CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT				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	MS/MRS/MR FIRST M 11 A John A.		мі Д.	OFFICE USE ONLY
NAME	NICKNAME Anda	Rutherford	SUFFIX	Date Received OSA COUNTY
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	IOIL Maid		CITY; STATE; ZIP CODE	JUL 1 2 2024
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand delly and or Date North arked
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	Receipt # Amount \$
	NICKNAME	LAST A	SUFFIX	Date Processed
	Andy	Retherterd		Date Imaged
7 CAMPAIGN TREASURER ADDRESS		(NO PO BOX PLEASE); APT / S	_	STATE; ZIP CODE
(Residence or Business)	1012 Mail	Dr. Phenson	En Tx 78164	<u> </u>
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
9 REPORT TYPE	January 15	30th day before e	<u></u>	15th day after campaign treasurer appointment (Officeholder Only)
	July 15	8th day before ele	Reporting Limit	Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month	Day Year / 24	THROUGH 07	Day Year /12 /24
11 ELECTION	ELECTION DA	TE Primery	ELECTION TYPE	
	11/05/		Description Special	
12 OFFICE	OFFICE HELD (If any)		13 OFFICE SOUGHT (if known	
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 TRE	ASURER NAME	
		COMMITTEE CAMPAIGN TRI	EASURER ADDRESS	
GO TO PAGE 2				

CANDIDATE / OFFICEHOLDER FORM C/OH **COVER SHEET PG 2 CAMPAIGN FINANCE REPORT** 15 C/OH NAME 16 Filer ID (Ethics Commission Filers) Dachen 17 CONTRIBUTION TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN \$ **TOTALS** PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) **TOTAL POLITICAL CONTRIBUTIONS** \$ (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **EXPENDITURE** TOTAL UNITEMIZED POLITICAL EXPENDITURE. **TOTALS** TOTAL POLITICAL EXPENDITURES CONTRIBUTION TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY BALANCE OF REPORTING PERIOD **OUTSTANDING** 6 TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE \$ **LOAN TOTALS** LAST DAY OF THE REPORTING PERIOD

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. Signature of Candidate or Officeholder Please complete either option below: (1) Affidavit NOTARY STAMP/SEAL Sworn to and subscribed before me by ____ this the , to certify which, witness my hand and seal of office. Signature of officer administering oath Title of officer administering oath Printed name of officer administering oath (2) Unsworn Declaration and my date of birth is Ob/e2 My address is 1012 MG L Pleasanton 78064 (city) (state) (street) (country) (zip code) Executed in Atascasa County, State of Taxas Signature of Candidate/Officeholder (Declarant) www.ethics.state.tx.us Revised 1/1/2024 Forms provided by Texas Ethics Commission