## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how to	complete t	his form.	1 Filer ID	(Ethics Comm	ission Filers)	2 Total pag	ges filed	l:	
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRS			M F	)	OFI	FICEU	ISE ONLY	
NAME	NICKNAME	LAS				UFFIX	Date Receive	d		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX:	roctaw	54		•	IP CODE	1			
Change of Address	Milleaso									
5 CANDIDATE/ OFFICEHOLDER PHONE		AREA CODE PHONE NUMBER EXTENSION  (903) 717 - 0277						Date Hand-delivered or Date Postmarked		
6 CAMPAIGN TREASURER	MS/MRS/MR FIRST Mr WESLEY			MI R			Receipt #	sed	Amount \$	
NAME	NICKNAME LAST SUFFIX									
		Lyon				I	Date Imaged		ZIP CODE	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (A 1115 Cl mt Pleas	noctav	X 7545	5	CITY;		51/	ATE;	ZIP CODE	
8 CAMPAIGN TREASURER PHONE	(903)7	PHONE NU			EXTENSION					
9 REPORT TYPE	DRT TYPE  January 15  30th day before election  Runoff  Runoff  15th day after campaign treasurer appointment (Officeholder Only)							pointment		
	July 15		8th day before elec	ction [		ed Modified ng Limit	Fina	al Report	(Attach C/OH - FR)	
10 PERIOD COVERED	Month Day Year Month Day Year     1   2825 THROUGH   4   3   2025						25			
11 ELECTION	ELECTION DA	re	1222		EL	ECTION TYPE				
	Month Day Year Primary Runoff Other Description									
	3/3/	2025	General	Spe	cial					
12 OFFICE	OFFICE HELD (if any)	_		13	office sou	JGHT (if know	n)			
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	GENERAL COMMITTEE ADDRESS						•		
	SPECIFIC	COMMITTEE	MMITTEE CAMPAIGN TREASURER NAME							
ĺ		COMMITTER	E CAMPAIGN TRI	EASURER AD	DRESS					
	I)		GO TO	PAGE 2	2					

## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 2

5 C/OH NAME	<b>16</b> File	r ID (Ethics Commission Filers)					
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 850.00					
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$					
EXPENDITURE TOTALS	1 3 IDIALUNITEMIZED PULTICAL EXPENDITURE.						
	4. TOTAL POLITICAL EXPENDITURES	\$ 850.00					
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$					
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$					
	ewear, or affirm, under penalty of perjury, that the accompanying report is true and conquired to be reported by me under Title 15, Election Code.	orrect and includes all information					
	Weeky R 3	I					
	Signature of Candidate	e or Officeholder					
1							
Please complete either option below:							
(4) Affidovit							
(1) Affidavit							
NOTARY STAMP/SEA	AL.						
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 administ	ering oath Printed name of officer administering oath	Title of officer administering oath					
	OR						
(2) Unsworn Declarat	ion						
My name is Wesle	4 LYON, and my date of birth is	3/2/1969					
My address is///_5	Choctaw St , Mt Pleasant, TX,	75455					
Executed in	(street) (city) (state)  County, State of, on the day of(month)	(zip code) (country) , 205 (year)					
	Signature of Candidate/O	fficeholder (Declarant)					