CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how	to complete this form.	1 Filer ID (Eth	ics Commission Filers)	2 Total pages filed:		
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST		МІ	OFFICE USE ONLY		
NAME	NICKNAME	Steed		SUFFIX	Date Received		
4 CANDIDATE / OFFICEHOLDER / MAILING ADDRESS Change of Address	ADDRESS / PO BOX	APT / SUITE #;	CITY: STAT		OS 2024		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE $(Q_0 3)$	PHONE NUMBER 5873		ENSION	Date Hand-den(W) red by Talk Stmarked		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR NICKNAME	LAST LAST		MI SUFFIX	Date Processed Date Imaged		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS	NORO BOX PLEASE); APT /	SUITE#;	CITY;	STATE; ZIP CODE		
8 CAMPAIGN TREASURER PHONE	AREA CODE (903)	PHONE NUMBER 588- 5373		ENSION			
9 REPORT TYPE	January 15	30th day before		Runoff Exceeded Modified	15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	July 15 Month	Day Year	THROUGH	Reporting Limit Month	Day Year 35/34		
11 ELECTION	ELECTION DAY Month Day	Year Primar		ELECTION TYPE Other Description			
12 OFFICE	OFFICE HELD (if any)		13 055	CE SOUGHT (if know	Oomm,		
14 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFIC	EHOLDER. THESE EXPENDITUR	RES MAY HAVE BEEN MA	ADE WITHOUT THE CAN	MADE BY POLITICAL COMMITTEES TO SUPPORT DIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR THEY RECEIVE NOTICE OF SUCH EXPENDITURES.		
Additional Pages	GENERAL SPECIFIC	COMMITTEE ADDRESS COMMITTEE CAMPAIGN TI	REASURER NAME				
		COMMITTEE CAMPAIGN 1	TREASURER ADDRES	s			
GO TO PAGE 2							

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

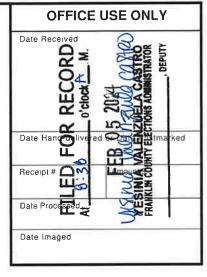
15 C/OH NAME		16 Filer ID (Ethics Commission Filers)				
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$				
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$				
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$				
	4. TOTAL POLITICAL EXPENDITURES	\$				
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS	ST DAY \$				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	THE \$				
I	wear, or affirm, under penalty of perjury, that the accompanying report is true quired to be reported by me under Title 15, Election Code.	and correct and includes all information				
		اما				
Signature of Candidate or Officeholder						
Please complete either option below:						
(1) Affidavit						
NOTARY STAMP/SEA		day of				
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 administe	ring oath Printed name of officer administering oath	Title of officer administering oath				
	OR					
(2) Unsworn Declarati	on ,					
My name is My address is	18 Jacob Jacob Jacob Box 178 Jacob J	10-6-59 TX 175457 Franklin				
Wy dudiess is	(street) (city) (s	state) (zip code) (country)				
Executed in Tranklin County, State of 4 on the day of (month) (year)						
	Signature of Candid	late/Officeholder (Declarant)				



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.



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	10%	V	(SCO)

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.

Filer ID #

- 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 3th COV before report due on 2/5/2024

 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	1 les	loset
NOTARY STAMP/SEAL	√ Sign	attire of Filer
Sworn to and subscribed before me by	this the	day of
20, to certify which, witness my hand a	nd 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 My address is Executed in Franklin County, State	(mont	7.5457, tranklin (country) (country)

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