The C/OH Instruction (	Guide explains how	to complete this form.	1 Filer ID (Ethics	Commission Filers)	2 Tota	al pages filed: 5
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR Mrs.	FIRST Valerie		MI D		OFFICE USE ONLY
NAME	NICKNAME	LAST <b>Harmon</b>		SUFFIX	Date Re	ceived
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX 1237 County	Road 250, Weima	ar, TX 78962	ZIP CODE	V.	JAN 18 2022
				L-	Ha	-dov. wood
5 CANDIDATE/ OFFICEHOLDER PHONE	(979 )	743-0211	EXTEN	ISION		ind-delivered or Date Postmarked
6 CAMPAIGN TREASURER	MS/MRS/MR Mrs.	Melissa		MI D	Receipt  Date Pro	
NAME	NICKNAME	LAST		SUFFIX	Date Fit	UCGSSEG
	NICKNAME	Dittrich		SUFFIX	Date Im	aged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)		NO PO BOX PLEASE); APT / S Creek Road, Schu				STATE, ZIP CODE
	Western Resource					
8 CAMPAIGN	AREA CODE	PHONE NUMBER	EXTEN	SION		
TREASURER PHONE	(979)	505-2275				
9 REPORT TYPE	January 15	30th day before	election	lunoff		15th day after campaign treasurer appointment (Officeholder Only)
	July 15	8th day before el	GGGGT	xceeded Modified eporting Limit		Final Report (Attach C/OH - FR)
10 PERIOD	Month	Day Year		Month	Day	Year
COVERED	11 ,	/ 15 / 21	THROUGH	12	/ 31	/ 21
11 ELECTION	ELECTION DA	TE		ELECTION TYPE		
	Month Day	Year Primary	Runoff	Other Description		
	3 / 1 ,	22 General	Special			
12 OFFICE	OFFICE HELD (if any)		13 OFFICE	E SOUGHT (if known	1)	
						trict Clerk
44 NOTICE EDGM	THE POY IS FOR HOTH	0. 0. 001 ITION . 001 TRIBUTION				
POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFIC	EHOLDER. THESE EXPENDITURE	S MAY HAVE BEEN MAD	E WITHOUT THE CAN	DIDATE'S OF	DITICAL COMMITTEES TO SUPPORT R OFFICEHOLDER'S KNOWLEDGE OR VE NOTICE OF SUCH EXPENDITURES.
,	COMMITTEE TYPE	COMMITTEE NAME				
Additional Pages	GENERAL	COMMITTEE ADDRESS				
	SPECIFIC	COMMITTEE CAMPAIGN TRI	EASURER NAME			
		COMMITTEE CAMPAIGN TR	EASURER ADDRESS	199		
		GO TO	PAGE 2			

## FORM C/OH COVER SHEET PG 2

15 C/OH NAME Valerie Dunn Harmon			6 Filer	ID (Ethic	s 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.		\$	750.00
	4.	TOTAL POLITICAL EXPENDITURES		\$	750.00
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 LAST DAY OF THE REPORTING PERIOD	THE	\$	0.00

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) Affidavit					
NOTARY STAMP/SEAL					
Sworn to and subscribed before me by			this the	day of	t
20, to certify which, witness my h	nand and seal of office.				
Signature of officer administering oath	Printed name of office	er administering oath		Title of office	er administering oath
		אר			
(2) Unsworn Declaration					
My name is Valerie Dunn Harmon		, and my date o	f birth is 05/0	02/1967	
My address is 1237 County Road 2	50	Weimar	, <u>TX</u>	78962	United States
(st	reet)	, on the 17 day of	(state) January	(zip code) 20_22	(country)
•		Valerie	(Month)		mo-
		Signature	of Candidate/O	micenoiger (Di	ज्यसंस्तर)

l .	FILER NAME  /alerie Dunn Harmon	missior	n Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE		UBTOTAL MOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	0.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	0.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	0.00
4.	. SCHEDULE E: LOANS	\$	0.00
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$	0.00
6	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	0.00
7	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		0.00
8	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		0.00
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$	750.00
10	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	0.00
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$	0.00
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	0.00

## POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

#### SCHEDULE G

If the requested information is not applicable, DO NOT include this page in the report.

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense GM/Awards/Memoriats Expense Legal Services Loen Repayment/Raimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Weges/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule G:	<sup>2</sup> FILER NAME Valerie Dunn Harmon		3 Filer ID (Ethics I	Commission Filers)
4 Date 11/15/2021	5 Payee name Colorado County Republican Party	•		
6 Amount (\$) 750.00 Reimbursement from political contributions intended	7 Payee address; 121 East Main, Eagle Lake, TX 774	City; <b>434</b>	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Filing Fees		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austr	n, TX, officeholder living ex	pense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
Amount (\$)	Payee address;	City;	State;	Zip Code
Reimbursement from political contributions intended			·	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description		
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living e	rpense
Complete ONLY if direct expenditure to benefit C/	Candidate / Officeholder name OH	Office sought		Office held
Date	Payee name		•	
Amount (\$)	Payee address;	City;	State;	Zip Code
Reimbursement from political contributions intended				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description		· ————————————————————————————————————
EXPERMITURE	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder tiving e	kpense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED	

# CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

	<del> </del>		
		The instruction Guide explains how to c	
		Complete only if "Report Type" on page 1 i	s marked "Final Report" ••
1	C/OH N	IAME	2 Filer ID (Ethics Commission Filers)
3	SIGNA	TURE	
	designa	expect any further political contributions or political expenditures in ting a report as a final report terminates my campaign treasurer app gn contributions or make any campaign expenditures without a camp	ointment. I also understand that I may not accept any
			digitation of datisfication of the original
4		WHO IS NOT AN OFFICEHOLDER  splete A & B below only if you are not an officeholder. ••	
	A.	CAMPAIGN FUNDS	
	Chec	k only one:	
		I do not have unexpended contributions or unexpended interest or	income earned from political contributions.
		I have unexpended contributions or unexpended interest or income may not convert unexpended political contributions or unexpended personal use. I also understand that I must file an annual report unexpended contributions or unexpended interest or income earnefiling this final report. Further, I understand that I must dispose of interest or income earned on political contributions in accordance of the contributions.	of interest or income earned on political contributions to t of unexpended contributions and that I may not retain and on political contributions longer than six years after unexpended political contributions and unexpended
	B.	ASSETS	
	Chec	sk only one:	
		I do not retain assets purchased with political contributions or inter-	rest or other income from political contributions.
	i.	I do retain assets purchased with political contributions or interest that I may not convert assets purchased with political contributions personal use. I also understand that I must dispose of assets purc requirements of Election Code, § 254.204.	or interest or other income from political contributions to
			Signature of Candidate
5	OFFK	EHOLDER  Inplete this section only if you are an officeholder	
		I am aware that I remain subject to filing requirements applicable to ar file. I am also aware that I will be required to file reports of unexpend an officeholder, I retain political contributions, interest or other incom- political contributions or interest or other income from political cont	ded contributions if, after filing the last required report as ne from political contributions, or assets purchased with
			Signature of Officeholder

### APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

### FORM CTA PG 1

See	CTA Instruction Guide for detailed instructions.	1 Total pages filed:
2 CANDIDATE NAME	Mrs. Valerie Dun Harmon	OFFICE USE ONLY Filer ID #  Date Received
3 CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX. APT / SUITE # CITY. STATE: ZIP CODE  1237 County Road 250, Weirmar, TX 78962	NOV 1 9 2021  Date Hand-delivered or Postmarked
4 CANDIDATE PHONE	AREA CODE PHONE NUMBER EXTENSION (979) 743-0211	Receipt # Amount \$  Date Processed
5 OFFICE HELD (if any)	none	Date (maged
6 OFFICE SOUGHT (if known)	Colorado County District Clerk	
7 CAMPAIGN TREASURER NAME	Mrs. Melissa Dunn Dittrich	LAST SUFFIX
8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	7211 Middle Creek Rd, Schulenburg, TX 78956	ZIP CODE
9 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (979 ) 505-2275	
10 CANDIDATE SIGNATURE	I am aware of the Nepotism Law, Chapter 573 of the Tell I am aware of my responsibility to file timely reports a the Election Code.  I am aware of the restrictions in title 15 of the Election of from corporations and labor organizations.  Signature of Candidate	s required by title 15 of
	GO TO PAGE 2	

www.ethics.state.tx.us

11 CANDIDATE NAME	Valerie Dyn Harmon
12 MODIFIED REPORTING DECLARATION	COMPLETE THIS SECTION ONLY IF YOU ARE CHOOSING MODIFIED REPORTING
	•• This declaration must be filed no later than the 30th day before the first election to which the declaration applies. ••
	•• The modified reporting option is valid for one election cycle only. •• (An election cycle includes a primary election, a general election, and any related runoffs.)
	•• Candidates for the office of state chair of a political party may NOT choose modified reporting. ••
	I do not intend to accept more than \$500 in political contributions or make more than \$500 in political expenditures (excluding filing fees) in connection with any future election within the election cycle. I understand that if either one of those limits is exceeded, I will be required to file pre-election reports and, if necessary, a runoff report.
	Year of election(s) or election cycle to Signature of Candidate which declaration applies

This appointment is effective on the date it is filed with the appropriate filing authority.

TEC Filers may send this form to the TEC electronically at <a href="mailto:treasappoint@ethics.state.tx.us">treasappoint@ethics.state.tx.us</a>
or mail to

Texas Ethics Commission

P.O. Box 12070

Austin, TX 78711-2070

Non-TEC Filers must file this form with the local filing authority DO NOT SEND TO TEC

For more information about where to file go to: http://204.65.203.6/filinginfo/QuickFileAReport.php

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 NAME	MS / MRS / MR FIRST  Ms. Valerie	MI	OFFICE USE ONLY
Walle	NICKNAME LAST Harmon	SUFFIX	Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #; 1237 County Road 250 Weimar, TX 78962	CITY; STATE; ZIP CODE	JUL 0 7 2023
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (979 ) 743-0211	EXTENSION	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER	Ms / MRS / MR FIRST Ms. Melissa	МІ	Receipt # Amount \$  Date Processed
NAME	NICKNAME LAST  Dittrich	SUFFIX	Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	street address (NO PO BOX PLEASE); APT / S 7211 Middle Creek Road Schulenburg, TX 78956	SUITE #; CITY;	STATE; ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER ( 979 ) 505-2275	EXTENSION	
9 REPORT TYPE	January 15 30th day before	Furnadad Madified	15th day after campaign treasurer appointment (Officeholder Only)  Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year 1 / 1 / 23	THROUGH 6	Day Year / 30 / 23
11 ELECTION	Month Day Year Primary  General	Description	
12 OFFICE	OFFICE HELD (if any) District Clerk	13 OFFICE SOUGHT (If known	)
14 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURE CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQU COMMITTEE TYPE COMMITTEE NAME	ES MAY HAVE BEEN MADE WITHOUT THE CAN	DIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR
Additional Pages	GENERAL COMMITTEE ADDRESS		
	SPECIFIC COMMITTEE CAMPAIGN TR		
	GO TO	PAGE 2	

15 C/OH NAI	ИЕ					16 Filer	ID (Ethics C	Commission Filers)
Valerie Dunn	Harmon							
17 CONTRIBUTOTALS	JTION	PL	TAL UNITEMIZED POLITICAL EDGES, LOANS, OR GUARAN ONTRIBUTIONS MADE ELECT	TEES OF LOANS, OF			\$	0.00
			TAL POLITICAL CONTRIB HER THAN PLEDGES, LOAN		OF LOANS)		\$	0.00
EXPENDIT TOTALS	TURE	3. тот	TAL UNITEMIZED POLITICAL	EXPENDITURE.			\$	0.00
		4. TO	TAL POLITICAL EXPENDIT	URES			\$	0.00
CONTRIBU BALANO			TAL POLITICAL CONTRIBUTION REPORTING PERIOD	ONS MAINTAINED AS	OF THE LAS	T DAY	\$	0.00
OUTSTANI LOAN TOT			TAL PRINCIPAL AMOUNT OF ST DAY OF THE REPORTING		OANS AS OF	THE	\$	0.00
18 SIGNATU	RE I swe	ar, or affirm	under penalty of perjury, that	at the accompanying	report is true	and co	rrect and inc	cludes all information
			orted by me under Title 15, Ele					
				Sign	nature of Car	ndidate	or Officebol	der
				Sign	lature or Car	ididate	or Onicerior	uei
			Please comple	ete either ontic	n helow	,.		
			riease compi	ste either optic	JII DEIOW	•		
(1) Affidavit								
NOTARY ST	AMP/SEAL							
Sworn to and s	subscribed be	fore me by			this the		_ day of	
20	to certify wh	ich witness r	ny hand and seal of office.					
	_, to octary with	iion, withoos i	ny nana ana soar or omoc.					
Signature of office	ar administaring	a oath	Printed name of office	or administaring oath			Title of offic	er administering oath
Signature of office	er administering	y cath			Daniel St. Phys		Title of offic	er administering out
<b>是</b> 於這個語句				OR				定理是各种的企业的
(2) Unsworn	Declaration							
\ \v.	alorio Dur	n Harma	an.			05/03	2/1067	
My name is V			)II	, and my dat	te of birth is	, -	79062	LICA.
My address is _	1237 CR	250		, <u>Weimar</u>	, <u>T</u> >	<u>`</u> , <u>'</u>	78962	USA
_	1		(street)	city)		state)	(zip code)	(country)
Executed in Co	piorado	Coun	nty, State of Texas	, on theda	y of July (month	1	2023	-
				Take	Tie X	lent	(year)	mas
1				Signatu	re of Candid	late/Offic	ceholder (De	clarant)
				3			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ciaranty

19 FIL	FILER NAME 20 Filer ID (Ethics C			
Vale	rie Dunn Harmon			
21 SCI	HEDULE SUBTOTALS ME OF SCHEDULE		SUBTOTAL AMOUNT	
1,	1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS			
2.	. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS			
3.		\$		
4.	. SCHEDULE E: LOANS			
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	ONTRIBUTIONS	\$	
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS			
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FL	INDS	\$ 	
10.	. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH			
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL C	ONTRIBUTIONS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTO FILER	UTIONS RETURNED	\$	

The C/OH Instruction	on Guide explains how to complete this form.  1 Filer ID (Ethics Commission Filers) 2 Total pages filed:
3 CANDIDATE / OFFICEHOLDE	MS / MRS / MR FIRST MI OFFICE USE ONLY  MS. Valerie
NAME	NICKNAME LAST SUFFIX  Harmon  Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	Weimar, TX 78962
5 CANDIDATE/ OFFICEHOLDEI PHONE	AREA CODE PHONE NUMBER EXTENSION Date Hand-delivered or Date Postmarked (979) 743-0211
6 CAMPAIGN TREASURER	MS / MRS / MR FIRST MI  MS. Melissa  Date Processed
NAME	NICKNAME LAST SUFFIX
	Dittrich Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Busines	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #; CITY; STATE; ZIP CODE  7211 Middle Creek Road Schulenburg, TX 78956
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (979 ) 505-2275
9 REPORT TYPE	January 15  30th day before election  Runoff  15th day after campaign treasurer appointment (Officeholder Only)  Exceeded Modified  Exceeded Modified  Final Report (Attach C/OH - FR)
	July 15  8th day before election  Exceeded Modified Reporting Limit  Final Report (Attach C/OH - FR)
10 PERIOD	Month Day Year Month Day Year
COVERED	7 / 1 / 22 THROUGH 12 / 31 / 22
11 ELECTION	Month Day Year Primary Runoff Other Description  11 / 8 / 22 General Special
12 OFFICE	OFFICE HELD (if any)  District Clerk  13 OFFICE SOUGHT (if known)
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 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 TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS
	GO TO PAGE 2

15 C/OH NAME Valerie Dunn Harmon  16 Filer ID (Ethics Commission Filers)					sion Filers)		
17 CONTRIBUT	TION	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTION PLEDGES, LOANS, OR GUARANTEES OF LOAN CONTRIBUTIONS MADE ELECTRONICALLY)	지장 맛이 하면 어떤 기업이 되었다면 하는 그렇게 되었다.	N	\$	0.00
			TOTAL POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES, LOANS, OR GUARAN	TEES OF LOANS	)	\$	0.00
EXPENDITU TOTALS	JRE	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE	L.		\$	0.00
		4.	TOTAL POLITICAL EXPENDITURES			\$	0.00
CONTRIBUT BALANCE			TOTAL POLITICAL CONTRIBUTIONS MAINTAIN OF REPORTING PERIOD	ED AS OF THE LA	ST DAY	\$	0.00
OUTSTANDI LOAN TOTA			TOTAL PRINCIPAL AMOUNT OF ALL OUTSTAND LAST DAY OF THE REPORTING PERIOD	DING LOANS AS C	F THE	\$	0.00
18 SIGNATURI			rm, under penalty of perjury, that the accompa eported by me under Title 15, Election Code.	nying report is tru	ue and co	rrect and includes	all information
	Valerie Dun Hermon Signature of Candidate or Officeholder			mon			
				Oignature or o	andidate (	or Omcendider	
			Please complete either	option below	w:		
(1) Affidavit							
NOTARY STAMP/SEAL							
Sworn to and sul	bscribed b	pefore me	by	this the		_ day of	
20,	to certify w	hich, witne	ss my hand and seal of office.				
Signature of officer	administerir	ng oath	Printed name of officer administering	oath		Title of officer adm	inistering oath
OR OR							
(2) Unsworn De	eclaration	n	(Ĭ			ب منا اد	
My name is Valerie Jum Harmon, and my date of birth is 5/2/1967.							
My address is 1231 CR 250 , Weirner , TX , 78562 USA .							
Executed in	(street) (city) (state) (zip code) (country)  Executed in Colorado County, State of Texas, on the Te						

19 FILER NAME Valerie Dunn Harmon				
21 SC	CHEDULE SUBTOTALS AME OF SCHEDULE	SUBTOTAL AMOUNT		
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	s		
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	s		
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	s		
4.	SCHEDULE E: LOANS	\$		
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	ONTRIBUTIONS \$		
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$		
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	CONTRIBUTIONS \$		
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	s		
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FU	NDS \$		
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO	A BUSINESS OF C/OH \$		
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	ONTRIBUTIONS \$		
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTO FILER	TIONS RETURNED \$		

#### CANDIDATE / OFFICEHOLDER FORM C/OH CAMPAIGN FINANCE REPORT COVER SHEET PG 1 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. 4 MS / MRS / MR FIRST MI 3 CANDIDATE / OFFICE USE ONLY **OFFICEHOLDER** Valerie D NAME Date Received NICKNAME LAST SUFFIX Harmon APT / SUITE # 4 CANDIDATE / ADDRESS / PO BOX ZIP CODE OFFICEHOLDER 1237 County Road 250, Weimar, TX 78962 MAILING **ADDRESS** Change of Address AREA CODE PHONE NUMBER EXTENSION 5 CANDIDATE/ Date Hand-delivered of Date Postmarked **OFFICEHOLDER** (979)743-0211 PHONE Receipt # Amount \$ FIRST MS / MRS / MR 6 CAMPAIGN TREASURER Melissa D Mrs. Date Processed NAME LAST NICKNAME SUFFIX Date Imaged Dittrich STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #. STATE ZIP CODE 7 CAMPAIGN TREASURER 7211 Middle Creek Road, Schulenburg, TX 78956 ADDRESS (Residence or Business) AREA CODE PHONE NUMBER EXTENSION 8 CAMPAIGN TREASURER PHONE (979 505-2275 9 REPORT TYPE 30th day before election Runoff 15th day after campaign January 15 treasurer appointment (Officeholder Only) Exceeded Modified July 15 Final Report (Attach C/OH - FR) 8th day before election Reporting Limit 10 PERIOD Year Month Day Year COVERED 6 30 22 22 THROUGH ELECTION TYPE ELECTION DATE 11 ELECTION Primary Runoff Other Description Day Year ■ General Special 8 22 11 13 OFFICE SOUGHT (if known) OFFICE HELD (if any) 12 OFFICE Colorado County District Clerk 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 OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDER'S REPENDITURES. 14 NOTICE FROM POLITICAL COMMITTEE(S) COMMITTEE NAME COMMITTEE TYPE COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS

**GO TO PAGE 2** 

#### FORM C/OH **CANDIDATE / OFFICEHOLDER COVER SHEET PG 2 CAMPAIGN FINANCE REPORT** 16 Filer ID (Ethics Commission Filers) 15 C/OH NAME Valerie Dunn Harmon TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN 17 CONTRIBUTION \$ 0.00PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR **TOTALS** CONTRIBUTIONS MADE ELECTRONICALLY) **TOTAL POLITICAL CONTRIBUTIONS** 2. \$ 0.00(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) EXPENDITURE 0.00TOTAL UNITEMIZED POLITICAL EXPENDITURE. \$ **TOTALS** 0.00TOTAL POLITICAL EXPENDITURES \$ CONTRIBUTION TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY 0.00BALANCE OF REPORTING PERIOD TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE **OUTSTANDING** 0.00LAST DAY OF THE REPORTING PERIOD **LOAN TOTALS** I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information **18 SIGNATURE** 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 \_\_ this the \_\_\_\_\_ day of Sworn to and subscribed before me by \_\_\_\_ \_, to certify which, witness my hand and seal of office. Title of officer administering oath Printed name of officer administering oath Signature of officer administering oath (2) Unsworn Declaration , and my date of birth is 05/02/1967 My name is Valerie Dunn Harmon My address is 1237 County Road 250 78962 United States TX Weimar (zip code) (country) (street) (city) (state) <sub>20</sub>22 Executed in Colorado , on the 13day of July County, State of Texas Signature of Candidate/Officeholder (Declarant)

	LER NAME 20 Filer ID erie Dunn Harmon	) (Ethics Commiss	sion Filers)
	CHEDULE SUBTOTALS AME OF SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	0.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	0.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	0.00
4.	SCHEDULE E: LOANS	\$	0.00
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIO	NS \$	0.00
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	0.00
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBU	tions \$	0.00
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	s	0.00
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$	0.00
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		0.00
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTION	ons \$	0.00
12.	SCHEDULE K: INTEREST, CREDITS. GAINS, REFUNDS, AND CONTRIBUTIONS RET TO FILER	URNED \$	0.00

# CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

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		The Instruction Guide explains	
		- Complete only if "Report Type" on	page 1 is marked "Final Report" **
1	C/OH N	IAME	2 Filer ID (Ethics Commission Filers)
3	SIGNA	TURE	
	designa	t expect any further political contributions or political expend ating a report as a final report terminates my campaign treas ign contributions or make any campaign expenditures withou	surer appointment. I also understand that I may not accept any
			Signature of Candidate / Officeholder
4	FILED	WHO IS NOT AN OFFICEHOLDER	
*	Con	nplete A & B below <i>only</i> if you are not an officeholder.	· ••
	A.	CAMPAIGN FUNDS	ı
		ck only one:	
	~	I do not have unexpended contributions or unexpended in	interest or income earned from political contributions.
		may not convert unexpended political contributions or unpersonal use. I also understand that I must file an annunexpended contributions or unexpended interest or inco-filing this final report. Further, I understand that I must di	tor income earned from political contributions. I understand that is unexpended interest or income earned on political contributions to must report of unexpended contributions and that I may not retain ome earned on political contributions longer than six years after dispose of unexpended political contributions and unexpended coordance with the requirements of Election Code, § 254.204.
	B.	ASSETS	
	Chec	ck only one:	
	10	I do not retain assets purchased with political contribution	ons or interest or other income from political contributions.
	-	that I may not convert assets purchased with political cor	or interest or other income from political contributions. I understare intributions or interest or other income from political contributions to assets purchased with political contributions in accordance with the Signature of Candidate
5	CEF	CEHOLDER	
٦	- Co	mplete this section only if you are an officeholder	
		tie I am also aware that I will be required to file reports of	licable to an officeholder who does not have a campaign treasurer on of unexpended contributions if, after filing the last required report as other income from political contributions, or assets purchased with olitical contributions.
			Olandar of Officeholder