## CANDIDATE / OFFICEHOLDER FORM C/OH CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. 3 CANDIDATE/ MS / MRS / MR **OFFICEHOLDER** NAME SUFFIX RUSK COUNTY, TEXAS NICKNAME 4 CANDIDATE/ ADDRESS / PO BOX; JUL 14 2025 APT / SUITE #; STATE: ZIP CODE OFFICEHOLDER MAILING ADDRESS ECTIONS ADMINISTRATOR Change of Address AREA CODE 5 CANDIDATE/ PHONE NUMBER BY EXTENSION **OFFICEHOLDER** (903) PHONE Receipt # Amount \$ MS / MRS / MR 6 CAMPAIGN **TREASURER** NAME Date Processed NICKNAME SUFFIX Date Imaged STREET ADDRESS (NO PO BOX PLEASE); 7 CAMPAIGN APT / SUITE # STATE; ZIP CODE TREASURER **ADDRESS** (Residence or Business) AREA CODE 8 CAMPAIGN PHONE NUMBER EXTENSION TREASURER PHONE 9 REPORT TYPE . 30th day before election January 15 Runoff 15th day after campaign treasurer appointment (Officeholder Only) July 15 Exceeded Modified 8th day before election Final Report (Attach C/OH - FR) Reporting Limit 10 PERIOD Year Year COVERED THROUGH **ELECTION DATE** 11 ELECTION **ELECTION TYPE** Primary Runoff Month Other Year General Special 12 OFFICE OFFIGE HELD (if any) 13 OFFICE SOUGHT (if known) THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDER'S ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. 14 NOTICE FROM **POLITICAL** COMMITTEE(S) COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS **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 THAT PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ O
EXPENDITURE TOTALS	TOTAL POLITICAL CONTRIBUTIONS     (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 6
	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ ()
	4. TOTAL POLITICAL EXPENDITURES	\$ 0
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS	ST DAY \$
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	F THE \$
18 SIGNATURE   S	wear, or affirm, under penalty of perjury, that the accompanying report is true	o and correct and include this section
req	uired to be reported by me under Title 15, Election Code.	e and correct and includes all information
		10 -
	thatte	
	Signature of Car	ndidate or Officeholder
	Diogramments with the state of	
	Please complete either option below	<b>7:</b>
(1) Affidavit	LISA SANDERS Notary Public, State of Texas Comm. Expires 05-19-2029 Notary ID 12320534	
NOTARY STAMP/SEAL		
Sworn to and subscribed b	before me by Sichard T. Halle this the	44h day of July.
20 0 , to certify w	hich, witness my hand and seal of office.	A blac D.
Signature of officer administerir	ng oath Printed pages of Afficial Actions	Met peputy
	ng oath Printed name of officer administering oath  OR	Title of officer administering beth
2) Unsworn Declaration		The state of the s
Ny name is Rich	and my date of birth is	9-19-66
My address is 336	(street) (city) (cto	1x 7552 USA
xecuted in	(city) (sta	, (,
	Thomas A Market	, 20 (year)
,	signature of Candidate	e/Officeholder (Declarant)