CANDIDAT	FORM C/OH COVER SHEET PG 1						
The C/OH Instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers)					2 Total pages filed:		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MR FIRST MI L			OFFICE USE ONLY			
	NICKNAME RUSTY	PRASIFIC	4	SUFFIX	Date Received	SA CO	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	NICKNAME PASSET SUFFIX ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3 24 CROWN HILL OLERSANDIN 74 7 8064 JUL 2 2 2024						
Change of Address	AREA CODE PHONE NITUADED EXTENSION Date Hand always of the Cost marked						
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NIMP		NSION		or Date Costmarked	
6 CAMPAIGN TREASURER	MS / MRS (MB)	PIRST PUS SEU		<u>M</u>	Receipt #	Amount \$	
NAME	NICKNAME LAST - SUFFIX POXS/PUX				Date Imaged		
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE TX 77069						
(Residence or Business)							
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION						
9 REPORT TYPE	January 15 30th day before election Runoff 15th day after campaign treasurer appointment (Officeholder Only)						
	July 15	8th day before e	lection	Exceeded Modified Reporting Limit		rt (Attach C/OH - FR)	
10 PERIOD COVERED	Month Day Year Month Day Year World 6/30/2014						
11 ELECTION	ELECTION DA	TE Year Primary	Runoff	ELECTION TYPE Other Description	≣ • •	.	
	/ /	Genera Genera	I Special				
12 OFFICE	OFFICE HELD (if any) JUSTICE OF THE DEACE PCT 4 13 OFFICE SOUGHT (if known)						
14 NOTICE FROM POLITICAL COMMITTEE(S) Additional Pages	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 KNOWLEGGE OR CONSENT. CANDIDATES AND OFFICEHOLDER'S ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.						
	COMMITTEE TYPE COMMITTEE NAME						
	GENERAL COMMITTEE ADDRESS SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME						
COMMITTEE CAMPAIGN TREASURER ADDRESS							
GO TO PAGE 2							

1

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH **COVER SHEET PG 2**

15 C/OH NAME R	USSECL PRUST FACE	16 Filer ID (Ethics Commission Filers)				
17 CONTRIBUTION TOTALS	\$ -0					
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ _ 0 -				
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	s _0 -				
	4. TOTAL POLITICAL EXPENDITURES	\$.0 -				
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	ST DAY \$ _ 0 -				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	* _O -				
Please complete either option below:						
NOTARY STAMP/SEA	L					
Sworn to and subscribed before me by this the day of, 20, to certify which, witness my hand and seal of office.						
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath						
(2) Unsworn Declaration						
My name is CUSSOL MUSIFIA						
Executed inATAS	(street) (city) County, State of Towas, on the State of Towas	state) (zipcode). (country) 20				
Forms provided by Texas F	thics Commission www.ethics.state.tx.us	Revised 1/1/2024				

www.ethics.state.tx.us

Forms provided by Texas Ethics Commission