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. MS / MRS / MR FIRST 3 CANDIDATE/ МІ OFFICE USE ONLY **OFFICEHOLDER** Mr. Rusty J. NAME FILED FOR RECORD NICKNAME LAST SUFFIX Hughes RUSK COUNTY, TEXAS 4 CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; STATE; ZIP CODE **OFFICEHOLDER** 1, Henderson, Texas 75654 JUL 14 2025 MAILING **ADDRESS** Change of Address ELECTIONS ADMINISTRATO AREA CODE PHONE NUMBER 5 CANDIDATE/ **EXTENSION OFFICEHOLDER** (903)889-2248 PHONE Receipt # Amount \$ MS / MRS / MR FIRST 6 CAMPAIGN **TREASURER** Rusty Mr. Date Processed NAME NICKNAME LAST SUFFIX Date Imaged Hughes STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; CAMPAIGN STATE; ZIP CODE **TREASURER** ı, Henderson Texas 75654 **ADDRESS** (Residence or Business) AREA CODE PHONE NUMBER 8 CAMPAIGN **EXTENSION TREASURER PHONE** 889-2248 903 9 REPORT TYPE, 30th day before election 15th day after campaign January 15 Runoff treasurer appointment (Officeholder Only) Exceeded Modified July 15 8th day before election Final Report (Attach C/OH - FR) Reporting Limit 10 PERIOD Day Month Year COVERED **THROUGH ELECTION DATE** ELECTION TYPE 11 ELECTION Primary Runoff Other Month Dav Year Description General Special OFFICE HELD (if any) 13 OFFICE SOUGHT (if known) 12 OFFICE Constable Precinct 3 Constabel Precenict 3 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 ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. **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 1

The C/OH Instruction G	uide explains how to	o complete this form.	1 Filer ID (Ethics of	Commission Filers)	2 Total pages file	ed:		
3 CANDIDATE / OFFICEHOLDER	Ms/MRs/MR Mrs.	FIRST Shannon	·	мі L	OFFICE	USE ONLY		
NAME	NICKNAME	_{LAST} Burkley		SUFFIX	Date Received			
4 CANDIDATE / OFFICEHOLDER MAÏLING ADDRESS Change of Address	Mt. Enterprise	APT / SUITE #; e, TX 75681	CITY; STATE;	ZIP CODE				
		DUGUE AND IDED	EVTEN	NON.	***************************************			
5 CANDIDATE/ OFFICEHOLDER PHONE	(903)	992-3812	EXTENS	SION	Date Hand-delivered or Date Postmarked Receipt # Amount \$			
6 CAMPAIGN TREASURER	Ms/MRs/MR Mrs.	FIRST Shannon		MI L	Recelpt #	Amount \$		
NAME	NICKNAME LAST SUFFIX							
	NICKNAME LAST SUFFIX Burkley				Date Imaged			
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	Mt. Enterprise	•	SUITE#; CIT	Y;	STATE;	ZIP CODE		
8 CAMPAIGN TREASURER PHONE	(903)	992-3812	EXTENS	BION				
9 REPORT TYPE	January 15 July 15	30th day before	election	unoff aceeded Modified eporting Limit	treasurer a (Officeholde	ter campaign ppointment er Only) rt (Attach C/OH - FR)		
10 PERIOD COVERED	Month 1	Day Year / 1 / 25	THROUGH	Month 6	Day Yea / 30 / 25			
11 ELECTION	ELECTION DAT	Year Primat		ELECTION TYPE Other Description				
12 OFFICE	OFFICE HELD (If any) Justice of the Peace, Pct. 3							
14 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. COMMITTEE TYPE COMMITTEE NAME							
Additional Pages	GENERAL	COMMITTEE ADDRESS .						
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME						
		COMMITTEE CAMPAIGN	IREASURER ADDRESS					
GO TO PAGE 2								

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Mrs. Shannon L. Burk	ley		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)		λN	\$ 0.00		
		OLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS	S)	\$ 0.00		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.			\$ 0.00		
	4. TOTAL P	OLITICAL EXPENDITURES		\$ 0.00		
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE L RTING PERIOD	AST DAY	\$ 118.46		
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS Y OF THE REPORTING PERIOD	OF THE	\$ 0.00		
		r penalty of perjury, that the accompanying report is t	rue and corre	ect and includes all information		
re	quired to be reported b	ry me under Title 15, Election Code.				
		manufacture and an analysis of the second se	*****			
		Signature of 0	Candidate or	Officeholder		
		Please complete either option belo	w:			
		,				
(1) Affidavit						
NOTARY STAMP/SEA	\L					
Sworn to and subscribed	before me by	this th	e	day of		
20, to certify	which, witness my har	nd and seal of office.				
Signature of officer administ	ering oath	Printed name of officer administering oath	-	Title of officer administering oath		
		OR	50 pm 4			
(2) Unsworn Declarat	ion Q		Λ			
My name is $\frac{2\sqrt{\mu L}}{2\pi}$	in Burk	Cley, and my date of birth 937 M. Enterwa	is Ull go	ust 27, 1948.		
My address is 170 ($\frac{6}{\sqrt{3}}$	<u>70+ 171(13) , 11(+ , 777, 770)</u> et)	,	/X4/, U		
Executed in Rush County, State of Tuas, on the day of July, 20 05.						
		Markon	Dur	lly (year)		
		Signature of Car	didate/Office	holder (Declarant)		