## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	1 Filer II	D (Ethics Cor	mmission Filers)	2 Total pages filed: 2			
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST  Mrs. Stephnie		MI G			OFFICE USE ONLY	
NAME	NICKNAME	LAST <b>Menke</b>			SUFFIX	Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; 15460 Indian	APT / SUITE #: Hill Rd.	CITY; Amarillo	STATE;	79124	JAN 2025 M	02155
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (806 )	PHONE NUMBER 681-7598		EXTENSIO	N	Date Hand-delivered	or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr. NICKNAME Michael	FIRST George LAST Menke		v 11. 12. 17. 17. 17. 17. 17. 17. 17. 17. 17. 17	M M SUFFIX	Date Processed  Date Imaged	Amount
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (N	,	SUITE #;	CITY, Amari	illo	STATE;	ZIP CODE 79124
8 CAMPAIGN TREASURER PHONE	AREA CODE ( 806 )	PHONE NUMBER 681-7355		EXTENSIC	DN		
9 REPORT TYPE	January 15  30th day before election  Runoff  15th day after campaign treasurer appointment (Officeholder Only)  July 15  8th day before election  Exceeded Modified Reporting Limit  Final Report (Attach C/OH - FR)						appointment er Only)
10 PERIOD COVERED	Month 7	Day Year / 15 / 24	THR	OUGH	Month 12	Day Yes	
11 ELECTION	ELECTION DATE  Month Day Year Primary Runoff Other Description  General Special						
12 OFFICE	OFFICE HELD (if any)  District Clerk  13 OFFICE SOUGHT (if known)						
14 NOTICE FROM POLITICAL COMMITTEE(S)  Additional Pages	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  COMMITTEE ADDRESS						
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME  COMMITTEE CAMPAIGN TREASURER ADDRESS					
GO TO PAGE 2							

## FORM C/OH CANDIDATE / OFFICEHOLDER **COVER SHEET PG 2 CAMPAIGN FINANCE REPORT** 16 Filer ID (Ethics Commission Filers) 15 C/OH NAME Stephnie G. Menke TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN 17 CONTRIBUTION \$ PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR **TOTALS** CONTRIBUTIONS MADE ELECTRONICALLY) TOTAL POLITICAL CONTRIBUTIONS 2. \$ (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **EXPENDITURE** TOTAL UNITEMIZED POLITICAL EXPENDITURE. \$ **TOTALS** TOTAL POLITICAL EXPENDITURES \$ CONTRIBUTION TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY 1,628.82 \$ 5. BALANCE OF REPORTING PERIOD TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE OUTSTANDING \$ LAST DAY OF THE REPORTING PERIOD LOAN TOTALS I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information **18 SIGNATURE** 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 \_\_ this the \_\_\_ Sworn to and subscribed before me by \_\_\_\_\_ \_\_, to certify which, witness my hand and seal of office. Title of officer administering oath Printed name of officer administering oath Signature of officer administering oath (2) Unsworn Declaration 09/13/1960 Stephnie G. Menke and my date of birth is My name is \_ 79124 Potter Amarillo TX 15460 Indian Hill Rd. My address is \_ (state) (zip code) (country) (city) (street)

Potter

Executed in

, on the

Texas

County, State of

3rd

day of

<sub>20</sub> 25

(year)

January

Signature of Candidate/Officeholder (Declarant)

(month)