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 NAME	MS / MRS / MR FIRST MI OFFICE USE ONLY Mrs. Amy D					
	NICKNAME LAST SUFFIX Salazar					
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2077 Shawver Road Perrin, Texas 76486					
	AREA CODE PHONE NUMBER EXTENSION Date Hand delivered on Parts Postmarked					
5 CANDIDATE/ OFFICEHOLDER PHONE	(940) 452-6978 Receipt # Amount \$					
6 CAMPAIGN	MS / MRS / MR FIRST MI					
TREASURER	Mrs. Amy D Date Processed 1 10 100					
NAME	NICKNAME LAST SUFFIX					
	Salazar Date Imaged 1-10-2029					
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2077 Shawver Road Perrin, Texas 76486					
8 CAMPAIGN	AREA CODE PHONE NUMBER EXTENSION					
TREASURER	ANCH CODE THOSE TO MAKE TO MAK					
PHONE	(940) 452-6978					
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 Report (Attach C/OH - FR) Reporting Limit					
10 PERIOD	Month Day Year Month Day Year					
COVERED	1 / 1 / 25 THROUGH 6 / 30 / 25					
11 ELECTION	ELECTION DATE ELECTION TYPE					
	Month Day Year Primary Runoff Other Description					
	General Special					
	OFFICE HELD (if any) 13 OFFICE SOUGHT (if known)					
12 OFFICE	The state of the s					
	County Commissioner					
14 NOTICE FROM POLITICAL	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(S)	COMMITTEE TYPE COMMITTEE NAME					
Additional Pages	GENERAL COMMITTEE ADDRESS					
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME					
	COMMITTEE CAMPAIGN TREASURER ADDRESS					
GO TO PAGE 2						

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FORM C/OH **COVER SHEET PG 2**

15 C/OH NAME		16	Filer ID (Ethics C	Commission Filers)
17 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
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 OF REPORTING PERIOD	DAY \$	0.00
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T LAST DAY OF THE REPORTING PERIOD	HE \$	0.00

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	JUL 1 0 2025
Sworn to and subscribed before me by	this the day of,
20, to certify which, witness my hand and seal of office.	East production of the control of th
Signature of officer administering oath Printed name of officer adminis	tering oath Title of officer administering oath
OR	
(2) Unsworn Declaration	
My address is 2077 Shawver Road (street)	and my date of birth is 4-28-69 Perrin , Tx , 76486 US (city) (state) (zip code) (country) 30 day of 50 Ne , 20 25 (year) Signature of Candidate/Officeholder (Declarant)