## 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)	<sup>2</sup> Total pages filed: 2		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mrs.	FIRST Annie Rebecca	MI	OFFICE USE ONLY		
	NICKNAME	LAST Elliott	SUFFIX	Date Received		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX	a Lane, Richmond		JAN 12 2024 RCJ		
Change of Address						
5 CANDIDATE/ OFFICEHOLDER PHONE	(832)	PHONE NUMBER 423-4075	EXTENSION	Date Hand-delivered or Date Postmarked		
6 CAMPAIGN	MS / MRS / MR	FIRST	MI	Receipt #	Amount \$	
TREASURER NAME	Mr.	Michael	W.	Date Processed	· · · ·	
	NICKNAME	Elliott	SUFFIX	Date Imaged		
7 CAMPAIGN TREASURER ADDRESS		NO PO BOX PLEASE); APT / SI a Lane, Richmond,		STATE; ZIP CODE		
(Residence or Business)			4			
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION			
9 REPORT TYPE	January 15	30th day before e	totion Exceeded Modified	(Officeholde		
10 PERIOD COVERED	Month     Day     Year       Month     Day     Year       Month     Day     Year       7     1     23       THROUGH     12     31     23					
11 ELECTION	ELECTION DA	TE Year Primary General	ELECTION TYPE Runoff Other Description Special			
12 OFFICE	OFFICE HELD (if any)	. , ,	13 OFFICE SOUGHT (if known	n)		
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.         COMMITTEE TYPE       COMMITTEE NAME					
Additional Pages	GENERAL COMMITTEE ADDRESS					
	SPECIFIC	COMMITTEE CAMPAIGN TRI	EASURER ADDRESS			
		GO TO	PAGE 2			

## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 2

15 C/OH NAME Annie Rebecca Elliott		16 Filer ID	(Ethics Commission Filers)			
17 CONTRIBUTION TOTALS	<ol> <li>TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</li> </ol>	\$	0.00			
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00			
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$	0.00			
	4. TOTAL POLITICAL EXPENDITURES	\$	0.00			
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	ST DAY \$	7,960.64			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	F THE \$	0.00			
Signature of Candidate or Officeholder Please complete either option below:						
(1) Affidavit	WY Cristina Medina My Commission Exp 04/02/2025 ID No. 126805840	Diros				
NOTARY STAMP/SEAL Sworn to and subscribed before me by <u>ANNE Rebecca Elliph</u> this the <u>3</u> day of <u>JM</u> , 20 <u>24</u> , to certify which, witness my hand and seal of office. <i>Medella Instrua</i> , <i>Meduna</i>						
Signature of officer administe	ring oath Printed name of officer administering oath	Tit	tle of officer administering oath			
(2) Unsworn Declaratio	OR ON					
My name is	, and my date of birth is					
My address is		,				
Executed in	(street) (city) (: County, State of, on theday of(month		20 (year).			

Signature of Candidate/Officeholder (Declarant)