CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Suide explains how	to complete this form.	1 Filer ID (Ethics Commission Filers	2 Total pages filed:
3 CANDIDATE/ OFFICEHOLDER NAME	MS/MRS/MR MC. NICKNAME	Micah Harmon	Clay	FILED FOR RECORD AT 3:25 o'clock
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	P.O. Box	APT / SUITE #;	ville TX 77964	FEB 0 5 2024 Tenia Hudson Elections Administrator, Lavaca County
Change of Address				By rangy J. P Willy
5 CANDIDATE/ OFFICEHOLDER PHONE	(361)	798-0033	EXTENSION	Data mod-dolivered or Date Dockmarked Receipt # Amount \$
6 CAMPAIGN TREASURER NAME	MS/MRS/MR Mr. NICKNAME	Micah Harmon	Clay	Date Imaged Amount \$ Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)		(NO PO BOX PLEASE); APT / SI	sville To 77964	STAFE: ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE (36)	798- 0033	EXTENSION	
9 REPORT TYPE	January 15 July 15	30th day before e		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/CH - FR)
10 PERIOD COVERED	Month	OI 2024	THROUGH 1	Day Year 75 2024
11 ELECTION	Month Day	Year X Primary QOQ4 General	Runoff Other Description Special	E
12 OFFICE	Sheriff		13 OFFICE SOUGHT (If know	wn)
14 NOTICE FROM POLITICAL COMMITTEE(S) Additional Pages	THE CANDIDATE / OFFI	CEHOLDER. THESE EXPENDITURES	MAY HAVE BEEN MADE WITHOUT THE CAL RED TO REPORT THIS INFORMATION ONLY IF	MADE BY POLITICAL COMMITTEES TO SUPPORT NDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR THEY RECEIVE NOTICE OF SUCH EXPENDITURES.
	Paractric	COMMITTEE CAMPAIGN TRE	EASURER ADDRESS	
		GO TO	PAGE 2	

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Micah	Class	Harmon	16 Filer	ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER TO PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	HAN	\$ 1333.21
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOAN)	NS)	\$ 850.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.		\$ 0
	4.	TOTAL POLITICAL EXPENDITURES		\$ 1037.94
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE OF REPORTING PERIOD	LAST DAY	\$ 295.27
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS LAST DAY OF THE REPORTING PERIOD	S OF THE	\$ 0
		ffirm, under penalty of perjury, that the accompanying report is reported by me under Title 15, Election Code.	true and co	rrect and includes all information
)	
		Signature of	Candidate	or Officeholder
		Please complete either option bel	ow.	
		. rouse semprete stater option per		
(1) Affidavit				
NOTARY STAMP/SE	AL			
Swom to and subscribe	ed before m	by this t	he	day of,
				day or
20, to certif	ty which, with	ness my hand and seal of office.		
Signature of officer adminis	stering oath	Printed name of officer administering oath		Title of officer administering oath
	The same of	OR		
(2) Unsworn Declara	tion			
(2) Oliswolli Deciara	1 1			
My name is MIC	AAL	80 mg	Aug	1.5, 1964
200	2 . 7	and my date of birth	K. 17	MOU II I
My address is P.O.	DOX	115 Halletteville	IX I	Mot Lavaca
Executed inLaVa	ca	(street) County, State of Texas on the 5 day of Texas		(zip code) (country)
			1	(year)
		Signature of Cal	ndidate/Office	sholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	Micah Clay Harmon	20 Filer ID (Ethics Col	mmission Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 850.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		s 2472.06
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE E: LOANS		\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$ 1037.94
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 FUN	NDS	s 170.00
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A	BUSINESS OF C/OH	s
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT	TIONS RETURNED	s

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

7.0		2) 82	
The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
2 FILER NAME	lical Clay Harmon		3 Filer ID (Ethics Commission Filers)
1/3/24	5 Full name of contributor out-or-state PAC Lake Robertson 6 Contributor address; City; 8782 US Huy 771 Hallettsv	State; Zip Code	7 Amount of contribution (\$)
0	upation / Job title (See Instructions)	9 Employer (See Instructi	ons)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
1/17/24	Donald Najvar Contributor address Ver City: 7018 Halfpenny Rd. Howston	State; Zip Code 7X 77096	\$ 250.00
010	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
1/17/24	Contributor address; City; 1273 CR 230 HalkHsville	State; Zip Code	\$100.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

The	Instruction Guide explains how to complete this form	n.	1 Total pages Sche	dule A2:
2 FILER NAME	eah Clay Harmon		3 Filer ID (Ethics C	commission Filers)
4 TOTAL OF	UNITEMIZED IN KIND POLITICAL CONTRIB	BUTIONS	\$	
ולוחלמן ד	Full name of contributor out-of-state PAC (IDW:	Zip Code	8 Amount of Contribution \$ 1,372.06	9 In-kind contribution description hall restant food translation event side of Texas. Complete Schedule T.
10 Principal occupa	ation / Job title (FOR NON-JUDICIAL)(See Instructions)	11 Employ	er (FOR NON-JUDIC	(IAL)(See Instructions)
12 Contributor's pr	incipal occupation (FOR JUDICIAL)	13 Contrib	utor's job title (FOR J	UDICIAL)(See Instructions)
14 Contributor's en	nployer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spo	use (if any) (FOR JUDICIAL)
16 If contributor is	a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
1/12/24	Full name of contributor out-of-state PAC (ID#:	Zip Code	Amount of Contribution \$ \$1,100.00 Check if travel out	In-kind contribution description Push Cards for advertising appears side of Texas. Complete Schedule T.
1	ation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employ	er (FOR NON-JUDIO	IAL)(See Instructions)
	incipal occupation (FOR JUDICIAL)	Contrib	utor's job title (FOR J	UDICIAL)(See Instructions)
Contributor's er	nployer/law firm (FOR JUDICIAL)	Law firr	n of contributor's spo	use (if any) (FOR JUDICIAL)
If contributor is	a child, law firm of parent(s) (If any) (FOR JUDICIAL)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

Candidate/Officeholder/Politica redit Card Payment		Expense Travel Out Of District Wages/Contract Labor Other (enter a category not listed above) complete this form.
Total pages Schedule F1:	Micah Clay Harmon	3 Filer ID (Ethics Commission Filers)
1/10/24	Kurtz Printing Company	
Amount (\$)	7 Payee address;) 110 Pin Oak Ct.	Victoria TX 77901
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising expense	door hangers
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Micah Clay Harmon	sheriff sheriff
Date	Payee name	
1/23/94	Buildasign	
Amount (\$)	Payee address;	City; State; Zip Code
a 627.85	11525A Stonehollow Dr. S.	inte 100 Austin TX 78758
PURPOSE OF EXPENDITURE	Rinding expense	Relect Mich Harmon 100 where 18" x 24" signs & stake
	Check if travel outside of Texas. Complete Schedule T.	Check If Austin, TX, officeholder living expense
complete <u>ONLY</u> if direct expenditure to benefit C/OH	Micah Clay Harmon	Office sought Office held Shexiff Shexiff
Date	Payee name	
Amount (\$)	Payee address;	City; State; Zip Code
Amount (\$) PURPOSE OF EXPENDITURE	Payee address; Category (See Categories listed at the top of this schedule)	City; State; Zip Code Description
PURPOSE OF		

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) Loan Repayment/Reimbursement Advertising Expense Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Consulting Expense Polling Expense Travel In District Contributions/Donations Made By Gift/Awards/Memorials Expense Printing Expense Travel Out Of District Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 2 FILER NAME 1 Total pages Schedule G: 3 Filer ID (Ethics Commission Filers) 4 Date Amount (\$) State: Zip Code 7995 00.00 105 Huck Reimbursement from political contributions intended (b) Description (a) Category (See Categories listed at the top of this schedule) 8 PURPOSE Donation Silent auction OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name Amount (\$) Payee address; City; State: Zip Code Reimbursement from political contributions intended Description Category (See Categories listed at the top of this schedule) PURPOSE OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name Amount (\$) Payee address; City; State; Zip Code Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description PURPOSE OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED