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 fit	ed: 2		
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR MS	_{FiRST} Fatiyauh	мі J	OFFICE	USE ONLY		
NAME 4 CANDIDATE/	NICKNAME FJ ADDRESS / PO BOX	LAST Jones APT / SUITE #. 0	SUFFIX	Date Received	IVED		
OFFICEHOLDER MAILING ADDRESS Change of Address		n Ash Lane, Rosha		JUL 4 2 2024 JOYCE HUDMAN COUNTY CLERK			
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (832)	PHONE NUMBER 848-0815	EXTENSION	Date Hand-delivered or Date Postmarked			
6 CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST Scott	Mı	Receipt #	Amount \$		
	NICKNAME	LAST	C SUFFIX	Date Processed			
		Feuless		Date Imaged	= 2=002 =		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)		(NO PO BOX PLEASE); APT / SI ter Dr., Pearland, T	•	STATE;	ZíP CODE		
8 CAMPAIGN TREASURER PHONE	(281)	PHONE NUMBER 804-0034	EXTENSION				
9 REPORT TYPE	January 15	30th day before el	lection Runoff	15th day after campaign treasurer appointment (Officeholder Only)			
	July 15	8th day before ele	ction Exceeded Modified Reporting Limit	Final Repor	i (Attach C/OH - FR)		
10 PERIOD COVERED	Month 1	Day Year 1 24	THROUGH 6	Day Year / 30 / 24			
11 ELECTION	Month Day	Year Primary 20 General	Runoff Other Description Special	:			
12 OFFICE	OFFICE HELD (if any) 13 OFFICE SOUGHT (if known) Justice of the Peace, Pct. 4, Place 1						
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'S OR 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 TYPE	COMMITTEE NAME					
Additional Pages	GENERAL	COMMITTEE ADDRESS					
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME						
		COMMITTEE CAMPAIGN TRE	EASURER ADDRESS				
	1	GO TO	PAGE 2		·		

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

CAMIFAIGHT MANCE REPORT							
15 C/OH NAME Fatiyauh J. Jones			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) 		\$	0.00		
	2.	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$	0.00		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.		\$	0.00			
	4.	TOTAL POLITICAL EXPENDITURES		\$	0.00		
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS	ST DAY	\$	306.06		
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	F 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 th	ie	day of	······································	
20, to certify which, witness my hand and seal of off	ice.				
Signature of officer administering oath Printed name	of officer administering oath		Title of office	r administering oath	
	OR				
(2) Unsworn Declaration					
My name is Fatiyauh "FJ" Jones	, and my date of birth	is 3/12/	79		
My address is 5519 Autumn Ash Lane		TX		USA	
(street)	(city)	(state)	(zip code)	(country)	
Executed in Brazoria County, State of Texas	, on the day of <u>July</u>		20_24	<u>.</u> -	
	Fl longo	nth)	(year)		
Signature of Candidate/Officeholder (Declarant)					