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	TERRY	,	∑ MI		USEONLY
	NICKNAME	WARD		SUFFIX	Date Received	CEIV
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS		NDERSON PORO, TX	eb	7458		JUL 1 4 202
Change of Address						
5 CANDIDATE/ OFFICEHOLDER PHONE	(940)	507 - 023	EX	CTENSION	len un para section santing	d or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS / MRS /MR	A M &		MI	Receipt #	Amount \$
	NICKNAME LAST SUFFIX			SUFFIX	Date Imaged	
					The second secon	
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE				ZIP CODE	
(Residence or Business)						
8 CAMPAIGN TREASURER PHONE	AREA CODE	5AME	EX	TENSION		
9 REPORT TYPE	January 15	30th day before e	lection	Runoff		fter campaign ppointment er Only)
	July 15	8th day before ele	ction	Exceeded Modified Reporting Limit	Final Repo	rt (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year Month Day Year Old / D.L / 25 THROUGH 06 1 30 / 25					
11 ELECTION	ELECTION DATE ELECTION TYPE					
	Month Day	Year Primary General	Runoff	Other Description		
		J General	Special			
12 OFFICE	COMMISSI		13 or	FICE SOUGHT (If known	ER PCT	- # 4
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: KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDER'S 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 TRE	ASURER NAME			
		COMMITTEE CAMPAIGN TRE	EASURER ADDRE	ESS		
GO TO PAGE 2						

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME		16 Filer ID (Ethics Commission Filers)				
TOTALS PLEDGES, LOA	MIZED POLITICAL CONTRIBUTIONS (OTHER THAN ANS, OR GUARANTEES OF LOANS, OR NS MADE ELECTRONICALLY)	\$				
	ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$				
EXPENDITURE 3. TOTAL UNITEM	IZED POLITICAL EXPENDITURE.	\$				
4. TOTAL POLITI	CAL EXPENDITURES	\$				
CONTRIBUTION BALANCE 5. TOTAL POLITIC OF REPORTING	AL CONTRIBUTIONS MAINTAINED AS OF THE LAS	ST DAY \$				
	AL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE REPORTING PERIOD	* *				
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						
Ple	ase complete either option below	JUL 1 4 2025				
NOTARY STAMP/SEAL		7				
Sworn to and subscribed before me by	, day of,					
20, to certify which, witness my hand and seal of office.						
Signature of officer administering oath Print	nted name of officer administering oath	Title of officer administering oath				
	OR	T.M. MALLA				
(2) Unsworn Declaration						
My name is TERRY WARD My address is 201 HENDERSON	, and my date of birth is	01/26/64 TX 76458 JACK				
Executed in						