# 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 0	Commission Filers)	2 Total pages filed: 5	
3 CANDIDATE / OFFICEHOLDER NAME	Ms/MRs/MR FIRST Paul		MI T		OFFICE USE ONLY	
IVAIVIE	NICKNAME	last Ivy		SUFFIX	by angla Frozen	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX		renton TX	75490	Joz ampacaragu.	
Change of Address						
5 CANDIDATE/ OFFICEHOLDER PHONE	( 214 )	707-8134	EXTENS	ION	Date Hand-delivered or Date Postmarked	
6 CAMPAIGN TREASURER	MS/MRS/MR Mrs.	PIRST Diana		M	Receipt # Amount \$  Date Processed	
NAME	NICKNAME	LAST		SUFFIX	Date Processed 5-25	
		lvy			Date Imaged	
7 CAMPAIGN TREASURER ADDRESS		(NO PO BOX PLEASE); APT / S	UITE #, CITY		STATE; ZIP CODE  TX 75490	
(Residence or Business)			985-985-985-985			
8 CAMPAIGN TREASURER PHONE	( 214 )	707-6408	EXTENS	ION		
9 REPORT TYPE	,					
January 15 30th day before election Runoff 15th day at treasurer a					15th day after campaign treasurer appointment (Officeholder Only)	
	July 15	8th day before ele	Jouon	ceeded Modified porting Limit	Final Report (Attach C/OH - FR)	
10 PERIOD	Month	Day Year		Month	Day Year	
COVERED					/ 31 / 2024	
11 ELECTION	ELECTION DA			ELECTION TYPE		
	Month Day	Year Primary	Runoff	Other Description		
	11 / 05	2024 General	Special	-		
12 OFFICE	OFFICE HELD (if any)	)	13 OFFICE	SOUGHT (if known	1)	
	Justice of the Peace, Pct 2 Type text here					
14 NOTICE FROM POLITICAL	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(S)	COMMITTEE TYPE   COMMITTEE NAME					
Additional Pages	GENERAL COMMITTEE ADDRESS					
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TRI	EASURER ADDRESS			
		GO TO	PAGE 2			

## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

15 C/OH NAME	aul Thomas Ivy		<b>16</b> Filer ID (Ethics Commission Filers)				
17 CONTRIBUTION TOTALS	\$ 0.00						
EXPENDITURE TOTALS		TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)					
	3. TOTAL UNITEMIZED POLITICAL E	TOTAL UNITEMIZED POLITICAL EXPENDITURE.					
	4. TOTAL POLITICAL EXPENDITU	4. TOTAL POLITICAL EXPENDITURES					
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTION OF REPORTING PERIOD	NS MAINTAINED AS OF THE LAS	\$ 131.00				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF A LAST DAY OF THE REPORTING F		*0.00				
I .	swear, or affirm, under penalty of perjury, that quired to be reported by me under Title 15, Elec		and correct and includes all information				
15330							
		Signature of Car	ndidate or Officeholder				
Please complete either option below:							
(1) Affidavit							
NOTARY STAMP/SEA	L						
Sworn to and subscribed	before me by	this the _	day of,				
20, to certify which, witness my hand and seal of office.							
Signature of officer administe	ering oath Printed name of officer	administering oath	Title of officer administering oath				
OR							
(2) Unsworn Declarati							
My name is	Paul Thomas Ivy	, and my date of birth is	01/08/1950				
My address is 1041 Co	ounty Road 4935		TX , 75490 , USA				
Executed inFann	county, State of Texas	on the 14th day of Janua  Paul Marian (month)					
		Signature of Candida	ate/Officeholder (Declarant)				

### SUBTOTALS - C/OH

#### FORM C/OH COVER SHEET PG 3

19	FILER NAME	20 Filer ID (Ethics Co	mmission Filers)			
21	21 SCHEDULE SUBTOTALS NAME OF SCHEDULE					
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$0.00			
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS				
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$0.00			
4.	SCHEDULE E: LOANS		\$0.00			
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL C	ONTRIBUTIONS	\$0.00			
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$0.00			
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICA	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS				
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$163.31			
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL F	JNDS	\$ 433.00			
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO	A BUSINESS OF C/OH	\$ 0,00			
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL C	CONTRIBUTIONS	\$ 0.00			
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTO FILER	JTIONS RETURNED	\$0.00			

#### EXPENDITURES MADE BY CREDIT CARD

### SCHEDULE F4

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

if the requested information is not applicable, <b>DO NOT include this page in the report.</b>								
EXPENDITURE CATEGORIES FOR BOX 10(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Politic	rage Expense Memorials Expense ces mplete this form.	Office Ov Polling E Printing E	Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)  R EACH CREDIT CARD ISSUER				
	I	proto tino romi		002 11 11 11 11 11 11 11 11				
1 TOTAL PAGES SCHEDULE F4: 1	Paul Thomas Ivy				3 FILER ID (Ethics Commission Filers)			
4 TOTAL OF UNITEMIZED EXP	ENDITURES CHARGED TO A	CREDIT CARD 1			\$ 163.31			
5 CREDIT CARD ISSUER	Name of financial institution  Citibank, N.A. Mastercard							
6 PAYMENT	(a) Amount Charged	(b) Date Expenditu	re Charged	(c) Date(s) Credit Card Is	ssuer Paid			
	\$ 163.31	10/07/2024		11/08/2024				
7 PAYEE	(a) Payee name		(b) Payee add	dress;	City, State, Zip Code			
	Vistaprint Nether	rlands B.V.	Hudson	weg 8, 5928 LV	V Venlo, The Netherlands			
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)			(b) Description				
EXPENDITURE  Political	Advertising Expenses			Door Hangers				
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office Sought Office Held							
PAYMENT	(a) Amount Charged	(b) Date Expenditu	re Charged	(c) Date(s) Credit Card Is	ssuer Paid			
	\$							
PAYEE	(a) Payee name		(b) Payee add	dress;	City, State, Zip Code			
PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top of this schedule)  (b) Description			(b) Description				
Non-Political	(c) 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	Candidate / Officeholder n	name	Off	ice Sought	Office Held			
PAYMENT	(a) Amount Charged	(b) Date Expenditu	re Charged	(c) Date(s) Credit Card Is	ssuer Paid			
	7							
PAYEE	(a) Payee name		(b) Payee ad	dress;	City, State, Zip Code			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)			(b) Description				
Political Non-Political	(c) Check if travel outs	side of Texas. Complete	e Schedule T	Check if	Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder n			ice Sought	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.

- The requested information to not applicable, be not installed the page in the report.								
EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Politi Credit Card Payment	F By (	event Expense ees cood/Beverage Expense Sift/Awards/Memorials Expense egal Services The Instruction Guide explain	Loan Repayment/Reimbursement Office Overhead/Rental Expense erage Expense ds/Memorials Expense Printing Expense			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 FILER NAME Paul Thomas Ivy			3 Filer ID (Ethics Commission Filers)			
4 Date	5 Payee name							
09/19/2024	N T Sign Werks Inc.							
6 Amount (\$)	7 Payee address; City;			City;	State;	Zip Code		
433.00  Reimbursement from political contributions intended	Reimbursement from political contributions 505 E. Mulberry, St. Leon			Leonard	TX	75452		
8 PURPOSE		ee Categories listed at the top of this s	chedule)	(b) Description				
OF EXPENDITURE	Advertising Expenses Yard Sig			Yard Sigi	ıns			
	(c) Che	eck if travel outside of Texas. Complete Sci	Check if Austin,	TX, officeholder living e	expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		e / Officeholder name		Office sought		Office held		
Date 11/08/2024	Payee name Sears Cr	edit Cards						
Amount (\$) 163.31	Payee address;			City;	State;	Zip Code		
		x 78051		Phoenix	AZ	85062		
PURPOSE	Category (S	see Categories listed at the top of this s	chedule)	Description				
OF EXPENDITURE	Adve	Advertising Expense Door Hang			gers			
	Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense					expense		
Complete ONLY if direct expenditure to benefit C/OH  Candidate / Officeholder name Office sought			Office sought		Office held			
Date	Payee name				TT-15-0-30-30-0-0-0-1-1			
Amount (\$)	Payee addre	ess;		City;	State;	Zip Code		
Reimbursement from political contributions intended								
PURPOSE OF EXPENDITURE	Category (S	ee Categories listed at the top of this s	chedule)	Description				
	Che	eck if travel outside of Texas. Complete Sc	hedule T.	Check if Austin,	in, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH		e / Officeholder name		Office sought		Office held		

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