.

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	Guide explains how	to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR -	Jeffing	Wayne	OFFICE USE ONLY
NAME	NICKNAME	LAST Auto	kinson	Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX		CITY; STATE; ZIP CODE	DAY OF NOU AT 1:00 P INTY CLERK COUNTY, TEXAS
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (816)	481-236	EXTENSION	Date Hand-deliveree Oon Date Restmarked
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	Jeffrey	Wayn	Date Processed
	NICKNAME	Acthenson	SUFFIX	Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS	(NO PO BOX PLEASE); APT / S 3R0 St		STATE: ZIP CODE 1/2 29325
8 CAMPAIGN TREASURER PHONE	AREA CODE (BDG)	PHONE NUMBER	EXTENSION	
9 REPORT TYPE	January 15	30th day before e		15th day after campaign treasurer appointment (Officeholder Only)
	July 15	8th day before ele	ection Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month	Day Year	THROUGH 12	Day Year / 31 / 2024
11 ELECTION	ELECTION DA	Year Primary	ELECTION TYPE Runoff Other Description Special	E
12 OFFICE 14 NOTICE FROM	OFFICE HELD (If any)	Attorney		AHOLARY MADE BY POLITICAL COMMITTEES TO SUPPORT
POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFIC	EHOLDER. THESE EXPENDITURES	S MAY HAVE BEEN MADE WITHOUT THE CAN	IDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR THEY RECEIVE NOTICE OF SUCH EXPENDITURES.
Additional Pages	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC	COMMITTEE CAMPAIGN TRE	ASURER NAME	
		COMMITTEE CAMPAIGN TR	EASURER ADDRESS	
	-	GO TO	PAGE 2	

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

CAMPAIGN	I FINANCE REPORT	OVER SHEET PG 2
15 C/OH NAME	Jeftvay Actionson 16 F	iler ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMZED 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
EXPENDITURE	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 0
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAT OF REPORTING PERIOD	Y \$ O
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0
	wear, or affirm, under penalty of perjury, that the accompanying report is true and uired to be reported by me under Title 15, Election Code. Maddad Signature of Candida	22
	Please complete either option below:	te or Oncenoider

	which, witness my hand ar	nd seal of office.		the <u>13</u>	day of _	Uov.
Signature of officer administ		Printed name of officer admini	m5		Title of office	tary
		OR	stering van			autimat
Executed in	(street) County, State of	of, on the	(city) day of	(state)	(zip code)	(coun
			(month)	(year)	
			Signature of C	andidate/Of	ficeholder (Dec	larant)
Forme provided by Tayor F	thics Commission	www.ethics.state	.tx.us			Revise
Forms provided by rexas E						

\$	SUBTOTALS - C/OH					
19	FILERNAME Jeffry Actinson 20 Filer ID (Ethics Corr	mission Filers)				
	NAME OF SCHEDULE	SUBTOTAL AMOUNT				
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS					
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	s 0				
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	s 0				
4.	SCHEDULE E: LOANS	s 0				
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					
0.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	s ()				
1.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	s 0				
2.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED	\$ 0				

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

	NDIDATE / OFFICEHOLDER REPORT: SIGNATION OF FINAL REPORT	FORM C/OH - FR
	The Instruction Guide explains how to complete this	form.
	•• Complete only if "Report Type" on page 1 is marked "F	Final Report" ••
1 C/OH	NAME Jeffrey Wargas Authinson	2 Filer ID (Ethics Commission Filers)
3 SIGN	ATURE	
	hating a report as a final report terminates my campaign treasurer appointment. I als aign contributions or make any campaign expenditures without a campaign treasure sign	
	R WHO IS NOT AN OFFICEHOLDER mplete A & B below only if you are not an officeholder	
A.	CAMPAIGN FUNDS	
Che	ck only one:	
	I do not have unexpended contributions or unexpended interest or income earne	d from political contributions.
	I have unexpended contributions or unexpended interest or income earned from may not convert unexpended political contributions or unexpended interest or in personal use. I also understand that I must file an annual report of unexpended unexpended contributions or unexpended interest or income earned on political of filing this final report. Further, I understand that I must dispose of unexpended po- interest or income earned on political contributions in accordance with the require	ncome earned on political contributions to ed contributions and that I may not retain contributions longer than six years after olitical contributions and unexpended

B. ASSETS

Check only one:

I do not retain assets purchased with political contributions or interest or other income from political contributions.

I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

Signature of Candidate

Signature of Officeholder

5 OFFICEHOLDER

** Complete this section only if you are an officeholder **

I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

FORM C/OH **COVER SHEET PG 1**

The C/OH Instruction G	uide explains how to	complete this form.	1 Filer ID (Ethics Commission F	ilers) 2 Total pages filed:
3 CANDIDATE/	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY
OFFICEHOLDER		Awyna		Data Received
NAME	NICKNAME	LAST	SUFFIX	Date Received
		Sanchez		FILED 13 DAY OF NOV. 20 24 AT 1:00 P
4 CANDIDATE / OFFICEHOLDER MAILING	ADDRESS / PO BOX;	APT/SUITE #: 3 Farwell	CITY: STATE: ZIP COD	E 20 24 AT 1:00 P COUNTY CLERK PARMER COUNTY, TEXAS BY POLOMA SAONA
ADDRESS Change of Address	70 00x 8	a tarmen	14 14325	COUNTY CLERK DEPUTY
5 CANDIDATE/	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked
OFFICEHOLDER	(806)48	1-3845		Receipt # Amount \$
6 CAMPAIGN	MS / MRS / MR	FIRST	MI	
TREASURER NAME		Awyna		Date Processed
NAME	NICKNAME	LAST	SUFFIX	Date Imaged
		Janchez	_	bute mages
7 CAMPAIGN	STREET ADDRESS (N		SUITE #; CITY;	STATE; ZIP CODE
TREASURER ADDRESS (Residence or Business)	4013	rd St. F	arwell TX	79325
8 CAMPAIGN	AREA CODE	PHONE NUMBER	EXTENSION	
TREASURER	(806) 48	1-3845		
9 REPORT TYPE	January 15	30th day before	election Runoff	15th day after campaign treasurer appointment (Officeholder Only)
	July 15	8th day before e	election Exceeded Mod Reporting Limit	
10 PERIOD COVERED	Month	Day Year	THROUGH	2/31/2074
11 ELECTION	ELECTION DAT	TE	ELECTIO	N TYPE
	Month Day	Year Primar		
	11/5/	74 Gener		ription
12 OFFICE	OFFICE HELD (if any)	-	13 OFFICE SOUGHT	(if known)
	TAXASSES	SOR- COLLECT	TOR THAY ASSI	ESSOR - COLLECTOR
14 NOTICE FROM POLITICAL	THE CANDIDATE / OFFIC	EHOLDER, THESE EXPENDITUR	RES MAY HAVE BEEN MADE WITHOUT 1	TURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME		
Additional Pages	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC	COMMITTEE CAMPAIGN T	REASURER NAME	
		COMMITTEE CAMPAIGN	TREASURER ADDRESS	
	1	GO TO	D PAGE 2	
L			alos stato ty us	Revised 11/15/202

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

FORM C/OH COVER SHEET PG 2

15 CIOH NAME	yna	Banchez	S Filer ID (Ethics Commission Filers)
17 CONTRIBUTION 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)	s O
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ -0-
	4.	TOTAL POLITICAL EXPENDITURES	\$-0-
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST OF REPORTING PERIOD	DAY \$ -O-
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T LAST DAY OF THE REPORTING PERIOD	HE \$

Signature of Candidate or Officeholder

V

Please complete either option below:

000111010101		(month)	(year)	
County, State of	, on the day		, 20	
(street)	(city)	(state)	(zip code)	(country)
			tt	
	, and my date	of birth is		
Declaration				
	OR			
er administering oath Printed name of o	officer administering oath		Title of office	administering oat
lle hgie Miche	He. Agee		Notari	(Public
J				\cap
subscribed before me by Awyna 5	anchez	this the 13+	day of	DV.
AMP/SEAL			0	1
MICHELLE AGEE Notary Public, State of Texas ID # 124990091 My Commission Expires JULY 15, 2028				
	Notary Public, State of Texas ID # 124990091 My Commission Expires JULY 15, 2028 AMP / SEAL subscribed before me by <u>AWYAA</u> , to certify which, witness my hand and seal of office. <u>ULAGUE</u> or administering oath <u>Printed name of Comparent Printed Name P</u>	Notary Public, State of Texas ID # 124990091 My Commission Expires JULY 15, 2028 AMP / SEAL subscribed before me by <u>AWYNA Sanchez</u> , to certify which, witness my hand and seal of office. <u>Heague</u> <u>Michelle</u> Agee er administering oath Printed name of officer administering oath OR Declaration , and my date	Notary Public, State of Texas ID # 124990091 My Commission Expires JULY 15, 2028 AMP / SEAL subscribed before me by <u>AWYAA SANCHEZ</u> this the <u>13</u> , to certify which, witness my hand and seal of office. <u>Heagee</u> <u>Michelle</u> <u>Agee</u> or administering oath Printed name of officer administering oath Declaration , and my date of birth is	Notary Public, State of Texas ID # 124990091 My Commission Expires JULY 15, 2028 AMP / SEAL subscribed before me by <u>AWYNA Sanchez</u> this the <u>13</u> day of <u>A</u> , to certify which, witness my hand and seal of office. <u>ULL Gue</u> <u>Michelle</u> <u>Agee</u> <u>Notary</u> or administering oath Printed name of officer administering oath Title of officer Declaration , and my date of birth is

	SUBTOTALS - C/OH						
19	19 FILER NAME AWYNA Sanchez 20 Filer ID (Ethics Com						
21	21 SCHEDULE SUBTOTALS NAME OF SCHEDULE						
1.	X	s -0-					
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		s D			
3.	X	SCHEDULE B: PLEDGED CONTRIBUTIONS					
4.	\square	SCHEDULE E: LOANS					
5.	X	s_O_					
6.	X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS					
7.	X	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS					
8.	X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD					
9.	\times	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS					
10.	\mathbf{X}	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH					
11.	Ň	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	s-0-			
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT	TIONS RETURNED	s D			

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

CANDIDATE / OFFICEHOLDER REPORT: FORM C/OH - FR **DESIGNATION OF FINAL REPORT** The Instruction Guide explains how to complete this form. ** Complete only if "Report Type" on page 1 is marked "Final Report" ** 1 C/OH NAME Janchez **3 SIGNATURE** I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that

designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

4 FILER WHO IS NOT AN OFFICEHOLDER

-- Complete A & B below only if you are not an officeholder. --

CAMPAIGN FUNDS A.

Check only one:

I do not have unexpended contributions or unexpended interest or income earned from political contributions.

I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended

2 Filer ID (Ethics Commission Filers)

Signature of Candidate / Officeholder

	interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.
В.	ASSETS
Check	conly one:
	I do not retain assets purchased with political contributions or interest or other income from political contributions.
	I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.
	Signature of Candidate
	EHOLDER plete this section <i>only</i> if you are an officeholder ••
	I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.
rms provid	ed by Texas Ethics Commission www.ethics.state.tx.us Revised 11/15/20

FORM C/OH COVER SHEET PG 1

					1
The C/OH Instruction G	uide explains how to	o complete this form.	1 Filer ID (Ethics Commission Fi	lers) 2 Total pages fil	ed:
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST	MI		USE ONLY
NAME	NICKNAME	Sanchez	SUFFIX	FILED 8	DAY OF JULY
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX: PO BOX 3	APT/SUITE #: 0 3 Farwell 7	х 79325	BY BREAN	UNTY CLERK COUNTY, TEXAS
5 CANDIDATE/ OFFICEHOLDER PHONE	area code (806)48	PHONE NUMBER	EXTENSION	Date Hand-delivered	or Date Postmarked
6 CAMPAIGN TREASURER	MS / MRS / MR	Awyna	MI	Date Processed	
NAME	NICKNAME	Sanchez	SUFFIX	Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (N	1	arwell TX 1	state; 79325	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
9 REPORT TYPE	January 15	30th day before e		Cofficehold	fter campaign appointment er Only) ort (Attach C/OH - FR)
10 PERIOD COVERED	Month	Day Year / 1.4 / 2074	THROUGH	onth Day Yea	, ,
11 ELECTION	ELECTION DAT	Year Primary	ELECTION Runoff Other Descri		
12 OFFICE	OFFICE HELD (if any)	SOR-GUECT	DR TAY ASSE	f known) 7550R - COULE	CTOR
14 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFIC	CUOIDED THESE EXPENDITURE	ACCEPTED OR POLITICAL EXPENDITI S MAY HAVE BEEN MADE WITHOUT TH IRED TO REPORT THIS INFORMATION O	<i>IE CANDIDATE'S OR OFFICEHO</i>	DLDER'S KNOWLEDGE OR
Additional Pages	GENERAL	COMMITTEE ADDRESS			
		COMMITTEE CAMPAIGN TR	EASURER NAME		
		COMMITTEE CAMPAIGN TR	REASURER ADDRESS		
		GO TO	PAGE 2	4	

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

FORM C/OH COVER SHEET PG 2

15 C/OH NAME	yna Sanchez 16 Fil	er ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ +
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ _
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ -0-
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ _0-
18 SIGNATURE I s	wear, or affirm, under penalty of perjury, that the accompanying report is true and o	correct and includes all information
rec	uired to be reported by me under Title 15, Election Code.	
	Signature of Candidate	e or Officeholder
	Please complete either option below:	
(1) Affidavit	MICHELLE AGEE NOTARY PUBLIC - STATE OF TEXAS ID # 12499009-1 My Commission Expires 07/15/2024	
21	before me by <u>Awyna Sanchez</u> this the <u>Stranchez</u>	day of July,
20 <u>24</u> , to certify Michelly	which, witness my hand and seal of office. Agel Michelle Agee N	Lotary Rublic.
Signature of officer administe	ring gath Printed name of officer administering oath	Title of officer administering oath
	OR	
(2) Unsworn Declarati	on	
My name is	, and my date of birth is	
My address is		,
	(street) (city) (state)	(zip code) (country)
Executed in	County, State of, on the day of (month)	, 20 (year)
	Signature of Candidate/Or	fficeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

	4		
19 FILER NAME	oyna Sanchez	20 Filer ID (Ethics Con	mmission Filers)
21 SCHEDULE SUBTOT NAME OF SCHEDUL			SUBTOTAL AMOUNT
1. 🕅 SCHEDUL	EA1: MONETARY POLITICAL CONTRIBUTIONS		\$ -
2. X SCHEDUL	E A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		s A
3. X SCHEDUL	E B: PLEDGED CONTRIBUTIONS	-	s A
4. X SCHEDUL	E E: LOANS		s O
5. X SCHEDUL	E F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	s_O_
6. X SCHEDUL	E F2: UNPAID INCURRED OBLIGATIONS		s - O-
7. X SCHEDUL	E F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	CONTRIBUTIONS	s O
8. 🗶 SCHEDUL	E F4: EXPENDITURES MADE BY CREDIT CARD		s D
9. 🗙 SCHEDUL	E G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUN	IDS	s D
10. 🔀 SCHEDULI	E H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A	BUSINESS OF C/OH	s A
11. 🖄 SCHEDULI	E I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	s-0-
12. X SCHEDUL	E K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT TO FILER	IONS RETURNED	\$ -
	*		

APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA

	Se	e CTA Instruction	Guide for detaile	ed instructio	ns.	1 Total pages fi	iled:
2	CANDIDATE NAME	MS / MRS / MR Mr. NICKNAME	FIRST Eric Last Geske	• • • • • • • • •	MI L SUFFIX	OFFIC Filer ID # Date Received	E USE ONLY
3	CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX; PO Box 235	APT / SUITE #:	city: Bovina	STATE; ZIP COD Texas 79009	BY BRE	DAY OF Dec. AT <u>9:32 a</u> DUNTY CLERK R COUNTY, TEXAS 2000 - REAR 2000 - REA
4	CANDIDATE PHONE	AREA CODE (830)370-2	PHONE NUMBER		EXTENSION	Receipt # Date Processed	Armount \$
5	OFFICE HELD (if any)	Parmer County S	heriff			Date Imaged	
6	OFFICE SOUGHT (if known)	Parmer County S	heriff				
7	CAMPAIGN TREASURER NAME	MS/MRS/MR Mr.	FIRST Eric	MI L.	NICKNAME	LAST Geske	SUFFIX
8	CAMPAIGN TREASURER STREET ADDRESS residence or business)	street address: 200 Avenue G	A	PT / SUITE #,	сіту; Bovina	state: Texas	ZIP CODE 79009
9	CAMPAIGN TREASURER PHONE	AREA CODE (830) 370-2	PHONE NUMBER		EXTENSION		
10	CANDIDATE SIGNATURE	l am aware o	of my respons			Texas Governn as required by	
		from corpora		or organizat		n Code on contr <i>U/12/2</i> 2 _{Date Signe}	723
			GO	TO PAGE	2		

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA PG 1

Se	1 Total pages filed:	
2 CANDIDATE NAME	MS/MRS(MR) FIRST MI GEURGE K	OFFICE USE ONLY
	GEOKOL K	Filer ID #
	NICKNAME LAST SUFFIX (Kirk) FRYC	Date Received
3 CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX: APT / SUITE #; CITY; STATE; ZIP CODE 2462 FM 1172 FRZUNA, TX 79035	
4 CANDIDATE PHONE	AREA CODE PHONE NUMBER EXTENSION (806) 265-7514	Receipt #
5 OFFICE HELD (if any)	PARMEN COUNTY COMMESSIONER PCT 1	
6 OFFICE SOUGHT (if known)	PARMER County commissioner PCT 1	Sectore and the sector contract of the sector s
7 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MI NICKNAME GEORGE K (Kirk)	LAST SUFFIX
8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS; APT / SUITE #; CITY: 2462 FM 1172 FRIOMA, TEXA	STATE: ZIP CODE
9 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (806) 265-7514	
10 CANDIDATE SIGNATURE	I am aware of the Nepotism Law, Chapter 573 of the Te	xas Government Code.
	I am aware of my responsibility to file timely reports as the Election Code.	required by title 15 of
	I am aware of the restrictions in title 15 of the Election C from corporations and labor organizations.	ode on contributions
	Kink Frye 9 Signature of Candidate	Date Signed
	GO TO PAGE 2	

CANDIDAT CAMPAIGI	FORM C/OH COVER SHEET PG 1		
The C/OH Instruction G	uide explains how to complete this form. 1 Filer ID (Ethics Commission Filers)	2 Total pages filed:	
3 CANDIDATE / OFFICEHOLDER NAME	NICKNAME LAST FIRST White MI Kiemmy Last SUFFIX	OFFICE USE ONLY Date Received FILED 8 DAY OF JUL	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #: CITY; STATE; ZIP CODE 644 FM 1731 Farwiell TX 99325	20_29AT_1:30 P COUNTY CLERK PARMER COUNTY, TEXAS BY	
Change of Address 5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (806) 225-7237	Date Hand-delivered or Date Postmarked	
6 CAMPAIGN TREASURER NAME	MS/MRS/MRS FIRST White MI Kenny Last SUFFIX	Receipt # Amount \$ Date Processed Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY;	STATE; ZIP CODE	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION		
9 REPORT TYPE	January 15 30th day before election Runoff	15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month Day Year Month	Day Year / 15/24	
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year Primary Runoff Other General Special	E	
12 OFFICE	OFFICE HELD (If any) COMMAN 5510NER PCT 3 COMMAN 5510NE	P_{+}	
14 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CAN CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF COMMITTEE TYPE COMMITTEE NAME	IDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR	
Additional Pages	GENERAL COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME		
	COMMITTEE CAMPAIGN TREASURER ADDRESS		
GO TO PAGE 2			

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

	E / OFFICEHOLDER	FORM C/OH COVER SHEET PG 2		
15 C/OH NAME	leans white	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) 	\$ 0		
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0		
	4. TOTAL POLITICAL EXPENDITURES	\$ 0		
CONTRIBUTION BALANCE	 TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LA OF REPORTING PERIOD 	ST DAY \$		
OUTSTANDING LOAN TOTALS	 TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS O LAST DAY OF THE REPORTING PERIOD 	SF THE \$		
Please complete either option below:				
(1) Affidavit MICHELLE AGEE NOTARY PUBLIC - STATE OF TEXAS ID # 12499009-1 My Commission Expires 07/15/2024 NOTARY STAMP/SEAL Sworn to and subscribed before me by <u>Kenny White</u> this the g day of July, 20 24, to certify which, witness my hand and seal of office. <u>Michelle Agee</u> Notary Public Signature of officer administering oath Signature of officer administering oath OR (2) Unsworn Declaration My name is, and my date of birth is				
My address is	(street) (city)	(state) (zip code) (country)		
Executed in	County, State of, on the day of (mon	th), 20 (year)		
	Signature of Candidate/Officeholder (Declarant)			

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

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

,