

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed:						
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Tom MI	<div style="border: 2px solid blue; padding: 10px; display: inline-block;"> <p style="margin: 0;">RECEIVED</p> <p style="margin: 5px 0 0 0;">Date Received OCT 4 2024</p> <p style="margin: 5px 0 0 0;">BY SOPHIA FRANCO ELECTIONS ADMINISTRATOR, PECOS COUNTY, TEXAS</p> <p style="margin: 5px 0 0 0;">Date Hand-delivered or Date Postmarked</p> <table border="1" style="width:100%; border-collapse: collapse; margin-bottom: 5px;"> <tr> <td style="padding: 2px;">Receipt #</td> <td style="padding: 2px;">Amount \$</td> </tr> <tr> <td colspan="2" style="padding: 2px;">Date Processed</td> </tr> <tr> <td colspan="2" style="padding: 2px;">Date Imaged</td> </tr> </table> </div>		Receipt #	Amount \$	Date Processed		Date Imaged	
	Receipt #			Amount \$					
Date Processed									
Date Imaged									
NICKNAME LAST Chapman SUFFIX									
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 787 Fort Stockton Tx 79735								
Change of Address									
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (432) 290-9094								
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST Tom MI								
	NICKNAME LAST Chapman SUFFIX								
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE PO Box 787 Fort Stockton Tx 79735								
(Residence or Business)									
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (432) 290-9094								
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)								
10 PERIOD COVERED	Month Day Year 07 / 15 / 24 THROUGH Month Day Year 10 / 05 / 24								
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description 11 / 05 / 24 <input checked="" type="checkbox"/> General <input type="checkbox"/> Special								
12 OFFICE	OFFICE HELD (if any) County Commissioner Pct 1								
	13 OFFICE SOUGHT (if known) County Commissioner Pct. 1								
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.								
Additional Pages	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;"><input type="checkbox"/> GENERAL</td> <td style="padding: 2px;">COMMITTEE NAME</td> </tr> <tr> <td style="padding: 2px;"><input type="checkbox"/> SPECIFIC</td> <td style="padding: 2px;">COMMITTEE ADDRESS</td> </tr> <tr> <td></td> <td style="padding: 2px;">COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td style="padding: 2px;">COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>	<input type="checkbox"/> GENERAL	COMMITTEE NAME	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS		COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS
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<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS								
	COMMITTEE CAMPAIGN TREASURER NAME								
	COMMITTEE CAMPAIGN TREASURER ADDRESS								

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	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

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.


Signature of Candidate or Officeholder

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 administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Tom Chapman, and my date of birth is _____.

My address is PO Box 787, Fort Stockton, Tx, 79735, Pecos.
(street) (city) (state) (zip code) (country)

Executed in Pecos County, State of Texas, on the 4th day of October, 2024.
(month) (year)


Signature of Candidate/Officeholder (Declarant)