CANDIDAT CAMPAIGI	FORM C/OH COVER SHEET PG 1						
The C/OH Instruction G	2 Total pages filed: 2						
3 CANDIDATE/ OFFICEHOLDER NAME	MS / MRS / MR MS.	FIRST <b>Tracie</b>	мі <b>J</b>	OFFICE USE ONLY  Date_Received			
	NICKNAME LAST SUFFIX Pippin			DECEIVE			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	100 N. Main	St., Ste. 310, Ja	JULY 3 2023				
5 CANDIDATE/	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked			
OFFICEHOLDER PHONE	(940 )	567-2141		Receipt #   Amount \$			
6 CAMPAIGN	MS / MRS / MR	FIRST	MI	Receipt # Amount \$			
TREASURER NAME	Ms.	Tracie	Date Processed				
	NICKNAME	Pippin	SUFFIX	Date Imaged			
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (I	St., Ste. 310	uite #; city;  Jacksboro	STATE; ZIP CODE  TX 76458			
(Residence or Business)	The state of the s						
8 CAMPAIGN TREASURER PHONE	( 940 )	567-2141	EXTENSION				
9 REPORT TYPE	January 15	30th day before e	election Runoff	15th day after campaign treasurer appointment (Officeholder Only)			
	July 15	8th day before ele	ection Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)			
10 PERIOD COVERED	Month 1	Day Year  / 1 / 23	THROUGH 6				
11 ELECTION	ELECTION DA		ELECTION TYPE				
	Month Day 11 / 8	Year Primary  22 General	Runoff Other Description Special				
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if know	n)			
	District Cle	rk		x 4			
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	GENERAL	GENERAL COMMITTEE ADDRESS					
	SPECIFIC	SPECIFIC 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 Tracie J. Pippin	<b>16</b> F	iler ID (Ethi	cs Commission Filers)		
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	1.00		
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	1.00		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$	0.00		
	4. TOTAL POLITICAL EXPENDITURES	\$	0.00		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DA OF REPORTING PERIOD	* \$	1,019.15		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00		
18 SIGNATURE   I s	wear, or affirm, under penalty of perjury, that the accompanying report is true and	correct an	d includes all information		
	quired to be reported by me under Title 15, Election Code.		-		
	1				
	Maria X	11.1			
	Succe (Ty	yun	/		
	Signature of Candida	ite or Office	eholder		
		Proposition and Proposition an	makendeny també na okony manahaka kan konstruit nyaén ni ni tanbangan nagan ning sangan		
			ECEIVE		
	Please complete either option below:		Control II V Control		
			JUL 3 2023		
			002 0 2020		
(1) Affidavit		In Pr	AND A STATE OF MACHINERY AND THROUGH THE CONTROL OF THE AND A STATE OF		
(1)7			J //		
		L	BET ARTHUR THE PRODUCT OF THE PRODUC		
NOTARY STAMP/SEA	L				
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 administr	ering oath Printed name of officer administering oath	Title of	officer administering oath		
	OR	Marie State			
(O) II Proposition of					
(2) Unsworn Declarat					
My name isTracie	J. Pippin, and my date of birth is0	8/09/19	63		
My address is 100 N.	Main St., Ste. 310 Jacksboro TX	76458	B USA		
iviy addiess is	(street) (city) (state	) (zip cod	de) (country)		
Executed in Jack	County State of Texas on the 3rd day of July	, 202			
(month) (year)					
	Saul Jup	1			
	Signature of Candidate	Officeholder	(Declarant)		