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	hics Commission Filers)	2 Total pages f	iled:
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR ML	Darre!		Ğ	OFFICE	USEONLY
	NICKNAME	Maze		SUFFIX		LED
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE #:	city; sta a Granze	•	JAN Jewi	14 2025 me mach B. Africa
Change of Address						B. HEFNER
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (35/2)	PHONE NUMBER 644-085		ENSION	Date Hand VELLOR	AS ADMINISTRATOR doublete Pastmarked Amount \$
6 CAMPAIGN TREASURER NAME	MS/MRS/MR MRS	FIRST Imi		SUFFIX	Date Processed	TAMOUNT \$
	NICKNAME	MGTA	Date Imaged			
7 CAMPAIGN TREASURER ADDRESS		NO PO BOX PLEASE); APT / S M 2436 Lo		CITY;	STATE;	ZIP CODE
(Residence or Business)				<u></u>		
8 CAMPAIGN TREASURER PHONE	AREA CODE (5/2)	PHONE NUMBER 787-96		ENSION	-	
9 REPORT TYPE	January 15	30th day before e	election	Runoff		after campaign appointment ler Only)
	July 15	8th day before ele	ection	Exceeded Modified Reporting Limit	Final Repo	ort (Attach C/OH - FR)
10 PERIOD COVERED	Month OT	Day Year / 01 / 2024	THROUGH	Month $12/$	Day Yes	
11 ELECTION	ELECTION DA	TE		ELECTION TYPE		
	Month Day	Year Primary	Runoff	Other Description		
_	/ /	General General	Special	Bescription		
12 OFFICE	OFFICE HELD (if any)		13 OF	EXCE SOUGHT (If known	stable	
14 NOTICE FROM POLITICAL	POLITICAL THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNC CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXP			LDER'S KNOWLEDGE OR		
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME				
Additional Pages	GENERAL	COMMITTEE ADDRESS				
	SPECIFIC	COMMITTEE CAMPAIGN TRI	EASURER NAME			
		COMMITTEE CAMPAIGN TR	REASURER ADDRES	ss		
		GO TO	PAGE 2	-		

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME	11 Maze	16 Filer ID (Ethics Commission Filers)					
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTION PLEDGES, LOANS, OR GUARANTEES OF LOAN CONTRIBUTIONS MADE ELECTRONICALLY)	· @					
i	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARAN	TEES OF LOANS)					
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0					
	4. TOTAL POLITICAL EXPENDITURES	\$ 8					
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINE OF REPORTING PERIOD	ED AS OF THE LAST DAY \$					
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTAND LAST DAY OF THE REPORTING PERIOD	ING LOANS AS OF THE \$					
	wear, or affirm, under penalty of perjury, that the accompar	nying report is true and correct and includes all information					
Signature of Candidate or Officeholder							
Please complete either option below:							
(1) Affidavit							
NOTARY STAMP/SEAL	-	_					
Sworn to and subscribed	before me by <u>Darrell Maze</u>	this the 14th day of January 2025					
	which, witness my hand and seal of office.						
Signature of officer administe		C10C+10513 /121111111111111111111111111111111111					
Signature of officer administer	ring oath Printed name of officer administering o	atn Hitle of Officer administering Cath					
(2) Unsworn Declaration							
(2) 2							
My name is	, and m	ny date of birth is					
My address is							
Executed in	(street) County, State of, on the	(city) (state) (zip code) (country) day of, 20 (month) (year)					
		ignature of Candidate/Officeholder (Declarant)					

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

		The Instruction Guide explains how to complete this	form.
		Complete only if "Report Type" on page 1 is marked "Fi	inal Report" ••
1	C/OH N		2 Filer ID (Ethics Commission Filers)
_	100	arrell Maze	
3	SIGNA	IURE	
	designa	expect any further political contributions or political expenditures in connection with ting a report as a final report terminates my campaign treasurer appointment. I also contributions or make any campaign expenditures without a campaign treasurer	o understand that I may not accept any
4		WHO IS NOT AN OFFICEHOLDER plete A & B below <i>only</i> if you are not an officeholder. ••	
	A.	CAMPAIGN FUNDS	
	Checl	conly one:	
	X	I do not have unexpended contributions or unexpended interest or income earned	from political contributions.
		I have unexpended contributions or unexpended interest or income earned from personal use. I also understand that I must file an annual report of unexpended unexpended contributions or unexpended interest or income earned on political confiling this final report. Further, I understand that I must dispose of unexpended politicals or income earned on political contributions in accordance with the requirement.	come earned on political contributions to d contributions and that I may not retain ontributions longer than six years after litical contributions and unexpended
	B.	ASSETS	
	Chec	conly one:	
	\bowtie	I do not retain assets purchased with political contributions or interest or other inco	ome from political contributions.
		I do retain assets purchased with political contributions or interest or other income that I may not convert assets purchased with political contributions or interest or of personal use. I also understand that I must dispose of assets purchased with political contributions or interest or of personal use. I also understand that I must dispose of assets purchased with political contributions or interest or other income that I may not convert assets purchased with political contributions or interest or other income that I may not convert assets purchased with political contributions or interest or other income that I may not convert assets purchased with political contributions or interest or other income that I may not convert assets purchased with political contributions or interest or other income that I may not convert assets purchased with political contributions or interest or other political contributions or interest or other political contributions.	ther income from political contributions to
5		EHOLDER plete this section <i>only</i> if you are an officeholder ••	
		I am aware that I remain subject to filing requirements applicable to an officeholder wh file. I am also aware that I will be required to file reports of unexpended contributions an officeholder, I retain political contributions, interest or other income from political contributions or interest or other income from political contributions.	if, after filing the last required report as
			Signature of Officeholder