CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	Buide 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	MI A	OFFICE USE ONLY					
NAME	NICKNAME LAST Steve Simonsen	SUFFIX	Date Received					
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #: 0	OTY; STATE: ZIP CODE 9754						
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (432) 488-8380	EXTENSION	Date Hand-delivered or Date Postmarked Receipt # Amount \$					
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST Mrs. Jill	MI	Date Processed					
	NICKNAME LAST Simonsen	Date Imaged						
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #. CITY; STATE; ZIP CODE P.O. Box 128, Mentone, Texas 79754							
(Residence or Business)								
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (432) 488-8380	EXTENSION						
9 REPORT TYPE	January 15 30th day before e	[C	15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)					
	July 15 8th day before ele	Reporting Limit	i Hell Hoper (Hillar) 5/5/1/1/					
10 PERIOD COVERED	Month Day Year	Month	Day Year					
	1/1/25 THROUGH 6/30/25							
11 ELECTION	ELECTION DATE ELECTION TYPE							
	Month Day Year Primery Runoff Other Description							
	11/5/24 General	Special						
12 OFFICE	OFFICE HELD (if any) Loving County Attorney							
14 NOTICE FROM POLITICAL	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 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 TREASURER ADDRESS							
GO TO PAGE 2								

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Stephen Simonsen					16 Filer ID (Ethics Commission Filers)		
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)			THAN	\$	0.00	
	1	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)			\$	0.00	
EXPENDITURE TOTALS	3. TOTAL U	NITEMIZED POLITICA	AL EXPENDITURE.	\$	0.00		
	4. TOTAL F	4. TOTAL POLITICAL EXPENDITURES				0.00	
CONTRIBUTION BALANCE	5. TOTAL PO OF REPO	\$	0.00				
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT O Y OF THE REPORTIN	F ALL OUTSTANDING LOANS A IG PERIOD	\$	0.00		
			that the accompanying report is	s true and	correct and in-	cludes all information	
re	quired to be reported b	by me under Title 15, I	Election Code.				
			Signature o	of Candidate	e or Officehol	der	
•		Please comp	olete either option be	low:			
(1) Affidavit							
NOTARY STAMP/SEA	AL.						
Sworn to and subscribed	before me by		this	the	day of	*	
20, to certify	/ which, witness my hai	nd and seal of office.					
Signature of officer administr	ering cath	Printed name of of	ficer administering oath		Title of office	cer administering oath	
			€IR				
(2) Unsworn Declarati	ion	,					
My name isS	tephen,	limore	and my date of bi	rth is	7 Oct		
My address is P.O. Box	128		Mentone	. <u>TX</u>	79754	USA	
Louina	(stree		(city)	(state)	(zip code)	(country)	
Executed in Evering	County, St	ate of	, on theday of	nonth)	20 <u>}- \$</u> (year)	<u>.</u>	
			Signature of C	andidate/Of	fficeholder (De	eclarant)	
ļ			orginature of C				