## CANDIDATE / OFFICEHOLDER FORM C/OH **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH instruction Guide explains how to complete this form. MS / MRS / MR CANDIDATE / OFFICE USE ONLY OFFICEHOLDER NAME **Date Received** RECEIVED SHEER NICKNAME 4 CANDIDATE/ OCT 28 2024 ADDRESS / PO BOX: **OFFICEHOLDER** MAILING CITY OF GROVES **ADDRESS** CITY MANAGER'S OFFICE Change of Address 5 CANDIDATE/ AREA CODE PHONE NUMBER Date Hand-delivered or Date Postmarked **OFFICEHOLDER** PHONE Receipt # Amount \$ FIRST CAMPAIGN TREASURER Date Processed NAME NICKNAME LAST SUFFIX Date Imaged ZIP CODE STREET ADDRESS (NO, PO BOX PLEASE); APT / SUITE #; STATE; CAMPAIGN CITY: TREASURER ADDRESS Dhove (Residence or Business) CAMPAIGN **EXTENSION** TREASURER **PHONE** 9 REPORT TYPE 30th day before election Runoff 15th day after campaign January 15 treasurer appointment (Officeholder Only) **Exceeded Modified** July 15 8th day before election Final Report (Attach C/OH - FR) Reporting Limit 10 PERIOD Month Dav COVERED **THROUGH ELECTION TYPE** 11 ELECTION Primary Runoff Other Description Month General Special 13 OFFICE SOUGHT (if known) 12 OFFICE 14 NOTICE FROM THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCÉPTED 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. POLITICAL COMMITTEE(S) COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS GENERAL Additional Pages SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS **GO TO PAGE 2**

## CANDIDATE / OFFICEHOLDER

Forms provided by Texas Ethics Commission

## FORM C/OH **COVER SHEET PG 2**

CONTRIBUTION TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALL'!)  2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURE. 4. TOTAL POLITICAL EXPENDITURES  5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD  OUTSTANDING LOAN TOTALS 6. TOTAL PRINCIPAL ANGUINT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF REPORTING PERIOD  OUTSTANDING LOAN TOTALS 8 SIGNATURE I sweer, or affirm, under pensity of perjury, that the accompanying report is true and correct and includes all informating to the reported by me under Title 15, Election Code.  Please complete sither option below:  (1) Affidavit  NOTARY STAMP/SEAL  Sworn to and subscribed before me by	C/OH NAME		16 Filer ID (Ethics Commission Filers
EXPENDITURE  3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.  4. TOTAL POLITICAL EXPENDITURES  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  OUTSTANDING LOAN TOTALS  6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD  OUTSTANDING LOAN TOTALS  6. SIGNATURE  I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all informs required to be reported by me under Title 15, Election Code.  Please complete either option below:  (1) Affidavit  NOTARY STAMP/SEAL  Swom to and subscribed before me by	CONTRIBUTION TOTALS	PLEDGES LOANS, OR GUARANTEES OF LOANS, OR	an s
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20, to certify which, witness my hand and seal of office.  Signature of officer administering oath  Printed name of officer administering oath  OR  (2) Unsworn Declaration  My name is		this	s the day of
Signature of officer administering oath  Printed name of officer administering oath  OR  (2) Unsworn Declaration  My name is Phonda Dick As and my date of birth is			_
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W Manufactor (Declarant)	* <i>IX</i> J		MINY WULL
Signature of Candidate/Officeholder (Declarant)	(ט)		A July 1085 - halder /Flaterant\