## JUDICIAL CANDIDATE / OFFICEHOLDER FORM JC/OH CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 2 Total pages filed: 1 Filer ID (Ethics Commission Filers) The JC/OH Instruction Guide explains how to complete this form. МΙ FIRST MS / MRS / MR 3 CANDIDATE/ OFFICE USE ONLY **OFFICEHOLDER** 1115..... NAME PRED FOR RECORD SUFFIX NICKNAME LAST RUSK COUNTY, TEXAS ean STATE; ZIP CODE APT / SUITE #: CITY; ADDRESS / PO BOX; 4 CANDIDATE/ **OFFICEHOLDER** JUL 15 2025 Henderson, TX MAILING **ADDRESS** Change of Address EXTENSION AREA CODE 5 CANDIDATE/ Date Hand-delivered or Date Postmarked DEPUTY **OFFICEHOLDER** (903) 2717 **PHONE** Receipt # Amount \$ FIRST М1 6 CAMPAIGN TREASURER Date Processed NAME NICKNAME LAST Date Imaged STATE; ZIP CODE STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; 7 CAMPAIGN **TREASURER ADDRESS** (Residence or Business) EXTENSION PHONE NUMBER 8 CAMPAIGN AREA CODE **TREASURER** PHONE 9 REPORT TYPE 15th day after campaign Runoff 30th day before election January 15 treasurer appointment (Officeholder Only) Exceeded Modified 8th day before election Final Report (Attach C/OH - FR) July 15 Reporting Limit Month Day 10 PERIOD Month COVERED 2045 **THROUGH ELECTION TYPE** 11 ELECTION ELECTION DATE Runoff Primary Other Day Month Description Special General 13 OFFICE SOUGHT (if known) OFFICE HELD (if any) 12 OFFICE THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT 14 NOTICE FROM THE CANDIDATE! OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDER'S REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. **POLITICAL** COMMITTEE(S) COMMITTEE NAME COMMITTEE TYPE COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS **GO TO PAGE 2**

## JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM JC/OH COVER SHEET PG 2

15 JC/OH NAME		<b>16</b> File	er ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTION     PLEDGES, LOANS, OR GUARANTEES OF LOA     CONTRIBUTIONS MADE ELECTRONICALLY)	DNS (OTHER THAN NS, OR	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARA)	NTEES OF LOANS)	\$ 0
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITUR	E.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES		\$ O
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAIN OF REPORTING PERIOD	NED AS OF THE LAST DAY	\$ 0
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTAN LAST DAY OF THE REPORTING PERIOD	IDING LOANS AS OF THE	\$ 0
	vear, or affirm, under penalty of perjury, that the accompa- uired to be reported by me under Title 15, Election Code.	anying report is true and o	correct and includes all information
	7/6/25	Charl	1 he
	- (	Signature of Candidat	te/Officeholder
	Please complete either	ontion below:	
	r lease complete chile	option solotti	
(1) Affidavit			
(.,,			
NOTARY STAMP/SE/	L.		
Sworn to and subscribed	before me by	this the	day of,
20, to certif	which, witness my hand and seal of office.		
Signature of officer adminis	ering oath Printed name of officer administerin	ng oath	Title of officer administering oat
	OR.		
(2) Unsworn Declara	ion		
, ,	2 0	al many almates of laterths to	4-16-2025
My name is	11/1/2/	d my date of birth is	75654, Rusk.
My address is 378		(city) (state)	
Δ	(street)		20.25
Executed in	County, State of 123A3, on the	(month)	(year)
		Chapture of October 11	Officeholder (Declarant)
		Signature of Candidate/0	Jilicenolder (Declarant)