CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how t	to complete this form.	1 Filer ID (Ethics	s Commission Filers)	2 Total pages filed: 2				
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR Mrs.	FIRST Stephnie		мі G	OFFICE USE ONLY				
NAME	NICKNAME	LAST Menke		SUFFIX	Date Received				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE #; Hill Rd.	city; state Amarillo TX		0,4				
Change of Address		DUONE NUMBER	EXTEN	ICION					
5 CANDIDATE/ OFFICEHOLDER PHONE	(806)	PHONE NUMBER 681-7598	EXTEN	ISION	Date Hand-delivered or Date Postmarked Receipt # Amount \$				
6 CAMPAIGN TREASURER	Ms/MRs/MR Mr.	George		мі М	Date Processed				
NAME	NICKNAME	LAST	*******	SUFFIX					
	Michael	Menke			Date Imaged				
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT /	SUITE #; CI	TY:	STATE; ZIP CODE				
TREASURER ADDRESS	15460 Indian	Hill Rd.	Am	arillo	TX 79124				
(Residence or Business)									
8 CAMPAIGN TREASURER PHONE	(806)	PHONE NUMBER 681-7355	EXTEN	ISION					
9 REPORT TYPE	January 15 30th day before election Runoff 15th day after campaign treasurer appointment (Officeholder Only)								
	July 15	8th day before e	HECHOIT	exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)				
10 PERIOD	Month	Day Year		Month	Day Year				
COVERED	1 /	/ 1 / 24	THROUGH	7	/ 15 / 24				
11 ELECTION	ELECTION DATE ELECTION TYPE								
	Month Day	Year Primar	y Runoff	Other					
	, and the state of	Genera	al Special	Description					
		/ General	opociai						
12 OFFICE	OFFICE HELD (if any) 13 OFFICE SOUGHT (if known)								
	District Clerk								
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 OFFICEHOLDER'S 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									
		GOIC	FAGE 4						

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Stephnie G. Menke		16 Filer ID	D (Ethics Commission Filers)					
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$					
Descript South Augustinas - Dios - second	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$					
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.		\$					
	4. TOTAL POLITICAL EXPENDITURES		\$					
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	ST DAY	\$ 1,628.82	2				
OUTSTANDING LOAN TOTALS	 TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS O LAST DAY OF THE REPORTING PERIOD 	F THE	\$					
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 Candidate or Officeholder								
Please complete either option below:								
(1) Affidavit								
NOTARY STAMP/SEA	L							
Sworn to and subscribed		day of	_					
20, to certify	which, witness my hand and seal of office.							
Signature of officer administ	ering oath Printed name of officer administering oath		Title of officer administering o	ath				
(0) Ungaran Davis	OR OR	100	- 4 3 - 5 - 5					
(2) Unsworn Declarat		00	14214060					
AFAC	Stephnie G. Menke and my date of birth is Amarillo		/13/1960 79124 Potter	_				
My address is1546			zip code) (country)					
Executed in Potter	County, State ofTexas, on the15th _day ofJuly(mont	Perle	_, 20_24 (year)					
	Signature of Card	idate/Office	molder (Decidiant)					