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	MI	OFFIC	E USE ONLY	
NAME	NICKNAME	LAST Duncan	SUFFIX	Date Received		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; 22915 Chaus Katy, TX 774	s Ct.	CITY; STATE; ZIP CODE		JUL 15 2024	
5 CANDIDATE/	AREA CODE	PHONE NUMBER	EXTENSION			
OFFICEHOLDER	(713)	628-7228	EATENSION	Date Hand-delivered or Date Postmarked		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST James	MI	Receipt # Date Processed	Amount \$	
	NICKNAME	LAST	SUFFIX	Date Imaged		
		Logan				
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 5122 Long Branch Bend Fulshear, TX 77441					
B CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION			
B REPORT TYPE	January 15	30th day before e		(Officeho	after campaign ; appointment Ider Only) port (Attach C/OH - FR)	
0 PERIOD COVERED	Month 1	Day Year 1 / 24	Month THROUGH 6	Day Ye	9ar 4	
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year Image: Constraint of the constraint o					
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (If known))		
4 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.					
(2)	COMMITTEE TYPE COMMITTEE NAME					
	GENERAL	COMMITTEE ADDRESS				
Additional Pages		SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME				
Additional Pages	SPECIFIC	COMMITTEE CAMPAIGN TRI	EASURER NAME			

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

Revised 1/1/2024

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Wendy Duncan		16 File	r ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GU	ARANTEES OF LOANS)	\$ 0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPEND	ITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES		\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAIN OF REPORTING PERIOD	NTAINED AS OF THE LAST DAY	\$ 6,084.21
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUT LAST DAY OF THE REPORTING PERIOD	STANDING LOANS AS OF THE	\$ 0.00
	Please complete eit	Signature of Candidate	or Officeholder
(1) Affidavit			
Sworn to and subscribed		this the	day of,
	which, witness my hand and seal of office.		
Signature of officer administe	ring oath Printed name of officer adminis	stering oath	Title of officer administering oath
(2) Unsworn Declarati	on		
My name is Wendy D	uncan	, and my date of birth is 11/1	8/1969
My address is 22915 (Chaus Ct. Ka	aty TX	77494 USA
Executed in Fort Bend	(street)	(city) (state)	(zip code) (country) , 2024 (year) wtar iceholder (Declarant)