## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction Gu  3 CANDIDATE / OFFICEHOLDER	uide explains how t	o complete this form.	1 Filer I	D (Ethics Comi	mission Filers)	2 Tot	al pages file	<sup>d:</sup> 2	
OFFICEHOLDER	MS / MPS / MP				1			_	
	MRS	FIRST MI STACYE W			OFFICE USE ONLY				
NAME .	NICKNAME	SPECK			SUFFIX	Date Re	eceived		
ADDRESS	ADDRESS / PO BOX; 3494 BUCK I SAN ANGEL		CITY;	STATE; 2	ZIP CODE		ૂર્ક	M 16 2024 aml	
Change of Address									
5 CANDIDATE/ OFFICEHOLDER PHONE	( 325 )	716-5999		EXTENSION				or Date Postmarked	
6 CAMPAIGN TREASURER	MS / MRS / MR	FIRST PAMELA		ı	иі	Receipt		Amount \$	
NAME							ocessed		
	PAM	JONES SUFFIX					Date Imaged		
ADDRESS	STREET ADDRESS (F 6548 JOHN C CHRISTOVAL	URRY ROAD	/ SUITE #;	CITY;			STATE;	ZIP CODE	
8 CAMPAIGN TREASURER PHONE	AREA CODE ( 325 )	9HONE NUMBER 374-1520		EXTENSION					
9 REPORT TYPE	January 15	re election	ection Runoff			15th day afte treasurer app (Officeholder	pointment		
	July 15	8th day before	election	Exceed Reporti	ed Modified ng Limit		Final Report	(Attach C/OH - FR)	
10 PERIOD COVERED	Month 7	Day Year  1 / 23	THRO	ough	Month 12	Day  / 31	Year 23		
11 ELECTION	ELECTION DATE ELECTION TYPE								
	Month Day	Year Prima		noff	Other Description				
	/ /								
12 OFFICE	OFFICE HELD (if any)  JUSTICE OF THE PEACE PRECINCT 3								
POLITICAL	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.								
COMMITTEE(S)	COMMITTEE TYPE   COMMITTEE NAME								
Additional Pages	GENERAL COMMITTEE ADDRESS								
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME								
	COMMITTEE CAMPAIGN TREASURER ADDRESS								

## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 2

15 C/OH NAME STACYE W SPECK				16 Filer ID	(Ethics Commission Filers)					
17 CONTRIBUTION TOTALS	1. TOTAL UNITED PLEDGES, LO CONTRIBUTIO		\$							
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR G	UTIONS S, OR GUARANTEES OF LOANS)		\$					
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.									
	4. TOTAL POLITICAL EXPENDITURES									
CONTRIBUTION BALANCE	5. TOTAL POLITIC		INTAINED AS OF THE LAS	T DAY \$	1,593.22					
OUTSTANDING LOAN TOTALS		PAL AMOUNT OF ALL OU THE REPORTING PERIOD	rstanding Loans as of )	THE \$						
	wear, or affirm, under pena uired to be reported by me			and correct	t and includes all information					
Signature of Candidate or Officeholder  Please complete either option below:										
(1) Affidavit										
NOTARY STAMP/SEAL										
Sworn to and subscribed	before me by		this the	d	ay of,					
20, to certify	which, witness my hand and	seal of office.								
Signature of officer administer	ing oath Pr	inted name of officer admin	stering oath	Titl	e of officer administering oath					
		OR								
(2) Unsworn Declaration	on									
My name is	Me W Spick	,	, and my date of birth is	0310	5 1973					
My address is 340	14 Buck Ru	n	San Angelo, I	X. 76	5/1973 401, TomGreen					
Executed in Tonu G	(street)  (Street)  (County, State of	TXUS, on the	(city) (s	tate) (zip	code) (country) 20 <u>タイ</u> (year)					