CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction C	Guide explains how	to complete this form.	1 Filer ID (Ethics Comm	ission Filers)	2 Total pages file	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	12/2 V	1	OFFICE USE ONLY	
NAME	NICKNAME	LAST Pit	TANAN STATE; ZI	UFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX	: APT / SUITE #: (CITY; STATE; ZI VhartorTX	P CODE 7745	JAN 2 3 2024	
5 CANDIDATE/	AREA CODE	PHONE NUMBER	EXTENSION			
OFFICEHOLDER PHONE					Date Hand-delivered or Date Postmarked	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	A)	1	Receipt # Amount \$ Date Processed	
, <u>-</u>	NICKNAME	LAST	SU	JFFIX	Date Imaged	
		LINS			Date illaged	
7 CAMPAIGN	STREET ADDRESS	(NO PO BOX PLEASE); APT / S			STATE; ZIP CODE	
TREASURER ADDRESS			Wharter	1)	X 77488	
(Residence or Business)					(
8 CAMPAIGN	AREA CODE	PHONE NUMBER	EXTENSION			
TREASURER PHONE	()					
9 REPORT TYPE	January 15	30th day before e	election Runoff	alle et an helde et anne als trade als de serve	15th day after campaign treasurer appointment (Officeholder Only)	
	July 15	8th day before ele	ection Exceeded Reporting	d Modified J Limit	Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month 7	Day Year / 1 / 2023	THROUGH	Month 12	131 / 2023	
11 ELECTION	ELECTION DA	TE	ELE	CTION TYPE		
	Month Day	Year Primary		Other Description		
	/ /	General	Special			
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUG	HT (if known)	No. 6 Al larse	
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 TREASURER NAME					
		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	LARRY Pittman	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.	\$ 0				
	4. TOTAL POLITICAL EXPENDITURES	\$ 6				
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DOT REPORTING PERIOD	DAY \$ C				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	* <i>O</i>				
	swear, or affirm, under penalty of perjury, that the accompanying report is true a	nd correct and includes all information				
re	equired to be reported by me under Title 15, Election Code.	$\supset I$				
		440				
Signature of Candidate or Officeholder						
Please complete either option below:						
i lease complete ettrei option below.						
(1) Affidavit						
NOTARY STAMP/SEA	AL					
Sworn to and subscribed	d before me by this the	day of,				
20, to certif	y which, witness my hand and seal of office.					
Signature of officer administ	tering oath Printed name of officer administering oath	Title of officer administering oath				
	OR					
(2) Unsworn Declarat	ion					
My name is	and my date of birth is					
My address is _	whorter I	X. 17/148 Vj				
Executed in What	(street) (city) (state of Tank), on the Andrew day of Andrew (month)	(zip code) (country)				
	Signature of Candidate	Officeholder (Declarant)				
I		,				