CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains hov	w to complete this form.	Filer ID (Ethics Commission Filers) N/A	2 Total pages filed:	
3 CANDIDATE / OFFICEHOLDER	Ms/MRs/MR Mr.	FIRST Robert	мі К.	OFFICE USE ONLY	
NAME	NICKNAME	LAST B a llew	SUFFIX	Date Received HC ESD 50	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX 223 Magnol	x: APT / SUITE #; lia, Channelview, T.	CITY: STATE: ZIP CODE X 77530	7-1-2024	
Change of Address					
5 CANDIDATE/ OFFICEHOLDER PHONE	(281)	PHONE NUMBER 468-7203	EXTENSION	Date Hand-delivered or Date Postmarked	
6 CAMPAIGN TREASURER	MS / MRS / MR	FIRST self	MI	Receipt # Amount \$	
NAME	NICKNAME	LAST	CHEEN	Date Processed	
	MORNANIE	LAST	SUFFIX	Date Imaged	
7 CAMPAIGN	STREET ADDRESS	(NO PO BOX PLEASE); APT / S	CITY;	STATE; ZIP CODE	
TREASURER	same				
ADDRESS					
(Residence or Business)					
8 CAMPAIGN	AREA CODE	PHONE NUMBER	EXTENSION		
TREASURER PHONE	() same				
9 REPORT TYPE		promoters.			
3 REFORT THE	January 15	30th day before e	Runoff	15th day after campaign treasurer appointment (Officeholder Only)	
	July 15	8th day before ele	Exceeded Modified Reporting Limit	Final Report (Atlach C/OH - FR)	
10 PERIOD	Month	Day Year	Month	Day Year	
COVERED	1 ,	/ 1 / 24	THROUGH 6	/ 30 / 24	
11 ELECTION	ELECTION DA	ATE	ELECTION TYPE		
	Month Day	Year Primary	Runoff Other		
l'		4	Description		
	5 / 4	24 General	Special		
12 OFFICE	OFFICE HELD (if any)	ssione(13 OFFICE SOUGHT (IF know Commissioner	,	
14 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFICE	CEHOLDER. THESE EXPENDITURES	S MAY HAVE BEEN MADE WITHOUT THE CAN	MADE BY POLITICAL COMMITTEES TO SUPPORT DIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR THEY RECEIVE NOTICE OF SUCH EXPENDITURES.	
	COMMITTEE TYPE	COMMITTEE NAME			
Additional Pages	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC	COMMITTEE CAMPAIGN TREA	ASURER NAME		
		COMMITTEE CAMPAIGN TRE	EASURER ADDRESS	V =	
GO TO PAGE 2					
		30 10	AGLZ		

	E / OFFICEHOLDER N FINANCE REPORT	_	FORM C/OH COVER SHEET PG 2	
15 C/OH NAME Robert Ballew			16 Filer ID (Ethics Commission Filers) N/A	
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICATION PLEDGES, LOANS, OR GUARA CONTRIBUTIONS MADE ELECTRICATION		IAN \$	
	2. TOTAL POLITICAL CONTRI (OTHER THAN PLEDGES, LOA	BUTIONS NS, OR GUARANTEES OF LOANS	(s) \$ O	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICA	L EXPENDITURE.	\$ 0	
	4. TOTAL POLITICAL EXPEND	ITURES	\$ 0	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUT OF REPORTING PERIOD	TIONS MAINTAINED AS OF THE LA	AST DAY \$ O	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT O LAST DAY OF THE REPORTIN	F ALL OUTSTANDING LOANS AS (G PERIOD	OF THE \$	
Signature of Candidate or Officeholder Please complete either option below:				
	which, witness my hand and seal of office.	100	Notary Public	
Signature of officer administer	ring oath Printed name of offi	cer administering oath	Title of officer administering oath	
(0) 11		OR	المحمل تتبع موطنات	
(2) Unsworn Declaration	on			
My name is		, and my date of birth is	is	
	(street)	(city)	(state) (zip code) (country)	
Executed in	County, State of	_ , on the day of (mont	nth) (year)	
		Signature of Cand	didate/Officeholder (Declarant)	

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

	The Instruction Guide explains how to complete this form.			
		•• Complete only if "Report Type" on page 1 is marked "Final	al Report" ••	
1	C/OH N	AME	2 Filer ID (Ethics Commission Filers)	
R	obert Ba	llew	N/A	
3	SIGNA	TURE		
	I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file. Signature of Candidate / Officeholder			
4		WHO IS NOT AN OFFICEHOLDER plete A & B below only if you are not an officeholder. ••		
	Α.	CAMPAIGN FUNDS		
	Check	only one: I do not have unexpended contributions or unexpended interest or income earned fro	om political contributions	
		Tab not have unexpended contributions of unexpended interest of income carried in	om pontical contributions.	
		I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.		
	B. ASSETS			
	Check only one:			
		I do not retain assets purchased with political contributions or interest or other income from political contributions.		
	I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.			
		s—————————————————————————————————————	ignature of Candidate	
5		HOLDER		
	•• Com	olete this section <i>only</i> if you are an officeholder ••		
		I am aware that I remain subject to filing requirements applicable to an officeholder who d file. I am also aware that I will be required to file reports of unexpended contributions if, an officeholder, I retain political contributions, interest or other income from political con political contributions or interest or other income from political contributions.	after filing the last required report as	
		Si	gnature of Officeholder	

CANDIDATE / OFFICEHOLDER FORM C/OH **CAMPAIGN FINANCE REPORT** COVER SHEET PG 1 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. 2 N/A MS / MRS / MR 3 CANDIDATE/ OFFICE USE ONLY OFFICEHOLDER Mr. Michael NAME Date Received NICKNAME LAST SUFFIX HC ESD 50 Burr 4 CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY: STATE; ZIP CODE **OFFICEHOLDER** 15410 South Drive, Channelview, TX 77530 MAILING **ADDRESS** Change of Address 5 CANDIDATE/ AREA CODE PHONE NUMBER EXTENSION Date Hand-delivered or Date Postmarked OFFICEHOLDER (281)452-6305 PHONE Receipt # Amount \$ CAMPAIGN MS / MRS / MR FIRST **TREASURER** self Date Processed NAME NICKNAME LAST SUFFIX Date Imaged 7 CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** same **ADDRESS** (Residence or Business) CAMPAIGN AREA CODE PHONE NUMBER **EXTENSION** TREASURER PHONE same 9 REPORT TYPE January 15 30th day before election Runoff 15th day after campaign treasurer appointment (Officeholder Only) July 15 Exceeded Modified 8th day before election Final Report (Attach C/OH - FR) Reporting Limit 10 PERIOD Day Year COVERED 30 / 24 24 THROUGH 11 ELECTION ELECTION DATE **ELECTION TYPE** Runoff Primary Month Dav Year Description General Special 24 OFFICE HELD (if any) 12 OFFICE 13 OFFICE SOUGHT (if known) Connissioner Commissioner 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 OFFICEHOLDER'S ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. 14 NOTICE FROM POLITICAL COMMITTEE(S) COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS **GO TO PAGE 2**

CANDIDAT	E / OFFICEHOLDER		CODE OF	
I .	N FINANCE REPORT	-	FORM C/OH COVER SHEET PG 2	
15 C/OH NAME Michael Burr			16 Filer ID (Ethics Commission Filers) N/A	
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITIC, PLEDGES, LOANS, OR GUAR CONTRIBUTIONS MADE ELECTORY		s 6	
	2. TOTAL POLITICAL CONTRI (OTHER THAN PLEDGES, LOA	BUTIONS NS, OR GUARANTEES OF LOANS	, \$ Ø	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICA	L EXPENDITURE.	\$ Ø	
	4. TOTAL POLITICAL EXPEND	ITURES	\$ <i>d</i>	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUT OF REPORTING PERIOD	TIONS MAINTAINED AS OF THE LA	ST DAY \$	
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF LAST DAY OF THE REPORTING	FALL OUTSTANDING LOANS AS C G PERIOD	OF THE \$	
18 SIGNATURE I s	wear, or affirm, under penalty of perjury, the under to be reported by me under Title 15, E	nat the accompanying report is trulection Code.	ue and correct and includes all information	
		M.B.B.	^	
		Signature of C	andidate or Officeholder	
	Please comp	lete either option below	v:	
(1) Affidavit	WILLIAM SCOTT SMITH Notary Public, State of Texas Comm. Expires 09-25-2024 Notary ID 10620429	8		
NOTARY STAMP/SEAL				
Sworn to and subscribed before me by \(\text{Volcal Dock R} \) this the \(\text{day of } \)				
20, to certify	which, witness my hand and seal of office.	C C	0	
Signature of officer administer	ing oath Printed name of office	er administering oath	Title of officer administering oath	
	, o Trinica name of office	OR	Title of billiber administering batti	
(2) Unsworn Declaration	n			
My name is		, and my date of birth is		
	(street)	, ,,	state) (zip code) (country)	
Executed in	County, State of	, on the day of (month	, 20 (year)	
		Signature of Candid	date/Officeholder (Declarant)	

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

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	The Instruction Guide explains how to complete this form.				
		•• Complete only if "Report Type" on page 1 is marked "Final	al Report" ••		
1	1 C/OH NAME 2 Filer ID (Ethics Commission Filers)				
N	lichael I	Burr	N/A		
3	SIGNA	ATURE			
	I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.				
		M.Z. Signatur	Burn re of Candidate / Officeholder		
4		RWHOIS NOT AN OFFICEHOLDER mplete A & B below <i>only</i> if you are not an officeholder. ••			
	A.	CAMPAIGN FUNDS			
	Chec	ck only one:			
		I do not have unexpended contributions or unexpended interest or income earned fro	om political contributions.		
	I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.				
	B.	ASSETS			
	Check only one:				
	1	I do not retain assets purchased with political contributions or interest or other income from political contributions.			
		I do retain assets purchased with political contributions or interest or other income fro that I may not convert assets purchased with political contributions or interest or other personal use. I also understand that I must dispose of assets purchased with political requirements of Election Code, § 254.204.	r income from political contributions to		
		Si	ignature of Candidate		
5		EHOLDER			
	•• Com	nplete this section <i>only</i> if you are an officeholder ••			
	I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.				
		JV/	15-Bur		
		Sig	nature of Officeholder		