#### CANDIDATE / OFFICEHOLDER FORM C/OH CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. MS / MRS (MR) FIRST MI 3 CANDIDATE / OFFICE USE ONLY **OFFICEHOLDER** 29 NAME Date Received Waller Co. Elections 4 CANDIDATE / JUL 2 2 2024 OFFICEHOLDER MAILING **ADDRESS** RECEIVED Change of Address 5 CANDIDATE/ Date Hand-delivered or Date Postmarked OFFICEHOLDER (281) PHONE Receipt # Amount \$ MS / MRS / MR 6 CAMPAIGN TREASURER Date Processed NAME NICKNAME Date Imaged STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; 7 CAMPAIGN TREASURER 4928 FM 359 **ADDRESS** (Residence or Business) AREA CODE PHONE NUMBER 8 CAMPAIGN EXTENSION TREASURER PHONE (281) 375-6583 9 REPORT TYPE 15th day after campaign treasurer appointment (Officeholder Only) July 15 8th day before election Exceeded Modified Final Report (Attach C/OH - FR) Reporting Limit 10 PERIOD COVERED THROUGH 11 ELECTION OFFICE HELD (if any) 12 OFFICE KONY 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. CANDIDATE'S AND OFFICEHOLDER'S ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. 14 NOTICE FROM **POLITICAL** COMMITTEE(S) COMMITTEE NAME COMMITTEE TYPE COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS **GO TO PAGE 2**

## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

15 C/OH NAME	16	Filer ID (Ethics Commission Filers)		
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	-\$ O		
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ - 0		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ _ ~ ~ -		
	4. TOTAL POLITICAL EXPENDITURES	<b>s</b>		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DOF REPORTING PERIOD	S - (3)		
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	#E \$		
	wear, or affirm, under penalty of perjury, that the accompanying report is true a quired to be reported by me under Title 15, Election Code.	nd correct and includes all information		
	Signature of Candi	date or Officeholder		
	Please complete either option below:			
н				
(1) Affidavit		4		
NOTARY STAMP/SEA	L			
Sworn to and subscribed		, day of,		
20, to certify which, witness my hand and seal of office.				
Signature of officer administe	rring oath Printed name of officer administering oath	Title of officer administering oath		
	UR			
(2) Unsworn Declarati	on			
My name is Le	e Jones, Jr and my date of birth is	4-19-1949.		
My address is P. O BOX 99 Patison 1x . 77466 Waller				
Executed in 10 a le r County, State of 1 2 1 3 , on the 20 day of Tuly 20 24.				
	Fee Jour, W.	(year)		
	Signature of Candidate	/Officeholder (Declarant)		

### SUBTOTALS - C/OH

#### FORM C/OH COVER SHEET PG 3

	IILLI I G S
19 FILER NAME  20 Filer ID (Ethics Con	nmission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$-0-
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. SCHEDULE E: LOANS	s /
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	s (
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

### MONETARY POLITICAL CONTRIBUTIONS

#### SCHEDULE A1

The	Instruction Guide explains how	to complete thi	s form.	1 Total pages Schedule A1:
FILER NAME		5-20		2 Files ID (Files Completes Files)
FILER NAME	Lee Jones	. Jr.		3 Filer ID (Ethics Commission Filers)
Date	5 Full name of contributor	out-of-state PA	C (fO#:)	7 Amount of contribution (\$)
	6 Contributor address;	City;	State; Zip Code	- 0-
Principal occur	pation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Date	Full name of contributor	out-of-state PA	C (ID#:)	Amount of contribution (\$)
	Contributor address;	City;	State; Zip Code	0.5
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	ctions)
Date	Full name of contributor	out-of-state PA	C (ID#:)	Amount of contribution (\$)
. %	Contributor address;	City;	State; Zip Code	
Principal occup	pation / Job title (See Instructions)	-	Employer (See Instruc	ctions)
Date	Full name of contributor	out-of-state PAG	C (10#	Amount of contribution (\$)
	Contributor address;	City;	State; Zip Code	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	ctions)
		4		
				\

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

#### SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

in the requested information is not applicable, bo not include this page in the report.				
Th	ne Instruction Guide explains how to complete this form	n.	1 Total pages Schede	ule A2:
2 FILER NAM	hee Jones, Jr	,	3 Filer ID (Ethics Co	mmission Filers)
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$	~ C
5 Date	6 Full name of contributor out-of-state PAC (ID#:  7 Contributor address; City; State;  cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Zip Code	8 Amount of Contribution \$  Check if travel outsider (FOR NON-JUDIC)	9 In-kind contribution   description
T Tillapar occ	aparion 7900 line (FOR NON-SODICIAE) (See Instructions)	II Employ	o, (1 or 11011-00010)	AL/(Oco mondono)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JU	DICIAL) (See Instructions)
14 Contributor's	s employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spou	se (if any) (FOR JUDICIAL)
16 if contributor	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor	Zip Code	Amount of Contribution \$	In-kind contribution description
Principal occ	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employ	er (FOR NON-JUDICI	
Contributor's	s principal occupation (FOR JUDICIAL)	Contrib	utor's job title (FOR JU	DICIAL) (See Instructions)
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED  If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.				



Filer name

(1) Affidavit

23

#### AFFIDAVIT FOR CANDIDATE OR OFFICEHOLDER: **ELECTRONIC FILING EXEMPTION**

An

Beginning on January 1, 20 \$32,810 in political contribu in any calendar year must f

	nust be submitted with each paper rep	Date Hand-deliv	rered or Date Postmarked	
itions or made more	e than \$32,810 in political expenditu eports electronically.	and the state of t	Amount \$	
		Date Processed		
es Tr	Filer ID #	Date Imaged	Date Imaged	

OFFICE USE ONLY

Date Received

- 1. I swear or affirm that I have not accepted more than \$32,810 in political contributions or made more than \$32,810 in political expenditures in a calendar year.
- 2. I further swear or affirm that I do not use computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- 3. I further swear or affirm that no person acting as my agent or consultant, and no person with whom I contract, uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- 4. I further swear or affirm that I understand that I am required to file my campaign finance reports electronically if I, my agent or consultant, or a person with whom I contract exceeds \$32,810 in political contributions or political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- 5. I am filing this affidavit with the 15th report due on Simi; Annual I understand that this affidavit is required to be filed with each campaign finance report for which I am claiming an exemption from electronic filing.

#### Please complete either option below:

JUr

(1) Alliagrit		
NOTARY STAMP/SEAL		Signature of Filer
Sworn to and subscribed before me by		the day of
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oat
(stre	et)	(state) 1746, 403/12V (cstate) (zip code) (country) (month) (year)
FILERS WHO ARE E	EXEMPT FROM THE ELECTRONIC FILING	

ARE STILL REQUIRED TO FILE CAMPAIGN FINANCE REPORTS ON PAPER