CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT							FORM C/OH COVER SHEET PG 1			
	The C/OH Instruction C	Guide explains how	to comple	ete this form.	1 F	iler ID (Ethics	Commission Filers)	2 To	tal pages filed:	
3	CANDIDATE / OFFICEHOLDER	MS / MRS / MR	Liz	FIRST			MI		OFFICE USE ONLY	
	NAME	NICKNAME	CI	LAST hapman			SUFFIX	Date R	eceived	
4	CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX PO Box 787 Texas 7973	ς, ,	-	CITY;	STATE;			JAN 1 0 2024	
	Change of Address					***************************************		CLERK CO	LIZ CHAPMAN DUNTY COURT, PECOS CO., TEXA	
5	CANDIDATE/ OFFICEHOLDER PHONE	(432)		NUMBER -7679		EXTEN:	SION		and-delivered or Date Postmarked put	
6	CAMPAIGN TREASURER NAME	MS / MRS / MR		FIRST	***************************************	AAA	MI	Receipt	t# Amount \$	
		NICKNAME	Li	LAST			SUFFIX	Date Pr	rocessed	
		Chapman							Date Imaged	
	CAMPAIGN TREASURER ADDRESS	STREET ADDRESS 1506 N Peco	os	PLEASE); APT / S	SUITE #;	CIT	Υ;	Fort	state; zip code Stockton	
	Residence or Business)	AREA CODE			***************************************	EVERNO	NON	***************************************		
0	CAMPAIGN TREASURER PHONE	(432)		-7679		EXTENS	SION			
9	REPORT TYPE	January 15		30th day before e	election	Serrence and the server and the serv	unoff	Suppression of the same of the	15th day after campaign treasurer appointment (Officeholder Only)	
		July 15	L	8th day before ele	ection	8 2	ceeded Modified porting Limit		Final Report (Attach C/OH - FR)	
10	PERIOD COVERED	Month 7		Year 23	Т	HROUGH	Month 1	Day / 15		
11	ELECTION	ELECTION DA	TE		**************************************	TO THE	ELECTION TYPE			
		Month Day	Year	Primary General		Runoff	Other Description			
12	OFFICE	OFFICE HELD (if any) Pecos Cour		·k		13 OFFICE	SOUGHT (if known)		
14	NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MATTHE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE. CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THE							D OEEICEHOI DEBIS KNOW! EDGE OD	
	COMMITTEE(G)	COMMITTEE TYPE	COMMITTI	EE NAME						
	Additional Pages	GENERAL	COMMITTEE ADDRESS							
		SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME								
COMMITTEE CAMPAIGN TREASURER ADDRESS										
- Allerani	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)	\$	0								
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0								
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$	0								
	4. TOTAL POLITICAL EXPENDITURES	\$	0								
CONTRIBUTION BALANCE	1 D IOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY										
OUTSTANDING LOAN TOTALS	O. TOTAL FRINCIPAL AMOUNT OF ALL OUTSTANDING LUANS AS OF THE										
18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.											
	, , , , , , , , , , , , , , , , , , , ,										
	L'CL										
		apula									
	Signature of Can	didate or Officeho	older								
	Discos complete sith an aution hal										
Please complete either option below:											
(1) Affidavit											
(1) Amaavic											
NOTARY STAMP/SEAL											
NOTART STAME / SEAL											
Sworn to and subscribed b	efore me by this the _	day of									
			J.								
20, to certify w	hich, witness my hand and seal of office.										

Signature of officer administeri	ng oath Printed name of officer administering oath	Title of offi	cer administering oath								
	OR										
(2) Unsworn Declaration		. LEADING THE STREET STATES	A GOVERNMENT OF THE PARTY OF TH								
(2) Onoworn Decidiation	•										
_{My name is} Liz Chapma	and many data of binds in (08-08-1961									
My address is 1506 N Pe	ner	kas 79735	LICA.								
iviy address is	· · · · · · · · · · · · · · · · · · ·	1	, USA								
D		ate) (zip code)	(country)								
Executed in Pecos	County, State of Texas, on the 10th day of January	<u>/, 20</u> 24	•								
	(Arlopth)	Aman (year)								
		P	***************************************								
	Signature of Candida	te/Officeholder (De	eclarant)								