CAMPAIGN FINANCE REPORT					FORM C/OH COVER SHEET PG 1		
The C/OH Instruction Guide explains how to complete this form.			sion Filers)	2 Total pages filed:			
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST MI MM. Karla J.				OFFICE USE ONLY		
	NICKNAME	Cude	SUF	FIX	Date Received	占国而	
4 CANDIDATE/ OFFICEHOLDER MAILING ADDRESS		x 1686	79735	CODE	LIZ JAN	9 2024 L	
Change of Address					-	IRT, PECOS do., TEX	
5 CANDIDATE/ OFFICEHOLDER PHONE	(432)	290 - 455	extension 9		Date Hand-delivered	or Date Postmarked	
6 CAMPAIGN TREASURER NAME	MS/MRS/MR	Rhonde	a MI		Date Processed	Amount	
	NICKNAME	Gollihe	SUF	FIX -	Date Imaged		
7 CAMPAIGN TREASURER ADDRESS	500 U	(NO PO BOX PLEASE); APT / SU). Hornbec	h (Buse	nes	STATE;	ZIP CODE	
(Residence or Business)	tort.	stocklon, &	4 19735				
8 CAMPAIGN TREASURER PHONE	(432) 3	290-1945	EXTENSION				
9 REPORT TYPE	January 15	30th day before ele	ection Runoff		15th day after treasurer app (Officeholder	pointment	
	July 15	8th day before elec	tion Exceeded N		Final Report	(Attach C/OH - FR)	
10 PERIOD COVERED	Month Day Year Month Day Year 07 / 16 / 23 THROUGH 1 / 15 / 24						
11 ELECTION	ELECTION DATE ELECTION TYPE						
	Month Day Year Primary Runoff Other Description						
	/ /	General	Special				
12 OFFICE	Pecos Counter Vistrict Clerk						
14 NOTICE FROM POLITICAL COMMITTEE(S)	POLITICAL THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWL CONSENT. CANDIDATES AND OFFICEHOLDER'S ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SLICH EXPEN					ER'S KNOWLEDGE OR	
	COMMITTEE TYPE	COMMITTEE NAME					
Additional Pages	GENERAL	COMMITTEE ADDRESS					
	SPECIFIC	COMMITTEE CAMPAIGN TREA	SURER NAME			,	
		COMMITTEE CAMPAIGN TREA	ASURER ADDRESS	No.			
GO TO PAGE 2							

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME	Larla Cude	16 Filer ID (Ethics Commission Filers)					
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THE PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	» \$ O					
	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOAN	s) \$ D					
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$-0					
	4. TOTAL POLITICAL EXPENDITURES	\$ 0					
CONTRIBUTION BALANCE	of reporting period \$467.92						
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS LAST DAY OF THE REPORTING PERIOD	OF THE \$					
18 SIGNATURE I s	wear, or affirm, under penalty of perjury, that the accompanying report is t	rue and correct and includes all information					
required to be reported by me under Title 15, Election Code.							
	Kaila	ude.					
	Signature of	Candidate or Officeholder					
ř							
Please complete either option below:							
(1) Affidavit							
NOTARY STAMP/SEAL							
Sworn to and subscribed before me by this the day of,							
20, to certify which, witness my hand and seal of office.							
Signature of officer administer	ing oath Printed name of officer administering oath	Title of officer administering oath					
	OR						
(2) Unsworn Declaration	on						
My name is DARUH CUDE A, and my date of birth is 08/11/1964 My address is 5870 Frank Piccos Rd Fort Stochton TX 79735 U.S.A.							
Executed in Plan (street) (street) (country) Executed in Plan (street) (zip code) (country) Executed in Plan (street) (street) (and (country))							
Would (month) (year)							
Signature of Candidate/Officeholder (Declarant)							