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 CANDIDATE / **OFFICEHOLDER** NAME NICKNAME FEB 1 4 2025 ADDRESS / PO BOX; 4 CANDIDATE/ STATE; ZIP CODE **OFFICEHOLDER** P.O. Box 205 Kari French, Walker County, Texas MAILING **ADDRESS** Change of Address 5 CANDIDATE/ AREA CODE PHONE NUMBER EXTENSION Date Hand-delivered or Date Postmarked OFFICEHOLDER PHONE Receipt # Amount \$ MI CAMPAIGN TREASURER Date Processed NAME NICKNAME SUFFIX Date Imaged STREET ADDRESS (NO PO BOX PLEASE); STATE; ZIP CODE CAMPAIGN Huntsville 7*732*D TREASURER **ADDRESS** (Residence or Business) PHONE NUMBER EXTENSION AREA CODE 8 CAMPAIGN TREASURER PHONE (936)661-4250 9 REPORT TYPE 15th day after campaign treasurer appointment 30th day before election Runoff January 15 (Officeholder Only) Exceeded Modified Final Report (Attach C/OH - FR) 8th day before election Reporting Limit 10 PERIOD Month Day COVERED / 2024 31 THROUGH **ELECTION TYPE** ELECTION DATE 11 ELECTION Primary Runoff Other Month Description Special 13 OFFICE SOUGHT (if known) 12 OFFICE Walker Co. Constable, Pct. 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. 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 5+	ephen R. Hill	16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OT PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 318.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES C	\$ 318.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ -0-
	4. TOTAL POLITICAL EXPENDITURES	\$ - 0-
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS O	\$ 318.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LO LAST DAY OF THE REPORTING PERIOD	DANS AS OF THE \$ - 0-
	swear, or affirm, under penalty of perjury, that the accompanying required to be reported by me under Title 15, Election Code.	eport is true and correct and includes all information
		_
TI DO 1/10		
	Con	physics of Candidate as Office leading
	Signa	ature of Candidate or Officeholder
Please complete either option below:		
	PHYLLIS MORRISON	
(1) Affidavit		
Notary ID 125919586		
	William Notary to 120010000	
NOTARY STAMP/SEA Sworn to and subscribed	Start Ky \ L'	this the 14th day of Fols.
<i>مسر</i> ر <i>م</i>	which, witness my hand and seal of office	e land
(Krullus) 1.	(Druces) THILLS PORTIS	on clerk
Signature of officer administer	, mass tame of control administrating sacti	Title of officer administering oath
	OR	
(2) Unsworn Declarati	on	
My name is	, and my date	e of birth is
My address is		
	(street) (city)	(state) (zip code) (country)
Evacuted in	County State of	(ciais) (
Executed in	County, State of, on theday	ot, 20 (month) (year)
	Signatur	e of Candidate/Officeholder (Declarant)