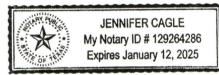
## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## 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 filed:				
3 CANDIDATE / OFFICEHOLDER	Ms/MRs/MR Mr.	FIRST Andrew	MI L	OFFICE USE ONLY				
NAME	NICKNAME Andy	LAST Nolan  APT / SUITE #:	SUFFIX	Date Received				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; 2354 Charles	APRILL COUNTY COUNTY CON COUNTY COUNT						
Change of Address  5 CANDIDATE/	AREA CODE	PHONE NUMBER	EXTENSION	AS DEFEC				
OFFICEHOLDER PHONE	(817)	991-6876	bath Hand-delivered of Date Postmarked					
6 CAMPAIGN	MS / MRS / MR	FIRST	MI	Amount \$				
TREASURER NAME	Mr.	John	R	Date Processed				
	NICKNAME	LAST	SUFFIX	Date Imaged				
		Lamond	IV					
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	street address (249 Prairie C	NO PO BOX PLEASE); APT / S Dak Ct.	SUITE #; CITY; Burleson, TX 76028	STATE; ZIP CODE				
8 CAMPAIGN	AREA CODE	PHONE NUMBER	EXTENSION					
TREASURER PHONE	(817 ) 614-9094							
9 REPORT TYPE	January 15	30th day before	election Runoff	15th day after campaign treasurer appointment (Officeholder Only)				
	July 15	8th day before e	lection Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)				
10 PERIOD COVERED	Month Day Year Month Day Year 7 / 1 / 23 THROUGH 12 / 31 / 23							
11 ELECTION	ELECTION DATE ELECTION TYPE							
	Month Day	Year Primary	Runoff Other Description					
	5 / 24 /	Z2 Genera						
12 OFFICE	OFFICE HELD (if any)  Justice of the Peace, Pct. 3							
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 / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS 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 TI	REASURER ADDRESS					
GO TO PAGE 2								

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT CO					ORM C/OH HEET PG 2
15 C/OH NAME Andrew L. Nolan			16 Filer	ID (Ethics C	ommission Filers)
17 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	1	\$	0.00
	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	\$	450.52
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS O LAST DAY OF THE REPORTING PERIOD	F THE	\$	0.00
		affirm, under penalty of perjury, that the accompanying report is true e reported by me under Title 15, Election Çode.	e and co	rrect and inc	ludes all information
		Anhw S	No	Dan	~
Signature of Candidate or Officeholder					
		Please complete either option below	v:		

(1) Affidavit



NOTARY STAMP/SEAL			N.
Sworn to and subscribed before me by	TXDL 14833 039	this the $\underline{8}$	day of MUUU,
20.24 , to certify which, witness my han	d and seal of office.	2	notary
Signature of officer administering oath	Printed name of officer administering oa	ith	Title of officer administering oath
	OR		
(2) Unsworn Declaration			
My name is	, and m	y date of birth is	·
My address is			,,
(stree	t) (	city) (state)	(zip code) (country)
Executed in County, Sta	ate of, on the	_ day of (month)	, 20 (year)
	Sig	gnature of Candidate/O	