CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT				ORM C/OH HEET 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	MS / MRS / MR RANDY	MI	OFFICE USE ONLY		
NAME	NICKNAME LAST HARRIS	SUFFIX	Date Received		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX: APT / SUITE #: C PO BOX 166 2 SAN AND GELD, TX 76	STATE; ZIP CODE		JUL 31 2025 PW3	1:23
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (375) 315-4209	EXTENSION	Date Hand-delivered or Date Postmarked		
6 CAMPAIGN TREASURER	MS / MRS / MR FIRST	МІ	Receipt #	Amount \$	
NAME	NICKNAME LAST	SUFFIX	Date Processed		
	FRANKLIN		Date Imaged		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SL 321 S. VAJ BURGN 5AN ANGELO, TX		STATE;	ZIP CODE	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (335) 262-04	EXTENSION			
9 REPORT TYPE	July 15 30th day before elections and state of the state		treasurer ap (Officeholde		
10 PERIOD COVERED	Month Day Year 01 /13 / 2025	Reporting Limit Month	Day Year / 30 / 20		
11 ELECTION	ELECTION DATE Month Day Year Primary General	Runoff Cher Description Special			
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known		46 PT4	
14 NOTICE FROM POLITICAL COMMITTEE(S)	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	COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS				
	SPECIFIC COMMITTEE CAMPAIGN TREA	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME			
	OMMITTEE CAMPAIGN TRE	EASURER 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)	\$			
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$			
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$			
	4. TOTAL POLITICAL EXPENDITURES	\$			
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	ST DAY \$			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	F 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.					
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 administe	ring oath Printed name of officer administering oath	Title of officer administering oath			
OR					
(2) Unsworn Declaration					
My name is RANDY HARRIS, and my date of birth is 8/39/1958					
My address is	BOX 1662 5AN ANGRO -	1K 76902 US			
Executed in Tom GR		state) (zip code) (country) 1027, 2025. (year)			
	Signature of Candi	date/Officeholder (Declarant)			
		,			