CANDIDATE / OFFICEHOLDER FORM C/OH **COVER SHEET PG 1** CAMPAIGN FINANCE REPORT 2 Total pages filed: 1 Filer ID (Ethics Commission Filers) The C/OH Instruction Guide explains how to complete this form. MS / MRS / MR 3 CANDIDATE / FIRST MI OFFICE USE ONLY **OFFICEHOLDER** NAME LAST 4 CANDIDATE / ZIP CODE APT / SUITE #: ADDRESS / PO BOX: APR 01 2025 **OFFICEHOLDER** 75670 MAILING HARRISON COUNTY ELECTIONS OFFICE **ADDRESS** Change of Address AREA CODE PHONE NUMBER EXTENSION 5 CANDIDATE/ Date Hand-delivered or Date Postmarked **OFFICEHOLDER** 935-2841-Home PHONE Receipt # Amount \$ 6 CAMPAIGN **TREASURER** Date Processed NAME Date Imaged STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; STATE: ZIP CODE 7 CAMPAIGN CITY. **TREASURER ADDRESS** (Residence or Business) 8 CAMPAIGN AREA CODE PHONE NUMBER 935-2841 **TREASURER** PHONE 930-7230 9 REPORT TYPE 30th day before election Runoff 15th day after campaign January 15 treasurer appointment Final Report (Attach C/OH - FR) July 15 8th day before election e Month To Day 10 PERIOD Month Day Year COVERED COUNTY EXE 10/21/27 THROUGH BELLITS OF VE 11 ELECTION **ELECTION DATE** ELECTION TYPE Primary Runoff Other Month Day Year Description General Special 12 OFFICE OFFICE HELD (if any) 13 OFFICE SOUGHT (if known) ommissioner 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

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Zephaniah Timmin	16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAT PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	AN \$
TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ -0 -
EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
4. TOTAL POLITICAL EXPENDITURES	\$ -0-
CONTRIBUTION BALANCE 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE L. OF REPORTING PERIOD	AST DAY \$
OUTSTANDING 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS LAST DAY OF THE REPORTING PERIOD	OF THE \$
18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.	
Carlo	
Signature of C	Candidate or Officeholder
Signature of Carididate of Officeriolder	
Please complete either option below:	
The second secon	
CHARLENE GRAFF	
NOTARY PUBLIC	
STATE OF TEXAS	
(1) Affilia W COMM. EXP. 10/21/27	
NOTARY ID 7274898	
the state of the s	
NOTARY STAMP/SEAL	
Sworn to and subscribed before me by	
20_25, to certify which, witness my hand and seal of office.	180
Charlene Graff Charlene Graff	Noter Public
	Nothing Plublic
Signature of officer administering oath Printed name of officer administering oath	Title of officer administering oath
OR	是第二人员的国际。 第二人员的国际国际国际国际国际国际国际国际国际国际国际国际国际国际国际国际国际国际国际
(2) Unsworn Declaration	
My name is, and my date of birth	s
My address is,,	
	(at-ta) (
	(state) (zip code) (country)
Executed in County, State of, on the day of	, 20
(mon	th) (year)
Signature of Candidate/Officeholder (Declarant)	