PROFESSION DEVENDED AND AND AND AND AND AND AND AND AND AN	E / OFFICEHOL N FINANCE REF				FORM C/OH COVER SHEET PG 1
The C/OH Instruction	Guide explains how to con	nplete this form.	Filer ID		2 Total pages filed: 9
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Zack		МІ	OFFICE USE ONLY
	NICKNAME	LAST Harkness		SUFFIX FILEI	FOR RECORD
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; A	PT / SUITE #; CITY;		ZIP CODE	Date Hand delivered or Date Postmarked Receipt 70 Amount
Change of Address					Date Processed
				DEPUT CLER	Date Imaged
5 CAMPAIGN TREASURER	MS / MRS / MR	FIRST		MI	
NAME	Mrs. Jennife	er L.			
	NICKNAME	LAST		SUFFIX	
	Bergman			*	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO F	PO BOX PLEASE);	APT	7/SUITE#; CITY;	STATE; ZIP CODE
7 CAMPAIGN TREASURER PHONE					
8 REPORT TYPE	January 15 July 15	30th day before ele X 8th day before ele	ction	Runoff Exceeded modified reporting limit	15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)
9 PERIOD COVERED	Month Day Yea 01/26/2024		OUGH	Month Day 02/24/2024	Year 4
10 ELECTION	ELECTION DATE Month Day Yea 03/05/2024	r X Prim		ELECTION TYPE Runoff Special	Other
11 OFFICE	OFFICE HELD (if any) Precinct 6 Constable, Li	berty County		12 OFFICE SOUGHT Precinct 6 Consta	(if known) able, Liberty County
		GO TO	PAGE 2		
Forms provided by Te	xas Ethics Commission	www.ethic	s.state.tx.us		Version V3.5.1.9000c47

FORM C/OH **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. CANDIDATE / MS / MRS / MR FIRST Μİ **OFFICE USE ONLY OFFICEHOLDER** Zack NAME Date Received NICKNAME LAST SUFFIX Harkness CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** PO Box 1492 **MAILING** Receipt# Amount **ADDRESS** Change of Address Cleveland, TX 77328 Date Processed Date Imaged CAMPAIGN MS/MRS/MR FIRST **TREASURER** NAME Mrs. Jennifer L. NICKNAME LAST **SUFFIX** Bergman STREET ADDRESS (NO PO BOX PLEASE); **CAMPAIGN** APT / SUITE #: CITY: STATE; ZIP CODE **TREASURER** 709 S. Washington Ave. **ADDRESS** Cleveland, Texas 77327 (Residence or Business) CAMPAIGN AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** REPORT **TYPE** January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit **PERIOD** Month Day Year Year Month Day COVERED 01/26/2024 **THROUGH** 02/24/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year X Primary Runoff Other 03/05/2024 General Special 11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) Precinct 6 Constable, Liberty County Precinct 6 Constable, Liberty County **GO TO PAGE 2** Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V3.5.1.9000c47f

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH **COVER SHEET PG 2**

				2 of 9
13 C / OH NAME	Harkness, Zack		14 Filer ID	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures may have be	r political expenditures made by political co een made without the candidate's or office port this information only if they receive no	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			<u> </u>
·		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TRE	ASURER NAME	
		COMMITTEE CAMPAIGN TRE	ASURER ADDRESS	
16 CONTRIBUTION	TOTAL UNITEM	ZED POLITICAL CONTRIBUTION	DNS (OTHER THAN PLEDGES, LOANS,	
TOTALS	OR GUARANTE	ES OF LOANS, OR CONTRIBU	TIONS MADE ELECTRONICALLY)	\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARA	NTEES OF LOANS)	\$ 5,100.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITUR	ES	\$ 0.00
: · . · · · · · · · · · · · · · · · · ·	4. TOTAL POLITIC	AL EXPENDITURES		\$ 487.12
CONTRIBUTION BALANCE	5. TOTAL POLITICATION REPORTING PE		NED AS OF THE LAST DAY OF THE	\$ 13,422.47
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR		NDING LOANS AS OF THE LAST DAY	\$ 16,876.02
17 AFFIDAVIT				
		true and cor	ffirm, under penalty of perjury, that the accordant includes all information required to 5, Election Code.	
	RONDA POLING HOTARY PUBLIC, STATE OF TEXA Notary ID #13290069- Expires January 29, 202		Mel	
AFFIX NOT	FARY STAMP / SEAL ABO	OVE	Signature of Candidate or Officehold	er ·
Sworn to and subsc of <u>Februar</u>		aid Zack Harkr rtify which, witness my hand and		, th oday
Konda Ga Signature of office	LUIG er admiristering	Ronda Poline Printed name of officer adm	Notary Injustering Title of officery	ddministering oath
over a validad by Tax	vas Ethics Commission	· · · · · · · · · · · · · · · · · · ·		

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3 18 FILER NAME** 19 Filer ID Harkness, Zack **20 SCHEDULE SUBTOTALS** SUBTOTAL AMOUNT NAME OF SCHEDULE \mathbf{x} SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 5,000.00 \mathbf{x} SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 100.00 SCHEDULE B: PLEDGED CONTRIBUTIONS \$ SCHEDULE E: LOANS SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 250.00 \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 237.12 10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. TO FILER

The Instru	ection Guide explains how to complete this f	orm.	1 Total pages Schedu Sch: 1/1 Rpt: 4/9	ile A1:
FILER NAME Harkness, Z			3 Filer ID	
Date 02/07/2024	5 Full name of contributor out-of-state PAC (ID#:		7 Amount of Contribu	tion (\$) \$5,000.0
Principal occu Manager	upation / Job title (See Instructions)	9 Employer (See Instruction Jay Management	ns)	

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 5/9 2 FILER NAME 3 Filer ID Harkness, Zack TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$ 5 Date 6 Full name of contributor Amount of out-of-state PAC (ID#: In-kind contribution contribution (\$) description 02/02/2024 Deats, Pamela \$100.00 Stickers for Signs- Re-Contributor address; City; State: Zip Code Elect Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) Self- Employed Custom Built Awards 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) (See instructions) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V3.5.1.9000c47

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	sy - cal Committee	Fees Food/Beverage Expens Gift/Awards/Memorials Legal Services	nse F s Expense F	Polling Expension	ead/Rental Expense nse ense ges/Contract Labor	Transportation Equip Travel in District Travel Out of District OTHER (enter a cate	L	
			The Instruction Gu	uide explains ho	w to comp	lete this form,			
1	Total pages Schedule F1: Sch: 1/1 Rpt: 6/9	2 FILER NAM Harkness,					3 Filer ID		
4	Date	5 Payee nam						· · ·	
	02/01/2024	TUFF KID							
6	Amount (\$) \$250.00	7 Payee addr 1609 Ross	-	State;	Zip Code				
		Cleveland	d, TX 77327		1				
8	PURPOSE				- In	1 Description	·		
	OF EXPENDITURE	Contribution	(See Categories listed at the ions/Donations Mae/Officeholder/Poli	ade By		Check if Austin,	outside of Texas. Complete TX, officeholder living exp TO Opening Event	ense	
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9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/O)H	Officeholder name	Off	fice sought	t	Office held		
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POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Transl in District

Constributions/ Donations Made Candidate/Officeholder/Politi Credit Card Payment	By - Gift/Awards/Memorials Expense Printin	g Expense Travel in District g Expense Travel Out of District as/Wages/Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule G:		3 Filer ID
Sch: 1/3 Rpt: 7/9	Harkness, Zack	
4 Date	5 Payee name	
01/26/2024	FIVERR	
6 Amount (4)	7 Davis address City Catte 7:	0.1
6 Amount (\$)	7 Payee address; City; State; Zip	Code
\$32.98	P.O. Box 505000	
Reimbursement from		
x political contributions intended	Louisville, KY 40233	
8 PURPOSE		(h) Description Clear the substitute of Town Country Country T
OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
EXPENDITURE	Advertising Expense	
• '		Advertising Expenses
9 Complete ONLY if direct	Candidate/Officeholder name	Office sought Office held
expenditure to benefit		
C/OH		
Date	Payee name	
02/06/2024	FIVERR	
	FIVERR	
Amount (\$)	Payee address; City; State; Zip	Code
\$21.71	P.O. Box 505000	
Reimbursement from		
x political contributions intended	Louisville, KY 40233	
PURPOSE OF	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense
		Advertising Expenses
Complete ONLY if direct	Candidate/Officeholder name	Office sought Office held
expenditure to benefit		
C/OH		
Date	T	
	Payee name	
02/07/2024	FIVERR	
Amount (\$)	Payee address; City; State; Zip	Code
\$21.72	P.O. Box 505000	
Reimbursement from		
x political contributions	L aviavilla 1607 40000	
intended	Louisville, KY 40233	
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LAFLINDII UKE		Advertising Expenses
Complete ONLY if direct	Candidate/Officeholder name	Office sought Office held
expenditure to benefit	Candidate/Officendider name	Office sought Office held
C/OH		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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
OTHER (enter a category not listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	- Gift/Awards/Memorials Expense Printing Expense Committee Legal Services Salaries/Wages/Contract L The Instruction Guide explains how to complete this fo	
1	Total pages Schedule G:	2 FILER NAME	3 Filer ID
	Sch. 2/3 Rpt: 8/9	Harkness, Zack	
4	Date	5 Payee name	
	02/23/2024	FIVERR	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$13.94	P.O. Box 505000	
	Reimbursement from		
	x political contributions intended	Louisville, KY 40233	
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8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descript	
	EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense
		Advertising	Expenses
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9	expenditure to benefit	Candidate/Officeholder name Office so	ught Office held
	C/OH		
=	Date		
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	Amount (\$)	Payee address; City; State; Zip Code	
١.	\$13.94	P.O. Box 505000	
	Reimbursement from political contributions		
	x political contributions intended	Louisville, KY 40233	
	PURPOSE	Category (See Categories listed at the top of this schedule) Descript	ion Check if travel outside of Texas. Complete Schedule T.
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	\$26.99	P.O. Box 505000	
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	expenditure to benefit		ugin. Ollice liciu
	C/OH		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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	02/19/2024	L	Walgreens		·							
6	Amount (\$)	7	Payee addre	· ·	State;	Zip C	Code			;		
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	Reimbursement from			•			*		-		4	
	x political contributions intended		Dayton, TX	77535								
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