 4 CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; STATE; ZIP CODE **OFFICEHOLDER** MAILING **ADDRESS** Change of Address AREA CODE PHONE NUMBER 5 CANDIDATE/ EXTENSION **OFFICEHOLDER** 450-3785 (903)PHONE MS / MRS / MR FIRST 6 CAMPAIGN **TREASURER** R.C. Date Processed JUL NAME NICKNAME SUFFIX Date Imaged JEANN(E 7.5: Elections Administrator, Hunt Co. BURGIN JR. By: STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; STATE; ZIP CODE CAMPAIGN **TREASURER ADDRESS** (Residence or Business) AREA CODE PHONE NUMBER 8 CAMPAIGN **EXTENSION TREASURER** 450-7509 (903)PHONE 9 REPORT TYPE 15th day after campaign January 15 30th day before election Runoff treasurer appointment (Officeholder Only) **Exceeded Modified** July 15 Final Report (Attach C/OH - FR) 8th day before election Reporting Limit 10 PERIOD COVERED 06 /30 /2024 01/01/2024 THROUGH ELECTION DATE **ELECTION TYPE** 11 ELECTION Primary Runoff Other Month Dav Description General Special OFFICE HELD (if any) HUNT COUNTY 12 OFFICE 13 OFFICE SOUGHT (if known) JUSTICE OF THE PEACE - PET 1, PCZ THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT 14 NOTICE FROM 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. **POLITICAL** COMMITTEE(S) COMMITTEE TYPE COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS **GO TO PAGE 2**

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 2

15 JC/OH NAME	SHEILA D. LINDEN	16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS EXPENDITURE TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ -0-
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ - 0 -
	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ - 0 -
	4. TOTAL POLITICAL EXPENDITURES	\$ - 0 -
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	* Z149.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	* THE \$ - 3 -
Please complete either option below: RACHEL ELISE PEARSON Notary Public, State of Texas Comm. Expires 06-22-2027 Notary ID 134420660 NOTARY STAMP/SEAL Sworn to and subscribed before me by Shella Linden this the Say of July to certify which, witness my hand and seal of office.		
Signature of officer administ	ering oath Printed name of officer administering oath	Title of officer administering oath
	OR	
(2) Unsworn Declarat		
	, and my date of birth is	·
My address is		
	(street) (city) (s	tate) (zip code) (country)
Executed in	County, State of , on the day of(month	, 20 (year)
	Signature of Candid	ate/Officeholder (Declarant)