CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT					FORM C/OH COVER SHEET 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	Richard				OFFICE USE ONLY	
NAME	NICKNAME	Penn	•••••••••••••••••••••••••••••••••••••••	SUFFIX	FILED FOI at 21.250	R RECORD	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX	4323 P. H.	CITY; STATE			1 6 2024 AKMIGHT	
Change of Address	AREA CODE		<del></del>	75686	County Clerk, §	County, Texas	
5 CANDIDATE/ OFFICEHOLDER PHONE	(903)	767 289	EXTEN	ISION	DaRYHand dalive	- Postmarked	
6 CAMPAIGN TREASURER	MS / MRS / MR	FIRST Richard		MI	Receipt #	Amount \$	
NAME	NICKNAME	LAST	•••••	SUFFIX	Date Processed		
		Penn		ā	Date Imaged		
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS	NO PO BOX PLEASE); APT / S	SUITE #; CIT	·Y;	STATE;	ZIP CODE	
(Residence or Business)	938 CR	4323 PiHsb	ur Tx	7568	6		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTEN	SION			
	(403)	767 289	0				
9 REPORT TYPE	January 15	30th day before e	election	unoff	15th day af treasurer ap (Officeholde		
	July 15	8th day before ele	SCHOIL I	xceeded Modified eporting Limit	Final Repor	t (Attach C/OH - FR)	
10 PERIOD COVERED	Month Day Year Month Day Year						
	07 /	16/2023	THROUGH	01/	19 /20:	24	
11 ELECTION	ELECTION DA	TE Primary	Runoff	ELECTION TYPE			
<b>=</b> ?*	Month Day	rear	Special	Other Description			
	03/05/	7024	Opecial				
12 OFFICE	OFFICE HELD (if any)	ratio Reserve	13 OFFICE	SOUGHT (if known			
	Justice	· · · · · · · · · · · · · · · · · · ·			he leac		
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	Additional Pages  SPECIFIC  COMMITTEE ADDRESS  COMMITTEE CAMPAIGN TREASURER NAME						
		COMMITTEE CAMPAIGN TR	EASURER ADDRESS				
GO TO PAGE 2							

## **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT**

## FORM C/OH COVER SHEET PG 2

15 C/OH NAME	, 5	16 Filer ID (Ethics Commission Filers)					
Richa	ird Penn						
17 CONTRIBUTION 1 TOTALS		\$ -0-					
2.	. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ -0-					
EXPENDITURE TOTALS 3	. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ -0-					
4.	. TOTAL POLITICAL EXPENDITURES	\$ -0.					
CONTRIBUTION 5.	. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	ST DAY \$ -0 -					
OUTSTANDING 6.	. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	* 750.00					
18 SIGNATURE I swear,	or affirm, under penalty of perjury, that the accompanying report is true	e and correct and includes all information					
required to be reported by me under Title 15, Election Code.							
	, , , , , , , , , , , , , , , , , , , ,						
	T his days	) \					
	Signature of Ca	indidate or Officeholder					
	<b>5</b> 1 14 141 41 1						
Please complete either option below:							
FIRT OF CAME							
(1) Affidavit							
(1) Allimavit 83: ZB							
NOTARY STAMMASEAL.							
Truis III							
Sworn to and subscribed by Kuhard Tenn this the 16th day of January.							
20 24 , td certify which	n, witness my hand and seal of office.	0 1					
×	La At Source William	Court M.					
Signature of officer administering or	THE PRINCE OF TH	Title office addicated as all					
organization of officer authinistering of	J	Title <b>Ø</b> officer administering oath					
	OR						
(2) Unsworn Declaration							
My name is	, and my date of birth is	·					
My address is		, , , ,					
-		state) (zip code) (country)					
Executed in		20					
Executed in	County, State of, on theday of (month	n) (year)					
	<u></u>	·					
	Signature of Candid	date/Officeholder (Declarant)					