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. MS / MRS / MR 3 CANDIDATE/ FIRST MI **OFFICEHOLDER** ANSON. NAME NICKNAME SUFFIX 4 CANDIDATE / ADDRESS / PO BOX; STATE: ZIP CODE APR 0 8 2025 **OFFICEHOLDER** 122 E. I OWA DR MAILING ADMINISTRATION DEPARTMENT **ADDRESS** CITY OF HARKER HEIGHTS, TEXAS Change of Address et addie 5 CANDIDATE/ Date Hand-delivered or Date Postmarked **OFFICEHOLDER** PHONE Receipt # 6 CAMPAIGN Amount \$ TREASURER R NAME Date Processed STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; SUFFIX Date Imaged CAMPAIGN STATE: ZIP CODE TREASURER **ADDRESS** HARKER HEISHS (Residence or Business) CAMPAIGN TREASURER PHONE (254)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 Month Day COVERED THROUGH 11 ELECTION **ELECTION DATE** ELECTION TYPE Primary Runoff Other Year Description General Special 12 OFFICE OFFICE HELD (if any) 13 OFFICE SOUGHT (if known) 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 KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDER'S 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

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

	and the second s				
15 C/OH NAME	ichelle Book	CEP	16 Filer ID (Ethics Commission Filers)		
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POL PLEDGES, LOANS, OR G CONTRIBUTIONS MADE	LITICAL CONTRIBUTIONS (OTHER THA BUARANTEES OF LOANS, OR ELECTRONICALLY)	s		
	2. TOTAL POLITICAL CON (OTHER THAN PLEDGES,	NTRIBUTIONS LOANS, OR GUARANTEES OF LOANS	, \$		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLI	ITICAL EXPENDITURE.	\$ 200,00		
	4. TOTAL POLITICAL EXP	ENDITURES	\$ 200,00		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTR OF REPORTING PERIOD	RIBUTIONS MAINTAINED AS OF THE LA	ST DAY \$		
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUN LAST DAY OF THE REPORT	NT OF ALL OUTSTANDING LOANS AS C RTING PERIOD	F THE \$		
18 SIGNATURE I st	wear, or affirm, under penalty of perju uired to be reported by me under Title	iry, that the accompanying report is tru 15, Election Code.	le and correct and includes all information		
and Ble					
		Signature of Ca	andidate or Officeholder		
	Please cor	mplete either option belov			
	i icase coi	inplete ettiler option belov	٧.		
(1) Affidavit	JENNIFER MCCANN Notary ID #131475072 My Commission Expires March 5, 2026				
		Sooken this the	8th day of April,		
no.	hich, witness my hand and seal of office				
		ER MCCANN	Natari		
Signature of officer administeri	ng oath Printed name of	f officer administering oath	Title of officer administering oath		
		OR			
(2) Unavers Dealessti					
(2) Unsworn Declaration	a .				
My name is		, and my date of birth is			
			8		
	(street)	'	tate) (zip code) (country)		
Executed in	County, State of		The second of th		
	Oddiny, State of	, on the day of (month)	, 20 (vear)		
			000.7		
		Signature of Candid	ate/Officeholder (Declarant)		

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	FILER NAME				
	.1	20 Filer ID (Ethics Co			
1	Anical Karakan	san Booker			
_		SW SUOREI			
21	SCHEDULE SUBTOTALS				
1	NAME OF SCHEDULE		SUBTOTAL		
-			AMOUNT		
1.	CONEDITION AND MONTH AND MARKET				
	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$		
2.	SCHEDULE A2: NON-MONETARY (IN KIND) BOUTLONG CONTRACT		\$		
	GOVERNMENT (IN-KIND) POLITICAL CONTRIBUTION:	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS			
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 🔎		
			,		
4.	SCHEDULE E: LOANS				
7.5			\$		
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL	CONTRIBUTIONS	2 /3		
	E ENDITORES MADE I ROM POLITICAL	CONTRIBUTIONS	* 600,00		
6.	COURDING SO THIS STATE OF THE S		700		
٥.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$		
			* -		
7.	SCHEDULE E3: PURCHASE OF INVESTMENTS MARK				
000000	OCHEDOLE FS. PORCHASE OF INVESTMENTS MADE FROM POLITICA	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS			
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD				
			•		
9.	SCHEDING C. BOUTION EXPENDED				
	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL F	UNDS	\$		
0.000					
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO	A BUSINESS OF SIGN	•>		
		A BUSINESS OF C/OH	\$		
11.					
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL	CONTRIBUTIONS	s <		
			•		
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIB	LITIONS BETURNES			
	TO FILER	OTIONS RETURNED	\$		
_					

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

Advertising Expense Accounting/Banking

Consulting Expense

Credit Card Payment

6 Amount (\$) 1200100

SCHEDULE G

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Fees Solicitation/Fundraising Expense Food/Beverage Expense Gift/Awards/Memorials Expense Transportation Equipment & Related Expense Polling Expense Contributions/Donations Made By Travel In District Printing Expense Salaries/Wages/Contract Labor Candidate/Officeholder/Political Committee Travel Out Of District Other (enter a category not listed above) Legal Services The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Reimbursement from political contributions

intended	MARKER Keishts, TX	(1/6548	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Placens CAMPAIGNSINS	(Ampaign	
9	T. T. Complete Scriedale 1.	Check if Austin, TX,	officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
Amount (\$)	Payee address;	City;	State; Zip Code
Reimbursement from political contributions intended			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
Amount (\$) Reimbursement from political contributions intended	Payee address;	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin TX o	fficeholder living expense
complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS SO	CHEDULE AS NEEDED	





410 Robison Drive Harker Heights, Texas 76548 254-698-1133

Date

Estimate #

1/10/2025

7552

Name / Address

Anson Booker For HH City Council 122 East Iowa Harker Heights, Texas 76548

Month

January

Description

Qty

Cost

Total

Political Sign Placement Contract to place (30) 4"x4" political signs in the city limits of Harker Heights, Texas 76548.

1 1,200.00

1,200.00T

Signs will be placed prior to election and then picked up after election. Signs will then be delivered to Mr. Booker's home.

Tax I.D. Number 74-2933232

CONDITIONS OF PROPOSED CONTRACT

- Client must pay 50% down and balance upon completion on all work except lawn care agreements those must be paid in full. 2. Weather conditions can cause a variance in completion of job.
- 3. Central Texas Home & Lawn Transitions is not responsible for damage to plant life when resulting from negligence or overt acts of the Owner, his agents or employees, or acts of God, such as wind, hail, drought, ect., or willful and/or negligent acts over which Central Texas Home & Lawn Transitions has no control.
- 4.No refund shall be given under any circumstance, only a customer credit if authorized by management.

X_____

I have read, understand and accept all conditions of contract.

THANK YOU FOR YOUR TRUST IN OUR COMPANY

Subtotal

\$1,200.00

Sales Tax (0.0%)

\$0.00

Total

\$1,200.00