CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction C	Guide explains how	to complete this form.	Filer ID (Ethics Commission Fiers) 2 Total pages filed:				
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR MR.	FIRST RICHAE	MI MI	OFFICE USE ONLY			
NAME	NICKNAME	DAVIS	SUFFIX	JUL 1 2 2024			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX	ر منطقان ا ا مع کا را	ZIP CODE	BR)			
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	200		Date Hand-delivered or Date Postmarked			
6 CAMPAIGN TREASURER NAME	MS/MRS/MR M.R. NICKNAME	B ₁ CC	MI. SUFFIX	Receipt # Amount \$ Date Processed			
	FE	HIMORORE	Date Imaged				
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE), APT / SUITE #. CITY, STATE; ZIP CODE LI 7113 N. R.H. TX 76180						
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (817) 247-345 0						
9 REPORT TYPE	January 15 30th day before election Runoff 15th day after campaign treasurer appointment (Officeholder Only) July 15 8th day before election Exceeded Modified Reporting Limit Final Report (Attach C/OH - FR)						
10 PERIOD COVERED	Month Day Year Month Day Year 01 01 2024 THROUGH 06 30 2024						
11 ELECTION	Month Day Year Primary Runoff Other Description General Special						
12 OFFICE	OFFICE HELD (if any) TRUSTRE PLACE V 13 OFFICE SOLIGHT (if known)						
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 CANDIDATES 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 TYPE COMMITTEE NAME						
Additional Pages	GENERAL	COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TRE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
		GO TO	PAGE 2				

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

16 C/OH NAME			16 Filer ID (Ethics Commission Filers)		
17 CONTRIBUTION TOTALS EXPENDITURE TOTALS	PLEDGES,	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		s O		
		LITICAL CONTRIBUTIONS AN PLEDGES, LOANS, OR GUARANTEES OF LOANS	s) \$	0		
	3. TOTAL UNIT	TEMIZED POLITICAL EXPENDITURE.	s	0		
	4. TOTAL POLITICAL EXPENDITURES			0		
CONTRIBUTION BALANCE		TICAL CONTRIBUTIONS MAINTAINED AS OF THE L	AST DAY \$	11.53		
OUTSTANDING LOAN TOTALS		ICIPAL AMOUNT OF ALL OUTSTANDING LOANS AS	OF THE \$	0		
		enalty of perjury, that the accompanying report is tr	ue and correct	and includes all information		
rec	uired to be reported by n	ne under Title 15, Election Code.				
- Richans Davis						
			Candidate or Of	es v spy		
		Ograda of C	arididate of O	morroider		
	r	Diagge complete either enties hale				
	r	Please complete either option belo	W:			
(1) Affidavit						
NOTARY STAMP/SEAL						
Sworn to and subscribed	before me by	this the	da da	y of,		
20, to certify	which, witness my hand a	and seal of office.				
Signature of officer administe	ing oath	Printed name of officer administering oath	Title	of officer administering oath		
	F21.243 0.19.53	OR				
(2) Unsworn Declaration	on					
My name is _ RICHA	LLD DAVIS	, and my date of birth i	8.2.	SC		
My address is				USA		
wy address is	(street)	(city)	/etate\ /zin.c	-10		
Executed in Tarra	(street)	of TRAS on the 12 th day of 30 th	(state) (zip o	code) (country)		
Executed in	County, State	of 1047 , on the 12 day of 300 (mon		(year)		
		1/ 11 : 1)	ain			
		Signature of Cano	lidate/Officehold	er (Declarant)		