

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form. 1. Form ID: ETH-11-15-2022-01 2. Total pages: 12

3 CANDIDATE / OFFICEHOLDER NAME		MS MRS MP Mr	FIRST Kent	SUFFIX M	OFFICE USE ONLY											
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS		ADDRESS PO Box 1666	CITY Dalhart	STATE TX	ZIP CODE 79022	Data Received <i>McLean / [Signature]</i>										
5 CANDIDATE / OFFICEHOLDER PHONE		AREA CODE (806)	PHONE NUMBER 683-8824	EXTENSION	Data Hand-Delivered / Postmarked											
6 CAMPAIGN TREASURER NAME		MS MRS MR Mr	FIRST Kent	SUFFIX M	Receipt #											
7 CAMPAIGN TREASURER ADDRESS		STREET ADDRESS 12060 US Highway 87		CITY Dalhart	STATE TX	ZIP CODE 79022	Date Processed									
8 CAMPAIGN TREASURER PHONE		AREA CODE (806)	PHONE NUMBER 683-8824	EXTENSION	Date Imaged											
9 REPORT TYPE		<input checked="" type="checkbox"/> January 15 <input 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"/> 3th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report Attach C/OH-FR														
10 PERIOD COVERED		Month 12	Day 03	Year 2023	THROUGH	Month 1	Day 15	Year 2024								
11 ELECTION		ELECTION DATE Month Day Year 3 05 2024		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special												
12 OFFICE		OFFICE HELD (if any)		13 OFFICE SOUGHT (if known) Precinct 1 Commissioner												
14 NOTICE FROM POLITICAL COMMITTEE(S)		<p>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.</p> <table border="1"> <tr> <td rowspan="4"> <input type="checkbox"/> Additional Pages <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC </td> <td>COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td></td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td></td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>						<input type="checkbox"/> Additional Pages <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME		COMMITTEE ADDRESS		COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS
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**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

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

15 C/OH NAME Kent Gordon 16 Filing Period: _____

17 CONTRIBUTION TOTALS	1	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	\$ 1,524 ³⁴
	4	TOTAL POLITICAL EXPENDITURES	\$ 1,524 ³⁴
CONTRIBUTION BALANCE	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$
OUTSTANDING LOAN TOTALS	6	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

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 Kent Michael Gordon, and my date of birth is 01-25-1983
 My address is 12060 US Highway 87, Dalhart, TX, 79022, USA
(street) (city) (state) (zip code) (country)
 Executed in Hartley County, State of Texas on the 15 day of January, 2024.
(month) (year)

 Signature of Candidate/Officeholder (Declarant)