

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.			1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 5		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mrs	FIRST Tammy	MI L	OFFICE USE ONLY		
	NICKNAME	LAST Reeves	SUFFIX	Date Received 4/26/2024 NCP		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX: 2007 White Wing Cove	APT / SUITE #:	CITY: Westlake	STATE: TX ZIP CODE: 76262		
Change of Address						
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE ( 817 )	PHONE NUMBER 817-705-9358	EXTENSION			
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs	FIRST Tammy	MI L	Receipt # _____ Amount \$ _____		
	NICKNAME	LAST Reeves	SUFFIX	Date Hand-delivered or Date Postmarked 4/26/2024		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: 2007 White Wing Cove CITY: Westlake STATE: TX ZIP CODE: 76262					
8 CAMPAIGN TREASURER PHONE	AREA CODE ( 817 )	PHONE NUMBER 705-9358	EXTENSION			
9 REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)		
	<input type="checkbox"/> July 15	<input checked="" type="checkbox"/> 8th day before election	<input checked="" type="checkbox"/> Exceeded Modified Reporting Limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month 1	Day / 25 /	Year / 24 /	Month 4	Day / 25 /	Year / 24 /
11 ELECTION	ELECTION DATE Month 05 / Day 04 / Year / 24 /		ELECTION TYPE Primary General Runoff Special Other Description			
12 OFFICE	OFFICE HELD (if any)			13 OFFICE SOUGHT (if known) Town Council		
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.					
Additional Pages	COMMITTEE TYPE <input checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME Westlake Excellence PAC COMMITTEE ADDRESS [REDACTED], Austin, TX 78767 COMMITTEE CAMPAIGN TREASURER NAME John Buxie COMMITTEE CAMPAIGN TREASURER ADDRESS [REDACTED], Austin, TX 78767				

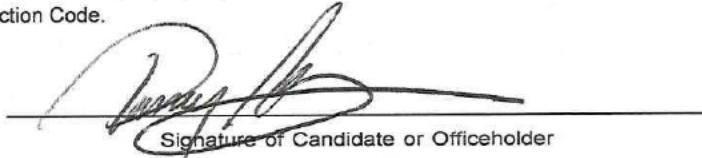
GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME Tammy L Reeves	16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) \$ 0
EXPENDITURE TOTALS	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 3810.71
CONTRIBUTION BALANCE	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE. \$ 125.87
OUTSTANDING LOAN TOTALS	4. TOTAL POLITICAL EXPENDITURES \$ 125.87
	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 0
	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0

18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

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 administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Tammy Reeves, and my date of birth is \_\_\_\_\_.

My address is 2007 White Wing, Westlake, TX, 78262, USA.

(street)

(city)

(state)

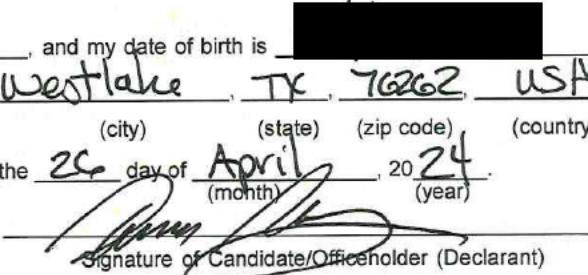
(zip code)

(country)

Executed in Tarrant County, State of Texas, on the 24 day of April, 20 24.

(month)

(year)

  
Signature of Candidate/Officeholder (Declarant)

**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3**

<b>19</b> FILER NAME Tammy L Reeves	<b>20</b> Filer ID (Ethics Commission Filers)
<b>21</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 0
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 3810.71
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4. SCHEDULE E: LOANS	\$ 0
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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

<p>The Instruction Guide explains how to complete this form.</p>				<p><b>1</b> Total pages Schedule A2: <b>2</b></p>
<p><b>2</b> FILER NAME Tammy L Reeves</p>				<p><b>3</b> Filer ID (Ethics Commission Filers)</p>
<p><b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>				<p><b>\$</b> <b>0</b></p>
<p><b>5</b> Date 4/24/24</p>	<p><b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Westlake Excellence PAC .....</p>			<p><b>8</b> Amount of Contribution \$ <b>992.46</b></p>
	<p><b>7</b> Contributor address; [REDACTED] Austin</p>	<p>City; TX</p>	<p>State; Zip Code 78767</p>	<p><b>9</b> In kind contribution description campaign mail</p>
<p>Check if travel outside of Texas. Complete Schedule T.</p>				
<p><b>10</b> Principal occupation / Job title (FOR NON JUDICIAL) (See Instructions)</p>				<p><b>11</b> Employer (FOR NON JUDICIAL) (See Instructions)</p>
<p><b>12</b> Contributor's principal occupation (FOR JUDICIAL)</p>				<p><b>13</b> Contributor's job title (FOR JUDICIAL) (See Instructions)</p>
<p><b>14</b> Contributor's employer/law firm (FOR JUDICIAL)</p>				<p><b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>
<p><b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 4/24/24</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Westlake Excellence PAC .....</p>			<p>Amount of Contribution \$ <b>992.46</b></p>
	<p>Contributor address; [REDACTED] Austin</p>	<p>City; TX</p>	<p>State; Zip Code 78767</p>	<p>In kind contribution description campaign mail</p>
<p>Check if travel outside of Texas. Complete Schedule T.</p>				
<p>Principal occupation / Job title (FOR NON JUDICIAL) (See Instructions)</p>				<p>Employer (FOR NON JUDICIAL) (See Instructions)</p>
<p>Contributor's principal occupation (FOR JUDICIAL)</p>				<p>Contributor's job title (FOR JUDICIAL) (See Instructions)</p>
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>				<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>				

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A2: 2
2 FILER NAME Tammy L Reeves				3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$ 0				
5 Date 4/24/24	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Westlake Excellence PAC			8 Amount of Contribution \$ 992.46 9 In-kind contribution description campaign mail
	7 Contributor address: [REDACTED]	City: Austin	State: TX	Zip Code: 78767
Check if travel outside of Texas. Complete Schedule T.				
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)				11 Employer (FOR NON-JUDICIAL)(See Instructions)
12 Contributor's principal occupation (FOR JUDICIAL)				13 Contributor's job title (FOR JUDICIAL)(See Instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)				15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date 4/24/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Westlake Excellence PAC			Amount of Contribution \$ 833.33 In-kind contribution description digital advertising
	Contributor address: [REDACTED]	City: Austin	State: TX	Zip Code: 78767
Check if travel outside of Texas. Complete Schedule T.				
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)				Employer (FOR NON-JUDICIAL)(See Instructions)
Contributor's principal occupation (FOR JUDICIAL)				Contributor's job title (FOR JUDICIAL) (See Instructions)
Contributor's employer/law firm (FOR JUDICIAL)				Law firm of contributor's spouse (if any) (FOR JUDICIAL)
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