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	MS / MRS / MR FIRST MR. CHARLIE	MI G.	OFFICE USE ONLY
NAME	NICKNAME LAST EMERSON	SUFFIX	Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; 809 CR SW 3055, SALTILLO,	CITY; STATE; ZIP CODE TX 75478	R RECO O'clock A O'clock A CHOOK A CHO
Change of Address	PUONE MUMBER	EVTENCION	記談に
5 CANDIDATE/ OFFICEHOLDER PHONE	(903) 588-5417	EXTENSION	Date Hand-delivered or Date Bostmarked
6 CAMPAIGN TREASURER	MS / MRS / MR FIRST	МІ	Receipt S S S S S S S S S S S S S S S S S S S
NAME	NICKNAME LAST	SUFFIX	Date Processed
	NOW WE	22	Date Imaged
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / S SAME AS ABOVE	SUITE #; CITY <u>;</u>	STATE; ZIP CODE
(Residence or Business)			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER () SAME AS ABO	EXTENSION	
THORE	() SAIVIE AS ABO	JVE 	
9 REPORT TYPE	January 15 30th day before	election Runoff	15th day after campaign treasurer appointment (Officeholder Only)
	July 15 8th day before el	lection Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year 1 / 27 / 24	THROUGH 2	Day Year / 24 / 24
11 ELECTION	BLECTION DATE Month Day Year 3 / 5 / 24 General	Description	
12 OFFICE	OFFICE HELD (if any) COMMISSIONER PCT. 3	13 OFFICE SOUGHT (If known)	•
14 NOTICE FROM POLITICAL	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURE CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQU	ES MAY HAVE BEEN MADE WITHOUT THE CAND	DIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR
COMMITTEE(S)	COMMITTEE TYPE COMMITTEE NAME		
Additional Pages	GENERAL COMMITTEE ADDRESS		
	SPECIFIC COMMITTEE CAMPAIGN TRE	EASURER NAME	
COMMITTEE CAMPAIGN TREASURER ADDRESS			
GO TO PAGE 2			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME CHARLIE EMERSON		16 Filer ID (Ethio	es Commission Filers)		
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00		
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$	0.00		
A	4. TOTAL POLITICAL EXPENDITURES	\$	913.23		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS	ST DAY \$	0.00		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS O LAST DAY OF THE REPORTING PERIOD	F THE \$	0.00		
	vear, or affirm, under penalty of perjury, that the accompanying report is tru uired to be reported by me under Title 15, Election Code.	e and correct and	includes all information		
	Charbe Emeson				
	Signature of Ca	indidate or Officel	nolder		
	Places complete either enties below				
Please complete either option below:					
(1) Affidavit					
NOTARY STAMP/SEAL					
Sworn to and subscribed	pefore me by this the	day of	v		
20 to certify	which, witness my hand and seal of office.				
, to octally v	mon, without my hand and soul of office.				
Signature of officer administer	ing oath Printed name of officer administering oath	Title of o	fficer administering oath		
		7110 07 0	moor administering dati		
	OR				
(2) Unsworn Declaration	n				
My name is CHARLIE	EMERSON, and my date of birth is	10/12/1956			
My address is 809 CR	SW 3055 SALTILLO T	X 75478	FRANKLIN		
My address is					
Executed in FRANKLI		state) (zip code UARY _{. 20} 24			
Executed in	County, State of TEXAS, on the 25TH day of FEBR				
	_ Charlie &	mesin			
	Signature of Candid	date/Officeholder (l	Declarant)		

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE 1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		0.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	0.00
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		0.00
4. SCHEDULE E: LOANS		0.00
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		0.00
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		0.00
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		0.00
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		0.00
SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		913.23
SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		0.00
SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		0.00
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		0.00

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	8(a)
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Advertising Expense Advertising Expenses
Accounting/Banking
Consulting Expense
Contributions/Donations Made By

Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense
Salaries/Mages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Credit Card Payment	The Instruction Guide explains how to		outer (enter a catego	Siy Not sated above)
1 Total pages Schedule G:	2 FILER NAME CHARLIE EMERSON	3	Filer ID (Ethic	s Commission Filers)
4 Date 2/3/24	5 Payee name ViSta Print			
6 Amount (\$)24	7 Payee address;	City;	State;	Zip Code
Reimbursement from political contributions intended	275 Wyman St.	Waltham	MA	02451
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
EXPENDITURE	NDITURE (c) Check if traveroutside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
1/30/24	Payee name Signs			
Amount (\$) 99	Payee address;	City;	State;	Zìp Code
Reimbursement from political contributions intended	3262 EFM 852	Winnsboro	TX	75494
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) AUULTISING EXPLISE	Description Signs		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, T	K, officeholder living	
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought		Office held
2/9/24	USPS - M. Vernon			
Amount (\$)	Payee address;	City;	State; 🎍	Zip Code
Reimbursement from political contributions intended	207 Kaufman	Mt. Vernon	TX	75457
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Postage		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				



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 STRATOR DEPUTY
REC.	207/2 ZELA CA ONS ADMINIE
Date Handwije	ed of base Beginnarked
Receipt #	NIN COMPANY
Date Processed	PRAME
Date Imaged	

AFFIAF HAFANI V

Filer name	Flier ID #	
CHARLIE EMERSON		

- 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.
- 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 <u>8TH DAY BEFORE</u> report due on <u>FEBRUARY 26, 2024</u>. 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.

Please complete either option below:

(1) Affidavit	Char	lie En	meison
NOTARY STAMP/SEAL		Signatu	re of Filer
Sworn to and subscribed before me by		_ this the	day of,
20, 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 oath
	OR		
(2) Unsworn Declaration			
My name is CHARLIE EMERSON	, and my date	of birth is 10)/12/1956
My address is 809 CR SW 3055 (street)	. SALTILLO (city)	TX (state)	. 75478 FRANKLIN . (country)
Executed in FRANKLIN County, State	of <u>TEXAS</u> , on the <u>25TH</u> day	Me Enver	(year)
Ell EDC WHO ARE EV	EMPT EDOM THE ELECTRONIC EL		Filer (Declarant)

FILERS WHO ARE EXEMPT FROM THE ELECTRONIC FILING REQUIREMENT ARE STILL REQUIRED TO FILE CAMPAIGN FINANCE REPORTS ON PAPER