CAMPAIG	N FINANC	E REPORT			FORM C/OH 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 MI Mr Floyd		OFFICE USE ONLY		
NAME	NICKNAME	LAST Davis	SUFFIX	Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX		city: STATE: ZIP CODE		JUL 19 202
Change of Address CANDIDATE/	AREA CODE	PHONE NUMBER	EXTENSION		
OFFICEHOLDER PHONE		74-5311	EXTENSION	Date Hand-delivered or Date Postmarked	
6 CAMPAIGN	MS / MRS / MR	FIRST	MI	Receipt #	Amount \$
TREASURER NAME	Ms.	Jennifer		Date Processed	
	NICKNAME LAST SUFFIX Harris			Date Imaged	
CAMPAIGN TREASURER	STREET ADDRESS	NO PO BOX PLEASE); APT / S	SUITE #; CITY;	STATE;	ZIP CODE
ADDRESS (Residence or Business)	5830 Meadow Ran	ch PKWY 12106	Richmond	Texas	77407
CAMPAIGN TREASURER PHONE	AREA CODE (713) 909-8	PHONE NUMBER	EXTENSION		
REPORT TYPE	January 15	30th day before e	election Runoff	treasurer	after campaign appointment
	X July 15	8th day before ele	ection Exceeded Modified Reporting Limit		port (Attach C/OH - FR)
0 PERIOD COVERED	Month 02	Day Year / 07 / 2023	Month THROUGH 06	/ /	_{ear}
1 ELECTION	Month Day 0: 05 /	Year Primary 2024 General	ELECTION TYPE Runoff Other Description Special		
2 OFFICE	OFFICE HELD (if any) 13 OFFICE SOUGHT (if known)				
	None Fort Bend County Precin			ct 2 Constable	Office
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 OFFICEHOLDER'S ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.				
	COMMITTEE TYPE COMMITTEE NAME				
Additional Pages	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME			
			EASURER ADDRESS		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

				2013		
13 C / OH NAME	Davis, Floyd	13	14 Filer ID			
15 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.					
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL	COMMITTEE ADDRESS				
	SPECIFIC	*//1				
		COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMITAIGN THEASCREN WAINE				
		COMMITTEE CAMPAIGN TREASURER ADDRESS	;			
16 CONTRIBUTION TOTALS		I IZED POLITICAL CONTRIBUTIONS (OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		3 0.00		
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	1,290.00		
EXPENDITURE TOTALS	TOTAL UNITEMIZED POLITICAL EXPENDITURES			0.00		
	4. TOTAL POLITIC	AL EXPENDITURES	\$	0.00		
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LAS RIOD	ST DAY OF THE \$	1,290.00		
OUTSTANDING LOAN TOTALS	OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS O TING PERIOD	F THE LAST DAY	0.00		
17 AFFIDAVIT	VIER AGUILLO X X X X X X X X X X X X X X X X X X	I swear, or affirm, under penalty of true and correct and includes all i under Title 15, Election Code.	of perjury, that the accompinformation required to be	panying report is reported by me		
AFFIX NO	TARY STAMP / SEAL ABO	OVE				
Sworn to and subso	cribed before me, by the s	aid Floyd M. Davis ertify which, witness my hand and seal of office.	, this the 8	day		
	A 1					
	12	Eric T. Aguillon	Notar	4		
Signature of office	cer administering	Printed name of officer administering	Title of officer adn	ninistering oath		
To dead by To	vac Ethice Commission	www.athics state ty us	Vor	sion V3.5.1 a18ea2ca		

FORM C/OH SUBTOTALS - C/OH **COVER SHEET PG 3** 18 FILER NAME 19 Filer ID Davis, Floyd 20 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 1,290.00 SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS SCHEDULE B: PLEDGED CONTRIBUTIONS SCHEDULE E: LOANS \$ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ 10. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 11. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED \$ TO FILER

			-	Table 1 Colored Colore	V
The Instruc	tion Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 4/5	
FILER NAME Davis, Floyd			3	Filer ID	
Date 5 Full name of contributor out-of-state PAC (ID#:) O6/16/2023 Adams, Jimmy (Mr.) 6 Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$500.00
	2707 Maple Ln Pearland, TX 77584				
Principal occup Captain		9 Employer (See Instructions) Harris County Constable			
Date 06/18/2023	Full name of contributor out-of-state PAC (ID#: Burton, Matthew (Mr.) Contributor address; City; State; Zip Code 836 London Lane			Amount of Contribution (\$)	\$500.00
	Crowley, TX 76036				
Principal occupi	ation / Job title (See Instructions)	Employer (See Instructions) Post Office)		
Date 06/28/2023	Full name of contributor out-of-state PAC (ID#: South Texas Pawn Contributor address; City; State; Zip Code 14551 Cullen Blvd Ste K			Amount of Contribution (\$)	\$250.00
Principal occup	Houston, TX 77047 ation / Job title (See Instructions)	Employer (See Instructions))		
Date 06/10/2023	Full name of contributor out-of-state PAC (ID#: Turnier, Gregory (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$40.00
	7204 Towncenter Blvd # 1319 Rosenberg, TX 77583				
Displant	ation / Job title (See Instructions)	Employer (See Instructions) Harris County Constable			

TEXT ANNOTATION		
		Sch: 1/1 Rpt: 5/5
FILER NAME Davis, Floyd	Filer ID	
Schedule		
Cover Sheet		
Information entered by filer as a memo:		,
as unable to load my campaign treasurer information.		