CANDIDATE / OFFICEHOLDER 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: 2

OFFICE USE ONLY

Date Received: 1-15-25 D. Barkley

Date Hand-delivered or Date Postmarked

Receipt #

Amount $

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: Mr.	FIRST: Kenneth	MI: T		
	NICKNAME: Ken	LAST: Sury	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS (Change of Address)	ADDRESS / PO BOX: [redacted]	APT / SUITE #:	CITY: Woodway	STATE: TX	ZIP CODE: 76712
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE: (254)	PHONE NUMBER: 424-7365	EXTENSION		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR: Mrs.	FIRST: Pamela	MI: R		
	NICKNAME: Pam	LAST: Watts	SUFFIX		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE): [redacted]	APT / SUITE #:	CITY: McGregor	STATE: TX	ZIP CODE: 76657
8 CAMPAIGN TREASURER PHONE	AREA CODE: (254)	PHONE NUMBER: 717-7102	EXTENSION		

9 REPORT TYPE

- [x] January 15
- [ ] 30th day before election
- [ ] Runoff
- [ ] 15th day after campaign treasurer appointment (Officeholder Only)
- [ ] July 15
- [ ] 8th day before election
- [ ] Exceeded Modified Reporting Limit
- [ ] Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month	Day	Year		Month	Day	Year
7	16	24	THROUGH	1	15	25

11 ELECTION

ELECTION DATE

Month	Day	Year
5	4	24

ELECTION TYPE

- [ ] Primary
- [ ] Runoff
- [ ] Other Description
- [x] General
- [ ] Special

12 OFFICE

OFFICE HELD (if any): Council member Ward 3, Place 1

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 OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

Additional Pages

COMMITTEE TYPE

- [ ] GENERAL
- [ ] SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Kenneth Sury		**16** Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	$
	2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	$
	4. **TOTAL POLITICAL EXPENDITURES**	$
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 66.48
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY 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.

Kenneth Sury

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY PUBLIC STATE OF TEXAS
KATRINA BARRETT
My Notary ID # 132846553
Expires December 31, 2028

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Kenneth Sury this the 15th day of January, 20 25, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Printed name of officer administering oath: Katrina Barrett | Title of officer administering oath: Notary 12:24p.m.

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

_____
Signature of Candidate/Officeholder (Declarant)