## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how	to complete this form.	1 Filer ID (Ethics Co	mmission Filers)	2 Total pages f	îled:
3 CANDIDATE/ OFFICEHOLDER	MS / MRS / MR MR	Matchew		5	OFFICE USE ONLY	
NAME	NICKNAME LAST SUFFIX Tanher				Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE #; Mayd Rd Whi	city: state; Hesboro, TX	ZIP CODE 76273		
Change of Address		2112115 11111252	EVTENOIO	N.		
5 CANDIDATE/ OFFICEHOLDER PHONE	(254) 7	23 3440	EXTENSIO	N		d or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST		МІ	Receipt #	Amount \$
					Date Processed	
	NICKNAME LAST SUFFIX Date Imaged					
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE					
(Residence or Business)		NIA				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION  ( ) NA					
9 REPORT TYPE	January 15 30th day before election Runoff 15th day after campaign treasurer appointment (Officeholder Only)					
	July 15 Exceeded Modified Final Report (Attach C/OH - FR)  Reporting Limit					
10 PERIOD COVERED	Month	Day Year		Month	Day Ye	
	1/17/24 THROUGH 4/3/24					
11 ELECTION	BLECTION DATE  Month Day Year Primary Runoff Other Description					
	05/04/24 General Special					
12 OFFICE	OFFICE HELD (if any)  13 OFFICE SOUGHT (if known)					
		member			rember	
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	NIA			
Additional Pages	GENERAL	COMMITTEE ADDRESS				
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME					
	COMMITTEE CAMPAIGN TREASURER ADDRESS					
		GO TO	PAGE 2			