CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	Guide explains how	to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:		
3 CANDIDATE/ OFFICEHOLDER	MS / MRS / MR	FIRST S'AMMY	MI	OFFICE USE ONLY		
NAME)	NICKNAME	FARMER	SUFFIX	Date Received		
4 CANDIDATE/ OFFICEHOLDER MAILING ADDRESS	1	FARWAY DA	CITY; STATE; ZIP CODE LUE XAS 76904	JAN 17 202		
Change of Address	 		70101			
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	74 1810	EXTENSION	Date Hand-delivered or Date Postmarked Receipt # Amount \$		
6 CAMPAIGN TREASURER NAME	MS (MRS) MR	FIRST JEANA	MI	Receipt # Amount \$ Date Processed		
NAIVIE	NICKNAME	LAST	SUFFIX			
		FARME	R	Date Imaged		
7 CAMPAIGN TREASURER ADDRESS	5108	(NO PO BOX PLEASE); APT / S FAIRWAY L	JRIVE	STATE; ZIP CODE		
(Residence or Business)	SAN	ANGELO, TE	XAS 76904			
8 CAMPAIGN TREASURER	AREA CODE	PHONE NUMBER	EXTENSION			
PHONE	(325)	212 3886				
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 Day Year Month Day Year 7-15 / 22 THROUGH 12/31/22					
11 ELECTION	ELECTION DATE ELECTION TYPE					
	Month Day	Year Primary	Runoff Other			
	/ /	General	Special Description			
12 OFFICE	OFFICE HELD (If any) COUNTY COMMISSIONER 13 OFFICE SOUGHT (If known)					
44 NOTICE EDOM	THIS BOY IS FOR NOTICE			MADE BY POLITICAL COMMITTEES TO SUPPORT		
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					
		COMMITTEE ADDRESS		***********		
Additional Pages	GENERAL	COMMITTEE ADDRESS				
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TRI	EASURER ADDRESS			
GO TO PAGE 2						
		60 10	PAGE Z			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

JAN 17 2023

FORM C/OH COVER SHEET PG 2

15 C/OH NAME	P. SAMMY FARM	Fil	16 Filer ID (Ethics Commission Filers)			
17 CONTRIBUTION TOTALS		CAL CONTRIBUTIONS (OTHER THA	\$ 0			
	2. TOTAL POLITICAL CONTR (OTHER THAN PLEDGES, LO	KIBUTIONS ANS, OR GUARANTEES OF LOANS	\$ 0			
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITIC	\$ 0				
	4. TOTAL POLITICAL EXPEN	DITURES	\$ 0			
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTION OF REPORTING PERIOD	AST DAY \$ 139.66				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT (LAST DAY OF THE REPORTI	OF ALL OUTSTANDING LOANS AS (NG PERIOD	OF 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) Afficavit	ATHY PYBURN Notary Public STATE OF TEXAS ID# 13034629-5 Comm. Exp. 08-27-2023					
NOTARY STAMP/SEA		1				
Sworn to and subscribed before me by Annytonny this the 17 day of Anciary, 20 23 , to certify which, withess my hand and seal of effice. After the 17 day of Tanciary,						
Signature of officer administer	ring oath Phinted name of or	ficer administering own	Title of officer administering oath			
		OR	Annual Control of the			
(2) Unsworn Declaration	on					
My name is		and my date of birth i	is			
iviy dudless is	(street)		(state) (zip code) (country)			
Executed in	County, State of	())				
		Signature of Cano	didate/Officeholder (Declarant)			