CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how	to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	Michelle Matus	MI SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; 2409 G	· · ·	TY; STATE; ZIP CODE SE BEEVILLE, TX78102	FEB 5 2024 BY:	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (341) Z	phone number 819-6128	EXTENSION	Date Hand-delivered or Date Postmarked Receipt # Amount \$	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	LAST		Date Processed	
		Sylva		Date Imaged	
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (2548	NO PO BOX PLEASE); APT / SU Orange U	n. Beeville	TX 78102	
(Residence or Business) 8 CAMPAIGN TREASURER PHONE	AREA CODE (301) 3	PHONE NUMBER	EXTENSION		
9 REPORT TYPE	January 15	30th day before el	ection Runoff	15th day after campaign treasurer appointment (Officeholder Only)	
	July 15	8th day before elec	tion Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month	Day Year		Day Year / 25 / 2024	
11 ELECTION	ELECTION DA	TE Year Primary	ELECTION TYPE		
	3/5/		Special		
12 OFFICE	OFFICE HELD (if any) Beeco Ta	Collect *Assessor	tor 13 OFFICE SOUGHT (if known Ree County TC	ix Assessor Collect	
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.				
	COMMITTEE TYPE	COMMITTEE NAME			
Additional Pages		COMMITTEE ADDRESS	SURER NAME		
		COMMITTEE CAMPAIGN TRE	ASURER ADDRESS		
GO TO PAGE 2					

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

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	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 75.00				
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 75.00				
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$				
	4. TOTAL POLITICAL EXPENDITURES	\$				
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST I OF REPORTING PERIOD	DAY \$				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T LAST DAY OF THE REPORTING PERIOD	^{HE} \$				
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 Cand	idate 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 <u>Michelle Matus</u> , and my date of birth is <u>12.1980</u> . My address is <u>2609 Quarterhorse</u> , <u>Beeville</u> , <u>Tx</u> , <u>79/02</u> . (street) (city) (state) (zip code) (country) Executed in <u>Bee</u> county, State of <u>Tx</u> , on the <u>5</u> day of <u>Feb</u> , 2024.						
Signature of Candidate/Officeholder (Declarant)						