## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 2					
3 CANDIDATE/ OFFICEHOLDER	MS / MRS / MR FIRST Mr. Stephen	мі А	OFFICE USE ONLY					
NAME	NICKNAME LAST Steve Simonsen	SUFFIX	Date Received					
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #: CO. P.O. Box 128, Mentone, Texas 79	city, state: z⊮ code 9754						
Change of Address	AREA CODE PHONE NUMBER	EXTENSION						
5 CANDIDATE/ OFFICEHOLDER PHONE	(432 ) 488-8380	Date Hand-delivered or Date Postmarked  Receipt # Amount \$						
6 CAMPAIGN TREASURER	MS/MRS/MR FIRST Mrs. Jill	MI						
NAME	NICKNAME LAST	Date Processed						
	Simonsen	Date Imaged						
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE): APT / SI	UITE#, CITY;	STATE: ZIP CODE					
TREASURER	P.O. Box 128, Mentone, Texas 79754							
ADDRESS (Residence or Business)								
8 CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION						
TREASURER PHONE	₹							
FITOINE	(432) 488-8380							
9 REPORT TYPE	TYPE January 15 30th day before election Runoff 15th day after ca treasurer appoint (Officeholder Onit							
	July 15 8th day before ele	Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)					
10 PERIOD	Month Day Year	Month	Day Year					
COVERED	1/1/24 THROUGH 6/30/24							
11 ELECTION	ELECTION DATE	ELECTION TYPE						
	Month Day Year Primary Runoff Other Description							
	3 / 5 /2 + General Special ————————————————————————————————————							
	"/ 3/2[   '							
12 OFFICE	OFFICE HELD (if any)  Loving County Attorney  13 OFFICE SOUGHT (if known)  Loving County Attorney							
14 NOTICE FROM	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT							
POLITICAL	THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATE'S AND OFFICEHOLDER'S ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.							
COMMITTEE(S)	COMMITTEE TYPE   COMMITTEE NAME							
Additional Pages	GENERAL COMMITTEE ADDRESS							
-	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME							
	COMMITTEE CAMPAIGN TRE	EASURER ADDRESS						
	GO TO	PAGE 2						

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	MINANCE	REPORT			COVER S	SHEET PG
15 C/OH NAME Stephen Simonsen						Commission Filers
17 CONTRIBUTION TOTALS	1 1460055, 20	EMIZED POLITICAL CONT DANS, OR GUARANTEES ONS MADE ELECTRONIC	OF LOAMS OF	IAN	\$	0.0
	2. TOTAL POLIT	TICAL CONTRIBUTION PLEDGES, LOANS, OR (	<u> </u>	S)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITER	TOTAL UNITEMIZED POLITICAL EXPENDITURE.			\$	0.00
	4. TOTAL POLIT	TOTAL POLITICAL EXPENDITURES			\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITIC OF REPORTING	CAL CONTRIBUTIONS MA	INTAINED AS OF THE LA	AST DA	·Y \$	0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF	PAL AMOUNT OF ALL OUTHE REPORTING PERIOD	TSTANDING LOANS AS (	OF THE	\$	0.00
18 SIGNATURE I sw requ	vear, or affirm, under pena uired to be reported by me u	aity of perjury, that the ac under Title 15, Election Co	companying report is tracked.	ue and	correct and inc	cludes all informati
			MI_		~	
			Signature of C		ite or Officeholo	
(1) Affidavit		ease complete eit	iller option boto.	w.		
NOTARY STAMP/SEAL Sworn to and subscribed b	pefore me by		this the		n'av of	
20, to certify w					uay u,	······································
Signature of officer administering	ng oath Prir	nted name of officer adminis	stering oath		Title of office	er administering oath
(2) Unsworn Declaration	n					
My name is Stephen Sim	ionsen		, and my date of birth is	. 17 C	Oct 1955	
My address is P.O. Box 1	28			x .		USA
Executed in Loving	(street)County, State of	Texas , on the	(city) (s	state)	(zip code)	(country)
			Signature of Candid	⊓) <del>~_*b_</del> date/Of	(year)	larant)