The C/OH Instruction C	Guide explains how to comple		1 Filer 1D (Ethics Commission Filers)	2 Total pages filed		
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST	МІ	OFFICE USE ONLY		
NAME	NICKNAME	MUNC LAST WMAN	SUFFIX	Date Received		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address		APT / SUITE # CIT	TY STATE ZIP CODE	5/16/24		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE	NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked		
6 CAMPAIGN TREASURER	MS / MRS / MR	FIRST	МІ	Receipt # Amount \$		
NAME	NICKNAME	LAST	SUFFIX	Date Processed		
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX	_	TE # CITY	STATE ZIP CODE		
(Residence or Business)	5 A	ne				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE	NUMBER	EXTENSION			
9 REPORT TYPE	January 15  July 15	30th day before elections and a sth day before elections.	ion Exceeded Modified	15th day after campaign treasurer appointment (Officeholder Only)  Final Report (Attach C/OH - FR)		
10 PERIOD			Reporting Limit	3		
10 PERIOD COVERED	Month Day  5 4 4	24	THROUGH 5	Day Year 2 (		
11 ELECTION	ELECTION DATE		ELECTION TYPE			
	Month Day Year	Primary	Runoff Other Description			
	5/4/24	∑ General	Special			
12 OFFICE	OFFICE HELD (if any)  PACE 1		13 OFFICE SOUGHT (if known	)		
14 NOTICE FROM POLITICAL	THIS BOX IS FOR NOTICE OF POLITIC THE CANDIDATE / OFFICEHOLDER.	THESE EXPENDITURES M	AY HAVE BEEN MADE WITHOUT THE CAND	IADE BY POLITICAL COMMITTEES TO SUPPORT DIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR THEY RECEIVE NOTICE OF SUCH EXPENDITURES.		
COMMITTEE(S)	COMMITTEE TYPE   COMMITT	EE NAME				
Additional Pages	GENERAL	EE ADDRESS				
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME					
	СОММІТТ	TEE CAMPAIGN TREA	SURER ADDRESS			
	'	GO TO P	AGE 2			

15 C/OH NAME		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)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS     OF REPORTING PERIOD	T DAY \$
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	THE \$
red	Please complete either option below	ndidate or Officeholder
	i i case complete cialle. Opalen zoie.	
(1) Affidavit  NOTARY STAMP/SEAI		LAURA KENNEMER Notary Public, State of Texas Comm. Expires 07-19-2026 Notary ID 125765634
Sworn to and subscribed		11ath day of May
011	which, witness my hand and seal of office.	16th day of May.
Signature of officer administe	umer Laura Kennemer	City Secretary/Notary Title of officer administering oath
	OR	
(2) Unsworn Declaration	on	
My name is	, and my date of birth is	
My address is		
	(street) (city) (s	tate) (zip code) (country)
Executed in	County, State of , on the day of(month	) 20 (year)
	Signature of Candid	ate/Officeholder (Declarant)

### CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

		The Instruction Guide explains how to complete this for	m.
		· Complete only if "Report Type" on page 1 is marked "Final	I Report" ••
1	C/OH N	NAME	2 Filer ID (Ethics Commission Filers)
	T	work Bouman	
3	SIGNA	ATURE	
		t expect any further political contributions or political expenditures in connection with m	A
		ating a report as a final report terminates my campaign treasurer appointment. I also u gn contributions or make any campaign expenditures without a campaign treasurer app	
		Signatu	e of Candidate / Officeholder
4		WHO IS NOT AN OFFICEHOLDER	
	•• Com	nplete A & B below <i>only</i> if you are not an officeholder. ••	
	A.	CAMPAIGN FUNDS	
	Chec	k only one:	
		I do not have unexpended contributions or unexpended interest or income earned from	om political contributions.
		I have unexpended contributions or unexpended interest or income earned from polit	
		may not convert unexpended political contributions or unexpended interest or incorpersonal use. I also understand that I must file an annual report of unexpended of	
		unexpended contributions or unexpended interest or income earned on political contri	
		filing this final report. Further, I understand that I must dispose of unexpended politic interest or income earned on political contributions in accordance with the requirement	
	B.	ASSETS	
	Chec	k only one:	
		I do not retain assets purchased with political contributions or interest or other income	e from political contributions.
		I do retain assets purchased with political contributions or interest or other income fro	om political contributions. I understand
		that I may not convert assets purchased with political contributions or interest or other	r income from political contributions to
		personal use. I also understand that I must dispose of assets purchased with political requirements of Election Code, § 254.204.	Il contributions in accordance with the
		S	ignature of Candidate
5		EHOLDER uplete this section <i>only</i> if you are an officeholder ••	
		I am aware that I remain subject to filing requirements applicable to an officeholder who d	oes not have a campaign treasurer on
	-	$\label{eq:file.} \ensuremath{\text{I am also aware that I will be required to file reports of unexpended contributions if,}}$	after filing the last required report as
		an officeholder, I retain political contributions, interest or other income from political contributions or interest or other income from political contributions.	tributions, or assets purchased with
		position solutions of interest of other mountainous positions desired	. 15
		L'Eur	gnature of Officeholder
			5

The C/OH Instruction (	Guide explains hov	v to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY
NAME	NICKNAME	Underwoo	SUFFIX	Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  Change of Address	ADDRESS / PO BOX	APT / SUITE #	CITY STATE ZIP CODE	5/16/24
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER	MS / MRS / MR	Sane	MI	Receipt # Amount \$  Date Processed
NAME	NICKNAME	LAST	SUFFIX	5/16/24 5/16/24
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS	(NO PO BOX PLEASE). APT / S	SUITE # CITY	STATE ZIP CODE
(Residence or Business)		Sane		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
9 REPORT TYPE	January 15	30th day before e		15th day after campaign treasurer appointment (Officeholder Only)
- Sin Boulder St		Bill day before ele	Reporting Limit	That report (Allact Groff - Try)
10 PERIOD COVERED	5	Day Year	THROUGH 5	Day Year
11 ELECTION	ELECTION DA	ATE	ELECTION TYPE	
	Month Day 5-/4	Year Primary General	Runoff Other Description Special	
12 OFFICE	Place 3		13 OFFICE SOUGHT (of known)	)
14 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFI	CEHOLDER. THESE EXPENDITURES	S MAY HAVE BEEN MADE WITHOUT THE CAND	ADE BY POLITICAL COMMITTEES TO SUPPORT DIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR HEY RECEIVE NOTICE OF SUCH EXPENDITURES.
000000000000000000000000000000000000000	COMMITTEE TYPE	COMMITTEE NAME		
Additional Pages	GENERAL	COMMITTEE ADDRESS  COMMITTEE CAMPAIGN TRE.	ASIDED NAME	
	SPECIFIC	COMMITTEE CAMPAIGN TRE		
		The state of the s		
		GO TO	PAGE 2	

15 C/OH NAME		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAT PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
11	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LA     OF REPORTING PERIOD	ST DAY \$
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS CLAST DAY OF THE REPORTING PERIOD	F THE \$
	Please complete either option below	andidate or Officeholder
(1) Affidavit  NOTARY STAMP/SEAL		LAURA KENNEMER  Notary Public, State of Texas  Comm. Expires 07-19-2026  Notary ID 125765634
20 29 to certify	ring oath Printed name of officer administering oath	16th day of May.  ty Secretary/Notary  Title of officer administering oath
(2) Unsworn Declaration	OR On	
	, and my date of birth is	
My address is		state) (zip code) (country)
Executed in	County, State of , on the day of (mont	20
	Signature of Candi	date/Officeholder (Declarant)

# CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

		The Instruction Guide explains how to comple	ete this form.
		Complete only if "Report Type" on page 1 is mar	ked "Final Report" ••
1	C/OHN Tom	my Underwood	2 Filer ID (Ethics Commission Filers)
3	SIGNA		
	designa	expect any further political contributions or political expenditures in connecting a report as a final report terminates my campaign treasurer appointment on contributions or make any campaign expenditures without a campaign treasurer.	nt. I also understand that I may net accept any
			Signature of Candidate / Officeholder
4		WHO IS NOT AN OFFICEHOLDER plete A & B below only if you are not an officeholder. ••	
	A.	CAMPAIGN FUNDS	
	Check	only one:	
		I do not have unexpended contributions or unexpended interest or income	earned from political contributions.
		I have unexpended contributions or unexpended interest or income earned may not convert unexpended political contributions or unexpended interest personal use. I also understand that I must file an annual report of une unexpended contributions or unexpended interest or income earned on political this final report. Further, I understand that I must dispose of unexpended interest or income earned on political contributions in accordance with the	est or income earned on political contributions to expended contributions and that I may not retain solitical contributions longer than six years after anded political contributions and unexpended
	В.	ASSETS	
	Check	conly one:	
		I do not retain assets purchased with political contributions or interest or o	ther income from political contributions.
		I do retain assets purchased with political contributions or interest or other that I may not convert assets purchased with political contributions or interpersonal use. I also understand that I must dispose of assets purchased virequirements of Election Code, § 254.204.	est or other income from political contributions to
			Signature of Candidate
5		EHOLDER	
	com	I am aware that I remain subject to filing requirements applicable to an officeholder file. I am also aware that I will be required to file reports of unexpended cont an officeholder, I retain political contributions, interest or other income from political contributions or interest or other income from political contributions	ributions if, after filing the last required report as political contributions, or assets purchased with
			/Signature of Officeholder

The C/OH Instruction C	Guide explains how	to complete this form.	1 Filer ID (Ethic	cs Commission Filers)	2 Total pages filed:	
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST		MI	OFFICEUSE	ONLY
NAME		iguei			Date Received	
	NICKNAME	LAST		SUFFIX	1 . 4 . 4	
		Servoria			5/15/24	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX	APT / SUITE #;	CITY: STAT	E ZIP CODE		
Change of Address	Quinla	an TX 7	5474			
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTE	NSION	Date Hand-delivered or Date	e Postmarked
6 CAMPAIGN	MS / MRS / MR	FIRST		MI	Receipt # Amo	ount \$
TREASURER		+			Data Bassassa	
NAME	NICKNAME	EAST LAST		SUFFIX	Date Processed 5/15/24  Date Imaged 5/15/24	
7 CAMPAIGN	STREET ADDRESS	(NO PO BOX PLEASE), APT / S	UITE #. C	ITY,	STATE ZIP	CODE
TREASURER ADDRESS						
(Residence or Business)		Same				
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTE	NSION		
1110112	( )					
9 REPORT TYPE	January 15	30th day before e	election	Runoff	15th day after camp treasurer appointme (Officeholder Only)	
1	July 15	8th day before ele	CHUII	Exceeded Modified Reporting Limit	Final Report (Attach	C/OH - FR)
10 PERIOD COVERED	Month	Day Year		Month	Day Year	
COVERED	5	4/24	THROUGH	5/	/2/26	
11 ELECTION	ELECTION DA	TE		ELECTION TYPE		
world with the	Month Day Year Primary Runoff Other Description					
	5/4	Gen eral	Special	Безеприон		
12 OFFICE	OFFICE HELD (if any)		13 OFFI	CE SOUGHT (if known	1)	
	Place			,		
44 NOTICE EDG14		OF DE BOUTION CONTRIBUTIONS	ACCEPTED OF TOUR	CAL EVENINITURES :	IADE BY BOLITICAL COMMITTEE	e to cupport
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.					
00101101111122(0)	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL	COMMITTEE ADDRESS		11		
Additional Pages				I.B.		
	SPECIFIC	COMMITTEE CAMPAIGN TRE	EASURER NAME			
		COMMITTEE CAMPAIGN TR	EASURER ADDRESS	S		1
					100	
		22.52	DAGES	R. Martin	1 1 1 1 1 1 1 1 1 2 1 1 1 1 1 1 1 1 1 1	
		GO TO	PAGE 2	30 NO 27		

15 C/OH NAME		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THA PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LA OF REPORTING PERIOD	ST DAY \$
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS CLAST DAY OF THE REPORTING PERIOD	SF THE \$
rec	Please complete either option below	andidate or Officeholder
(1) Affidavit  NOTARY STAMP/SEAR  Sworn to and subscribed	before me by this the	
20, to certify Signature of officer administe	which, witness my hard and seal of office.  LOUGA PRINTED TO SENTENCE OF THE PRINTED TO SENTENCE OF TH	City Secretary  Title of officer administering oath
	OR	
(2) Unsworn Declaration  My name is	tel Serran W, and my date of birth is	s
My address is	(alta all)	(state) (zin sada) (ssuntsu)
Formula 6		(state) (zip code) (country)
Executed in	LAURA KENNEMER (moni	
OF THE	Notary ID 125765634 Signature of Cand	idate/Officeholder (Declarant)

## CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

		The Instruction Guide explains how to complete this form.
		•• Complete only if "Report Type" on page 1 is marked "Final Report" ••
1	C/OH N	Servano  2 Filer ID (Ethics Commission Filers)
3	I do not designa campaig	expect any further political contributions or political expenditures in connection with my candidacy. Understand that ting a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any gn contributions or make any campaign expenditures without a campaign treasurer appointment on file.  Signature of Candidate / Officeholder
4		who is not an officeholder.
	A.	CAMPAIGN FUNDS
	Check	k only one:
		I do not have unexpended contributions or unexpended interest or income earned from political contributions.
		I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.
	B.	ASSETS
	Check	k only one:
		I do not retain assets purchased with political contributions or interest or other income from political contributions.
		I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.
		Signature of Candidate
5	OFFICI	EHOLDER
3		I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions or interest or other income from political contributions.  Signature of Officeholder