CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

<u> </u>					
The C/OH Instruction G	uide explains how t	o complete this form.	1 Filer ID Ei	rics Dammission Fliers	2 Total pages filed:
3 CANDIDATE/ OFFICEHOLDER	MS / MRS / MR	() (VV		Ž	OFFICE USE ONLY
NAME	NICKNAME	COORY	SET OTHER BEST DESCRIPTION	SUFFIX	Date Sect led
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX:	APT / SUITE #	TALLO T		OR RECCO chock to the control of the
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER 575 8439	EXT	ENSION	Date Hand-Cell-ared of Date stmarked
6 CAMPAIGN TREASURER NAME	MS / MRS / MR NICKNAME	Lerry Lest Cooper		MI Z SUFFIX	Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (N	DO PO BOX PLEASES APT		- 15487	STATE, ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXT	ENSION	
9 REPORT TYPE	January 15 July 15	30th day before		Runoff Exceeded Modified Reporting Limit	15th day after campaign treasurer appointment (Officeholder Only) Final Report (Altach C/OH - FR)
10 PERIOD COVERED	Month D I	Day Year 2024	THROUGH	Month	Day Year 05 / 2024
11 ELECTION	Month Day	Year Primai		ELECTION TYPE Other Description	
12 OFFICE	OFFICE HELD (If any)	Co Commis	13 OFF	FICE SOUGHT (if known)
14 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFICE	HOLDER. THÉSE EXPENDITU	RES MAY HAVE BEEN M	IADE WITHOUT THE CAN	ADE BY POLITICAL COMMITTEES TO SUPPORT JIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR HEY RECEIVE NOTICE OF SUCH EXPENDITURES.
Additional Pages	GENERAL SPECIFIC	COMMITTEE ADDRESS COMMITTEE CAMPAIGN T	REASURER NAME		
NA		COMMITTEE CAMPAIGN	TREASURER ADDRE	39	
		GO TO	O PAGE 2	V	

CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT**

Forms provided by Texas Ethics Commission

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)	\$ O		
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ O		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 364.06		
	4. TOTAL POLITICAL EXPENDITURES	\$ 364.06		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ D		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0		
Signature of Candidate or Officeholder Please complete either option below:				
(1) Affidavit NOTARY STAMP/SEA				
		day of		
Swom to and subscribed before me by this the day of 20, to certify which, witness my hand and seal of office.				
Signature of officer administe	ring oath Printed name of officer administering oath	Title of officer administering oath		
(2) Unsworn Declarati	on			
My name is My address is Executed in France Forms provided by Texas El	(street) (city) (state) County, State of Signature of Gandidate/Office	1548) JanVin VSA (zip code) (country) 2014 (year) echolder (Declarant)		

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Politi Credit Card Payment	Fees Office Over Food/Beverage Expense Polling E By Gift/Awards/Memorials Expense Printing B	Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule G;	2 FILER NAME COOPLY		3 Filer ID (Ethics Commission Filers)	
4 Date 123 W23	5 Payee name Dian ELDIES			
6 Amount (S) 3\\. 1\ Reimbursement from political contributions intended	7 Payee address: 1321 W FERGUSON	oity: NJ Please	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description Sign Du	culs	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	
Date Det 31 ZUZ3	Payee name VIStaprint			
Amount (\$) 52.30 Reimbursement from political contributions intended	Payee address: Vistaprint Netherlands Customerservice & Vista	BV city; print.com	State; Zip Code	
PURPOSÉ OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing TypenSe Check if travel outside of Texas, Complete Schedule T.	Description Carupats	, cards for re-election	
Complete <u>ONLY</u> if direct expenditure to benefit C/	Candidate / Officeholder name	Office sought	ner Prec (Office held)	
Date	Payee name			
Amount (\$) Reimbursement from political contributions intended	Payee address;	City;	State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule;	Description		
	Check if travel outside of Texas, Complete Schedule T.	Check if Ausli	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEI	DED	

Vistaprint Netherlands B.V.

-\$52.30

Paid with

₹ votopevi

PayPal Credit

\$52.30

on December 31, 2023

Ship to

Jerry Cooper 6835 Texas Highway 37 N Talco, TX 75487-4273 United States

Transaction ID

03H3144916606180C

Seller info

Vistaprint Netherlands B.V.

866-893-6743

customerservice@vistaprint.com

Invoice ID

VP_RJ1VKF3H

Purchase details

Purchase amount

\$52.30

Total

\$52.30

Next time try Honey: users save \$21 on average at Vistaprint

Join Honey

Need help?

If there's a problem, make sure to contact the seller through PayPal by June 28, 2024. You may be eligible for purchase protection



THE SIGN EXPRESS 9035777600 1321 W FERGUSON RD MT PLEASANT, TX 75455

Billed To jerry cooper

Date of Issue 12/22/2023

Due Date 12/22/2023 Invoice Number 7752

Amount Due (USD) \$0.00

Description	Rate	Qty	Line Total
DECALS re-elect	\$288.00 +8.25%	1	\$288.00
		Subtotal (8.25%)	288.00 23.76
	Amou	Total unt Paid	311.76 311.76
	Amount Due	e (USD)	\$0.00

Terms
DUE ON RECEIPT, THANK YOU



AFFIDAVIT FOR CANDIDATE OR OFFICEHOLDER: ELECTRONIC FILING EXEMPTION

An exemption affidavit must be submitted with each paper report.

Beginning on January 1, 2024, a candidate or officeholder who has accepted more than \$32,810 in political contributions or made more than \$32.810 in political expenditures in any calendar year must file all subsequent reports electronically.

Date Received	STRO STRO MATOR DEPUTY
Date Har Mein	TOTAL CONTROL OF THE
Rece pt #	SOUTH ELE
Dale Processed	FRANKLIN
Date Imaged	

Filer name	Filer ID #	

- 1. I swear or affirm that I have not accepted more than \$32,810 in political contributions or made more than \$32,810 in political expenditures in a calendar year.
- 2. I further swear or affirm that I do not use computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- 3. I further swear or affirm that no person acting as my agent or consultant, and no person with whom I contract, uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- 4. I further swear or affirm that I understand that I am required to file my campaign finance reports electronically if I, my agent or consultant, or a person with whom I contract exceeds \$32,810 in political contributions or political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- 5. I am filing this affidavit with the 30th day before report due on 3512024.

 I understand that this affidavit is required to be filed with each campaign finance report for which I am claiming an exemption from electronic filing.

(1) Affidavit	My	Y DEG
NOTARY STAMP/SEAL		Signature of Filer
Sworn to and subscribed before me by	this th	ne day of
20, to certify which, witness my hand	d and seal of office.	
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath
	OR	
(2) Unsworn Declaration My name is Jerry Cuper My address is US 3.5 Tx Hwy = (street) Executed in FRANKIM County, State	te of the city)	(state) 75457 Frankly (country)
FILERS WHO ARE EX	XEMPT FROM THE ELECTRONIC FILING	REQUIREMENT

Please complete either option below:

ARE STILL REQUIRED TO FILE CAMPAIGN FINANCE REPORTS ON PAPER