CANDIDAT	FORM C/OH COVER SHEET PG 1			
The C/OH Instruction G	Guide explains how to complete this form.  1 Filer ID (Ethics Commission Filers)	2 Total pages filed:		
3 CANDIDATE / OFFICEHOLDER NAME	NICKNAME LAST HULLANDON SUFFIX	OFFICE USE ONLY  Date NO. 10-10-10-10-10-10-10-10-10-10-10-10-10-1		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX: APT / SUITE #: CITY; STATE: ZIP CODE	JUL 15 2024 SANDRA KNIGHT County Clerk, Carrie County, Texas		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION  (903) 767-2300	Date Hand-delivered or Date Postmarked  Receipt #   Amount \$		
6 CAMPAIGN TREASURER NAME	MS MRS DIR FIRST MI MISSY MICKNAME SUFFIX	Date Processed  Date Imaged		
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #; CITY;	STATE; ZIP CODE		
(Residence or Business)	1642 CR 2331 P. HSDUM TX 7568	$\wp$		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER JEXTENSION $(903)$ $767-2300$			
9 REPORT TYPE	January 15 30th day before election Runoff    July 15 8th day before election Exceeded Modified	15th day after campaign treasurer appointment (Officeholder Only)  Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year Month  THROUGH			
11 ELECTION	BLECTION DATE  Month Day Year Primary Runoff Other Description  General Special			
12 OFFICE	OFFICE HELD (if any)  TAX ASSESSE COLLECTOR  13 OFFICE SOUGHT (if known)			
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 OF CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES  COMMITTEE TYPE COMMITTEE NAME			
Additional Pages	GENERAL COMMITTEE ADDRESS			
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME			
	COMMITTEE CAMPAIGN TREASURER ADDRESS			
GO TO PAGE 2				

**CANDIDATE / OFFICEHOLDER** 

## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 2

15 C/OH NAME	Missy Huff	man	16 Filer ID (Ethics Commission Filers)		
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICATION PLEDGES, LOANS, OR GUAR CONTRIBUTIONS MADE ELECTRICATION FOR THE PROPERTY OF		s D		
	2. TOTAL POLITICAL CONTRI (OTHER THAN PLEDGES, LOA	BUTIONS NS, OR GUARANTEES OF LOANS	\$ 0		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.		\$ 0		
	4. TOTAL POLITICAL EXPEND	ITURES	\$ 0		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTOR REPORTING PERIOD	TIONS MAINTAINED AS OF THE LA	AST DAY \$		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT O LAST DAY OF THE REPORTIN	F ALL OUTSTANDING LOANS AS ( G PERIOD	S \$		
	swear, or affirm, under penalty of perjury, t quired to be reported by me under Title 15, E		ue and correct and includes all information		
Signature of Candidate of Officeholder					
(1) Affidavit	AT OF CAMES COUNTY	olete either option belo	w:		
Sworn to and subscribed	before me by Massy Hu	Aman this the	e 15th day of July,		
Dand			County Clerk		
Signature of officer administ	ering oath Printed name of of	ficer administering oath	Aftie of officer administering oath		
(2) Unsworn Declarat	ion	OR			
My name is		, and my date of birth	is		
	(street)	(city)	(state) (zip code) (country)		
Executed in	County, State of	on theday of(mor	nth) , 20 (year) .		
		Signature of Can	didate/Officeholder (Declarant)		