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 FIRST МІ OFFICE USE ONLY **OFFICEHOLDER** NAME FEB \$ 2024 9:28 Date Received NICKNAME SUFFIX M Appleton Scurry Co Clerk 4 CANDIDATE / ADDRESS / PO BOX: ZIP CODE **OFFICEHOLDER MAILING ADDRESS** Change of Address 5 CANDIDATE/ Date Hand-delivered or Date Postmarked **OFFICEHOLDER PHONE** Receipt # Amount \$ 6 CAMPAIGN **TREASURER** Date Processed NAME SUFFIX Date Imaged REET ADDRESS (NO PO BOX PLEASE); STATE; ZIP CODE 7 CAMPAIGN **TREASURER ADDRESS** (Residence or Business) 8 CAMPAIGN **TREASURER PHONE** (375) 615-6940 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 Month Dav Day COVERED 02/ 01 16/ THROUGH 05/2024 **ELECTION DATE** ELECTION TYPE 11 ELECTION Primary Runoff Other General Special 12 OFFICE OFFICE HELD (if any) 13 OFFICE SOUGHT (if known) 14 NOTICE FROM 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. **POLITICAL** COMMITTEE(S) COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS