CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

| The C/OH Instruction C | Guide explains how | to complete this form. | 1 Filer ID (Ethics | Commission Filers) | 2 Total pages file | ^{d:} 5 | |
|--|--|--|-----------------------|----------------------------------|--|----------------------|--|
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR | FIRST Steve | MI D | | OFFICEUSEONLY | | |
| TOTAL | NICKNAME David | Hunter | | SUFFIX | Date Received | FILED A | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address | ADDRESS / PO ROX | APT / SUITE # | CITY STATE; | ZIP CODE | | 11 202 P | |
| 5 CANDIDATE/ OFFICEHOLDER PHONE | | | EXTENS | SION | Date Mand-delivered | 型的人们的 化二十二 | |
| 6 CAMPAIGN TREASURER | MS / MRS / MR Mrs | FIRST Melanie | | MI K | Receipt # | Amount \$ | |
| NAME | | | | SUFFIX | Date Imaged | | |
| 7 CAMPAIGN TREASURER ADDRESS | STREET ADDRESS (| NO PO BOX PLEASE); APT / | SUITE #; CITY | <i>t</i> ; | STATE: | ZIP CODE | |
| (Residence or Business) | | | | | | | |
| 8 CAMPAIGN TREASURER PHONE | | | EXTENS | ION | | | |
| 9 REPORT TYPE | January 15 | 30th day before | election Ru | noff | 15th day aff treasurer ap (Officeholde | | |
| | July 15 | 8th day before e | iconon | ceeded Modified porting Limit | | t (Attach C/OH - FR) | |
| 10 PERIOD COVERED | Month 7 | Day Year / 1 / 23 | THROUGH | Month 12 | Day Year / 23 | | |
| 11 ELECTION | Month Day | Year Primary | | Other Description | | | |
| 12 OFFICE | OFFICE HELD (if any) Liberty Co. | Constable Pct | | SOUGHT (if know) | stable Pct 5 | 5 | |
| 14 NOTICE FROM POLITICAL COMMITTEE(S) | THE CANDIDATE / OFFIC | E OF POLITICAL CONTRIBUTIONS EHOLDER. THESE EXPENDITURI AND OFFICEHOLDERS ARE REQU | ES MAY HAVE BEEN MADE | WITHOUT THE CAN | IDIDATE'S OR OFFICEHOL | DER'S KNOWLEDGE OR | |
| | COMMITTEE TYPE | COMMITTEE NAME | | | | | |
| Additional Pages | GENERAL | GENERAL COMMITTEE ADDRESS | | | | | |
| | SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME | | | | | | |
| | | COMMITTEE CAMPAIGN TH | REASURER ADDRESS | | | | |
| | ··· | GO TO | PAGE 2 | | | | |

CANDIDATE / OFFICEHOLDER FORM C/OH **COVER SHEET PG 2** CAMPAIGN FINANCE REPORT 15 C/OH NAME 16 Filer ID (Ethics Commission Filers) Steve David Hunter 17 CONTRIBUTION TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN 0.00**TOTALS** PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) TOTAL POLITICAL CONTRIBUTIONS 0.00(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **EXPENDITURE** TOTAL UNITEMIZED POLITICAL EXPENDITURE 0.00**TOTALS** 1,483.26 TOTAL POLITICAL EXPENDITURES CONTRIBUTION TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY 0.00BALANCE OF REPORTING PERIOD **OUTSTANDING** 6 TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE 0.00LOAN TOTALS LAST DAY OF THE REPORTING PERIOD 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: KENBERLY A. HILTON Notary Public, State of Texas Comm. Expires 01-13-2025 AFRIETAMP ASHALY ID 130961495 Sworn to and subscribed before me by <u>David Hunter</u> this the <u>10</u> day of <u>January</u> , to certify which, witness my hand and seal of office. Kenberly A. Hilton Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath (2) Unsworn Declaration _, and my date of birth is _ My name is My address is

(street)

Executed in _____, on the ___

(city)

___ day of

(state)

Signature of Candidate/Officeholder (Declarant)

(month)

(zip code)

(vear)

(country)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

| | FILER NAME Leve David Hunter | 20 File | r ID (Ethics Co | mmissi | on Filers) |
|-----|--|---------|-----------------|--------|--------------------|
| 21 | SCHEDULE SUBTOTALS NAME OF SCHEDULE | | | | SUBTOTAL AMOUNT |
| 1. | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | | | \$ | |
| 2. | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ | | | |
| 3. | SCHEDULE B: PLEDGED CONTRIBUTIONS | | | \$ | * |
| 4. | SCHEDULE E: LOANS | | | \$ | |
| 5. | SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL COM | NTRIBUT | IONS | \$ | |
| 6. | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | | | \$ | |
| 7. | SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL (| \$ | | | |
| 8. | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | | | \$ | |
| 9. | ■ SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUN | \$ | 1,483.26 | | |
| 10. | SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A | BUSINE | SS OF C/OH | \$ | |
| 11. | SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO | NTRIBU | TIONS | \$ | |
| 12. | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT TO FILER | \$ | | | |

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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

| Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment | | Event Expense Fees Gitl/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form. | | erhead/Rental Expense xpense :xpense Wages/Contract Labor | Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above) | | |
|--|---|---|-----------|--|---|-----------------------------|--|
| 1 Total pages Schedule G: 2 | 2 FILER NA Steve | David Hunter | | : | 3 Filer ID (Ethics | Commission Filers) | |
| ⁴ Date 12/11/2023 | 6 Payee nate 4imprin | | | | | | |
| 6 Amount (\$) 361.59 Reimbursement from political contributions intended | 7 Payee ad 4imprir | , | | City; | State; | Zip Code | |
| PURPOSE OF EXPENDITURE | | (See Categories listed at the top of this sing Expense | chedule) | (b) Description Pens | | | |
| | (c) | Check if travel outside of Texas. Complete Sc | hedule T. | Check if Austin, T | X, officeholder living ex | pense | |
| Omplete ONLY if direct expenditure to benefit C/OH | _ | e David Hunter | Lib | Office sought erty Co. Constable Pct | | Office held Constable Pct 5 | |
| Date 11/03/2023 | Payee nar | Promotions | | | | | |
| Amount (\$) 302.02 Reimbursement from political contributions intended | Payee ad Good F | Promotions 803 E Ho | uston, (| City; Cleveland Texas | State; 77327 | Zip Code | |
| PURPOSE OF EXPENDITURE | | (See Categories listed at the top of this sing Expense | chedule) | Description tshirts | | | |
| | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | | | | | pense | |
| Consider ONLY if disease | Candid | ate / Officeholder name | | Office sought | | Office held | |

EXPENDITURE CATEGORIES FOR BOX 8(a)

expenditure to benefit C/OH Steve David Hunter Liberty Co. Constable Pct 5 Liberty Co. Constable Pct 5 Date 11/11/2023 Liberty County Republican Party Payee address; Amount (\$) City; State; Zip Code 375.00 Liberty Conty Republican Party Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description PURPOSE fees sign up fee OF EXPENDITURE 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

Complete ONLY if direct

Steve David Hunter

Liberty Co. Constable Pct 5

Office sought

Liberty Co. Constable Pct 5

Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Credit Card Payment

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District
Travel Out Of District Other (enter a category not listed above)

| | The Instruction Guide explains how to | complete this form. | | | | |
|--|---|--|--|--|--|--|
| 1 Total pages Schedule G: 2 | 2 FILER NAME Steve David Hunter | Filer ID (Ethics Commission Filers) | | | | |
| 4 Date | 5 Payee name | | | | | |
| 11/05/2023 | Amazon | | | | | |
| 6 Amount (\$) 160.74 Reimbursement from political contributions intended | 7 Payee address; Amazon.com | City; | State; Zìp Code | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description koozies and keychains | | | | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austin, TX | K, officeholder living expense | | | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Steve David Hunter | Office sought perty Co. Constable Pct | Office held Liberty Co Constable Pct 5 | | | |
| Date 12/31/2023 | Payee name Amazon | | | | | |
| Amount (\$) 33.91 Reimbursement from political contributions intended | Amazon.com | City; | State; Zip Code | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | business cards | | | | |
| | Check if travel outside of Texas. Complete Schedule T. | X, officeholder living expense | | | | |
| Complete ONLY if direct expenditure to benefit C/G | Candidate / Officeholder name PH Steve David Hunter Life | Office sought perty Co. Constable Pct | Office held 5 Liberty Co. Constable Pct 5 | | | |
| Date 12/14/2023 | Payee name Vision Art | | | | | |
| Amount (\$) 250.00 Reimbursement from political contributions intended | Payee address; 259 CR 2284-1 Cleveland Texas 7 | City; 77327 | State; Zip Code | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | Description Signs | | | | |
| | 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 | Steve David Hunter | Office sought berty Co. Constable Pct | Office held 5 Liberty Co. Constable Pct 5 | | | |
| | ATTACH ADDITIONAL COPIES OF THIS | SCHEDULE AS NEEDE | D | | | |