CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how to	complete this form.	1 Filer ID (Et	nics Commission Filers)	2 Total pages	filed: 5
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR Mr	FIRST James		мі В		E USE ONLY
NAME	NICKNAME	LAST Tucker		SUFFIX	Date Received	MEINE
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	P.O. Box 4674 Victoria, TX 7	1	CITY; STA	TE; ZIP CODE	Ini	2 3 2024
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (361)	935-2278	EXT	ENSION		od or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS / MRS / MR MS	FIRST Christa LAST		MI	Receipt #	Amount \$
	NICKNAME	Zimmermann		SUPPLA	Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	602 Mason Circ Victoria TX 779		UITE #;	CITY;	STATE;	ZIP CODE
8 CAMPAIGN TREASURER PHONE	(361)	PHONE NUMBER 655-7527	EXT	ENSION		
9 REPORT TYPE	January 15 July 15	30th day before ele		Runoff Exceeded Modified Reporting Limit	treasurer (Officehol	after campaign appointment der Only) ort (Attach C/OH - FR)
10 PERIOD COVERED	Month 2	Day Year 3 / 24	THROUGH	Month 2	Day Ye / 26 / 26	
11 ELECTION	Month Day 3 / 5 /	Year Primary 24 General	Runoff Special	ELECTION TYPE Other Description		
12 OFFICE	OFFICE HELD (if any)			TICE SOUGHT (if known that Commiss		3
14 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFICEH	OF POLITICAL CONTRIBUTIONS OLDER. THESE EXPENDITURE: NO OFFICEHOLDERS ARE REQUI	S MAY HAVE BEEN M	ADE WITHOUT THE CAN	DIDATE'S OR OFFICEH	OLDER'S KNOWLEDGE OR
00,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		COMMITTEE NAME			-	
Additional Pages	GENERAL	COMMITTEE ADDRESS	EASURER NAME			
		COMMITTEE CAMPAIGN TR	EASURER ADDRE	SS		
		GO TO	PAGE 2			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME James B Tucker			16 File	r ID (Ethics	Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICATION PLEDGES, LOANS, OR GUARA CONTRIBUTIONS MADE ELECTRICATION		HAN	\$	
	2. TOTAL POLITICAL CONTRI (OTHER THAN PLEDGES, LOA		NS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICA	L EXPENDITURE.		\$	
	4. TOTAL POLITICAL EXPEND	ITURES		\$	1,345.76
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTOR REPORTING PERIOD	TIONS MAINTAINED AS OF THE	LAST DAY	\$	79.67
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT O LAST DAY OF THE REPORTIN	F ALL OUTSTANDING LOANS A G PERIOD	S OF THE	\$	
(1) Affidavit	Please comp	Signature o	f Candidate	or Officeho	older
NOTARY STAMP/SEA Sworn to and subscribed 20, to certify		this	the	day of _	
Signature of officer administe	ering oath Printed name of of	ficer administering oath		Title of offi	cer administering oath
(2) Unsworn Declarati		OR	40/45	2/4074	
My name is James B T	ucker	, and my date of bir	th is 12/15	1914	 ·
My address is P.O. Box	4674	Victoria	TX	77903	, USA
Executed in Victoria	(street)County, State of Texas	, on the 23rd day of Fe	nonth)	(zip code) , 20 24 (year	

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

	FILER NAME mes B Tucker 20 Filer ID (Ethics C	Commission Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	s
4.	SCHEDULE E: LOANS	\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 1,345.76
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	s 1,800.00
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Manes/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.			ory not listed above)
Total pages Schedule F1:	2 FILER NAME James B Tucker		3 Filer	ID (Ethics	Commission Filers)
Date	5 Payee name				
02/23/2024	Kurtz Printing				
1,345.76	7 Payee address: 110 Pin Oak Ct, Victoria, TX 77901	City;		State;	Zip Code
	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
PURPOSE OF EXPENDITURE	Advertising Expense	Mailers			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, offic	eholder 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
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			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
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,		TX, officeholder living expense	
Complete ONLY if direct	Candidate / Officeholder name	Office sought			Office held

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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

EXPENDITURE CATEGORIES FOR BO	JX 8(a)
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Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

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 Travel Out Of District Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.				
1 Total pages Schedule G:	2 FILER NAME James B Tucker		3 Filer ID (Ethics Commission Filers)			
4 Date 02/23/2024	5 Payee name Lamar Advertising					
6 Amount (\$) 1,650.00 Reimbursement from political contributions intended	7 Payee address; 4507 N Main Victoria, TX 77904	City;	State; Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Digital Billboard	ds			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin,	TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held			
Date 02/23/2024	Payee name The Victoria Livestock Show					
Amount (\$) 150.00 Reimbursement from political contributions intended	Payee address; P.O. Box 2255 Victoria, TX 77902	City;	State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Event Sponsor				
	Check if travel outside of Texas. Complete Schedule T.	T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/G	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, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held			