FORM C/OH CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00086276 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Ms. Sarah E. NAME Date Received **ELECTRONICALLY FILED** 01/17/2022 NICKNAME LAST **SUFFIX** Stogner CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** PO Box. 1383 MAILING Receipt # Amount **ADDRESS** Change of Address Monahans, TX 79756 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Sarah E. NAME NICKNAME LAST **SUFFIX** Stogner **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE; **TREASURER** PO Box 1383 **ADDRESS** (Residence or Business) Monahans, TX 79756 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (432) 664-0641 **PHONE** REPORT **TYPE** January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR) July 15 8th day before election Exceeded modified

Month

Month

None

Day

Day

03/01/2022

OFFICE HELD (if any)

ELECTION DATE

07/01/2021

Year

Year

PERIOD

10 ELECTION

11 OFFICE

COVERED

THROUGH

χ Primary

General

reporting limit

Month

ELECTION TYPE

Runoff

Special

Day

12/31/2021

12 OFFICE SOUGHT (if known)

Railroad Commissioner

Year

Other

FORM C/OH COVER SHEET PG 2

13 C / OH NAME	Stogner, Sarah E. (Ms.) 14 Filer ID 00086276			(Ethics Commission Fi	ilers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without to d officeholders are required to report this information	the candidate's or office	eholder's knowledge oi	r
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS		I ZED POLITICAL CONTRIBUTIONS (OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$	0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			\$	0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$	0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			\$	0.00
17 AFFIDAVIT					
		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.			
		Ms	Sarah E. Stogner		
			Candidate or Officehol	lder	-
AFFIX NO	TARY STAMP / SEAL AB	· ·			
		aid	, this the	day	
of	, 20, to ce	ertify which, witness my hand and seal of office.			
Signature of office	cer administering	Printed name of officer administering	Title of office	r administering oath	-

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

			3	of 5
18 FILER NAM Stogner, S	19 Filer ID 00086276	(Ethics Commission File	ers)	
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOU	INT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0.00
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3. X	3. X SCHEDULE B: PLEDGED CONTRIBUTIONS			0.00
4. X	4. X SCHEDULE E: LOANS			0.00
5. X	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS			0.00
6. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
7. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	0.00
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	0.00
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	

PLEDGED CONTRIBUTIONS	SCHEDULE B		
The Instruction Guide explains how to complete this form.	1 Total pages Schedule B: Sch: 1/1 Rpt: 4/5		
2 FILER NAME Stogner, Sarah E. (Ms.)	3 Filer ID (Ethics Commission Filers) 00086276		
TOTAL OF UNITEMIZED PLEDGES	\$ 0.00		
7 Pledgor Address; City; State; Zip Code	8 Amount of pledge (\$) 9 In-kind description (If applicable)		
10 Principal occupation / Job title (See Instructions) 11 Employer (See Instruc			

	LOANS					SCHEDU	ILE E
	The Instruction Guide explains how to complete this form.			1	ages Schedule E: /1 Rpt: 5/5		
	FILER NAME Stogner, Sarah E. (Ms.)				3 Filer ID 00086	(Ethics Commission 276	n Filers)
4 .	TOTAL OF UN	IITEMIZED LOANS			'	\$	0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount (\$)	1
1	ls lender a financial institution?	8 Lender address; Cit	ty; State;	Zip Code		10 Interest Rate	
						11 Maturity Date	
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See Instruc	tions)	•	
14	Description of Coll None	ateral		15 Check if personal fund	s were deposite	d into political account (See Instructions	
	GUARANTOR INFORMATION	17 Name of guarantor		L		19 Amount Guarant	eed (\$)
[not applicable	18 Guarantor address; Cit	ty; State;	Zip Code			
20	Principal occupation	on		21 Employer (See Instruc	tions)	1	

FORM C/OH CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00086276 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Ms. Sarah E. NAME Date Received **ELECTRONICALLY FILED** 05/13/2022 NICKNAME LAST **SUFFIX** Stogner CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** PO Box. 1383 MAILING Receipt # Amount **ADDRESS** Change of Address Monahans, TX 79756 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Sarah E. NAME NICKNAME LAST **SUFFIX** Stogner STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE; **TREASURER** PO Box 1383 **ADDRESS** (Residence or Business) Monahans, TX 79756 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (432) 664-0641 **PHONE**

January 15

Day

Day

05/24/2022

OFFICE HELD (if any)

ELECTION DATE

02/20/2022

Year

Year

July 15

Month

Month

None

REPORT TYPE

PERIOD

10 ELECTION

11 OFFICE

COVERED

30th day before election

8th day before election

THROUGH

Primary

General

Runoff

Exceeded modified reporting limit

Month

ELECTION TYPE

χRunoff

Special

Day

05/11/2022

12 OFFICE SOUGHT (if known)

Railroad Commissioner

Year

Other

15th day after campaign treasurer appointment (officeholder only)
Final Report (Attach C/OH-FR)

FORM C/OH COVER SHEET PG 2

13 C / OH NAME	Stogner, Sarah E. (M	14 Filer ID 00086276	(Ethics Commission Filers)	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political expenditor. These expenditures may have been made without officeholders are required to report this information.	the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
ш°	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	S)	\$ 332,724.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00	
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 124.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.		
		Ms.	Sarah E. Stogner	
		Signature of	Candidate or Officeho	lder
AFFIX NO	TARY STAMP / SEAL ABO	DVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of office.		
Signature of office	cer administering	Printed name of officer administering	Title of office	r administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

			C	OVER SHEET	PG 3 3 of 5
	ER NAN		19 Filer ID	(Ethics Commission	Filers)
		Sarah E. (Ms.) E SUBTOTALS	00086276	T	
l		SCHEDULE		SUBTOTAL AN	MOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	124.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 3	32,600.00
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.		SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	

The Instruction Guide explains now to complete this form. 2 FILER NAME Stogner, Sarah E. (Ms.) 4 Date 03/10/2022 5 Full name of contributor out-of-state PAC (ID#:) Bowie County Patriots 6 Contributor address; City; State; Zip Code Nash, TX 75569	Total pages Schedule A1: Sch: 1/1 Rpt: 4/5 Filer ID (Ethics Commission Filers) 00086276 Amount of Contribution (\$) \$124.00
Stogner, Sarah E. (Ms.) 4 Date	00086276 Amount of Contribution (\$)
4 Date 03/10/2022 5 Full name of contributor out-of-state PAC (ID#:) Bowie County Patriots 6 Contributor address; City; State; Zip Code Nash, TX 75569	
9 Employer (See Instructions)	

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 5/5 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Stogner, Sarah E. (Ms.) 00086276 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS **6** Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 05/11/2022 Wyatt, Ashley \$332,600.00 Payment for Media 7 Contributor address; City; State; Zip Code Services and Ad Buy from Catalyst Partners Houston, TX 77019 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) (See instructions) 11 Employer (FOR NON-JUDICIAL) Rancher Antina Cattle Co 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 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)

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction C	Guide explains how to comple	ete this form.	1 Filer ID (Ethics Comm 00086276		2 Total pages file	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE U	JSE ONLY
OFFICEHOLDER NAME	Ms.	Sarah E.			Date Received	
					ELECTRONICA	LLY FILED
	NICKNAME	LAST		SUFFIX	05/16/2022	
		Stogner				
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	ΓY;	ZIP CODE	Date Hand-delivered or	Date Postmarked
OFFICEHOLDER MAILING ADDRESS	PO Box. 1383				Receipt #	Amount
Change of Address	Monahans, TX 79756					
Change of Address	Monanans, 17 19150				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER NAME	Ms.	Sarah E.				
	NICKNAME	LAST		SUFFIX		
		Stogner		SUFFIX		
		Stogner				
6 CAMPAIGN	STREET ADDRESS (NO PO	ROX PI FASE):	AP	T / SUITE #; CITY;	STA	TE; ZIP CODE
TREASURER ADDRESS	PO Box 1383	DOX 1 227.02,		17 Jone 1, July 1, 19		112, 2 2002
(Residence or Business)	Monahans, TX 79756					
7 CAMPAIGN	AREA CODE PHON	E NUMBER I	EXTENSION			
TREASURER PHONE	(432) 664-0641					
8 REPORT TYPE	January 15	30th day before	e election X	Runoff	15th day after cam	nnainn treasurer
]	5 6.655		appointment (office	
	July 15	8th day before	election	Exceeded modified reporting limit	Final Report (Attac	ch C/OH-FR)
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	05/12/2022	TH	HROUGH	05/14/202	2	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	P	Primary	X Runoff	Other	
	05/24/2022		General	Special		
		<u> </u>	Jenera:	эрсони		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
	, ,,			Railroad Commis		
				•		
		GO 1	TO PAGE 2			

FORM C/OH COVER SHEET PG 2

13 C / OH NAME	Stogner, Sarah E. (Ms.) 14 Filer ID 00086276			Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without in I officeholders are required to report this information	the candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 1,667,400.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00	
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.		
		Ms. S	Sarah E. Stogner	
		Signature of	Candidate or Officehol	der
AFFIX NO	TARY STAMP / SEAL AB	DVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
of	, 20, to co	ertify which, witness my hand and seal of office.		
Signature of office	eer administering	Printed name of officer administering	Title of officer	administering oath

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 4 19 Filer ID 18 FILER NAME (Ethics Commission Filers) 00086276 Stogner, Sarah E. (Ms.) **20 SCHEDULE SUBTOTALS** SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 1,667,400.00 \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 3. SCHEDULE E: LOANS \$ 5. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 4/4 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Stogner, Sarah E. (Ms.) 00086276 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 05/12/2022 Watt, Ashley \$1,667,400.00 In-kind contribution for 7 Contributor address; City; State; Zip Code Political Consulting and Ad Placement with Political Communications Houston, TX 77019 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) (See instructions) 11 Employer (FOR NON-JUDICIAL) Antina Cattle Co Rancher 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 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)

FORM C/OH CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 3 00086276 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Ms. Sarah E. NAME Date Received **ELECTRONICALLY FILED** 07/15/2022 NICKNAME LAST **SUFFIX** Stogner CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** PO Box. 1383 MAILING Receipt # Amount **ADDRESS** Change of Address Monahans, TX 79756 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Sarah E. NAME NICKNAME LAST **SUFFIX** Stogner STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE; **TREASURER** PO Box 1383 **ADDRESS** (Residence or Business) Monahans, TX 79756 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (432) 664-0641 **PHONE** REPORT **TYPE** January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR) July 15 8th day before election Exceeded modified Х reporting limit

Month

Month

Day

Day

05/24/2022

OFFICE HELD (if any)

ELECTION DATE

05/15/2022

Year

Year

PERIOD

10 ELECTION

11 OFFICE

COVERED

THROUGH

Primary

General

Month

ELECTION TYPE

χRunoff

Special

Day

06/30/2022

12 OFFICE SOUGHT (if known)

Year

Other

Railroad Commissioner, Unexpired Term

FORM C/OH COVER SHEET PG 2

13 C / OH NAME	Stogner, Sarah E. (Ms.) 14 Filer ID 00086276			(Ethics Commission Fil	lers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without I officeholders are required to report this information	the candidate's or office	eholder's knowledge or	r
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION	1. TOTAL UNITEM	ZED POLITICAL CONTRIBUTIONS (OTHER THA	N PLEDGES, LOANS,	T	
TOTALS	OR GUARANTE	ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$	0.00
	(OTHER THAN F	AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			\$	0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$	0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.			
		Ms.	Sarah E. Stogner		
		Signature of	Candidate or Officehol	lder	
AFFIX NO	TARY STAMP / SEAL ABO	DVE			
Sworn to and subs	cribed before me, by the s	aid	, this the	day	
		ertify which, witness my hand and seal of office.			
Signature of office	cer administering	Printed name of officer administering	Title of office	r administering oath	-

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 3 19 Filer ID 18 FILER NAME (Ethics Commission Filers) 00086276 Stogner, Sarah E. (Ms.) **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 3. SCHEDULE E: LOANS \$ 5. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

FORM C/OH CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00086276 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Ms. Sarah E. NAME Date Received **ELECTRONICALLY FILED** 07/15/2022 NICKNAME LAST **SUFFIX** Stogner CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** PO Box. 1383 MAILING Receipt # Amount **ADDRESS** Change of Address Monahans, TX 79756 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Sarah E. NAME NICKNAME LAST **SUFFIX** Stogner STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE; **TREASURER** PO Box 1383 **ADDRESS** (Residence or Business) Monahans, TX 79756 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (432) 664-0641 **PHONE** REPORT

January 15

Day

Day

05/24/2022

OFFICE HELD (if any)

ELECTION DATE

07/01/2022

Year

Year

July 15

Month

Month

TYPE

PERIOD

10 ELECTION

11 OFFICE

COVERED

30th day before election

8th day before election

THROUGH

Primary

General

Runoff

Exceeded modified

Month

ELECTION TYPE

χRunoff

Special

reporting limit

Χ

Year

Other

Day

07/15/2022

12 OFFICE SOUGHT (if known)

Railroad Commissioner

15th day after campaign treasurer appointment (officeholder only)
Final Report (Attach C/OH-FR)

FORM C/OH COVER SHEET PG 2

13 C / OH NAME	Stogner, Sarah E. (M	ls.)	14 Filer ID 00086276	(Ethics Commission F	ilers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without to d officeholders are required to report this information	the candidate's or offic	eholder's knowledge d	or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
	_	COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$	0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$	0.00	
	4. TOTAL POLITION	CAL EXPENDITURES		\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L ERIOD	AST DAY OF THE	\$	0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF	PAL AMOUNT OF ALL OUTSTANDING LOANS AS RTING PERIOD	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.			
		Ms. S	Sarah E. Stogner		
			Candidate or Officeho	older	_
AFFIX NO	TARY STAMP / SEAL AB	OVE			
Sworn to and subs	cribed before me, by the s	aid	, this the	day	
of	, 20, to c	ertify which, witness my hand and seal of office.			
Signature of office	cer administering	Printed name of officer administering	Title of office	er administering oath	_
Signature of Office	cei aunimistenny	rinited name of omicel administering	THE OF OTHER	auministening valm	

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				3 of 6
18 FIL		ME Sarah E. (Ms.)	19 Filer ID 00086276	(Ethics Commission Filers)
I		E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1.		SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.		SCHEDULE E: LOANS		\$
5.		SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11.	Х	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$ 3,525.01
12.	Х	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$ 3,525.01

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE |

	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule I: Sch: 1/1 Rpt: 4/6	2 FILER NAME Stogner, Sarah E. (Ms.) 3 Filer ID (Ethics Commission Filers) 00086276					
4	Date 07/15/2022	5 Payee name Watt, Ashley					
6	Amount (\$) 3,525.01	7 Payee Address; City; State; Zip 1912 W McKinney St Unit B Houston, TX 77019					
8	PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Refund to donor (b) Description (See instructions regarding type of information required.) Refund to donor for refund from Catalysts Partners					

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 5/6 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Stogner, Sarah E. (Ms.) 00086276 4 Date 5 Name of person from whom amount is received 8 Amount (\$) 07/15/2022 \$3,525.01 Catalysts Partners 6 Address of person from whom amount is received; City; State; Zip Code Marion, IL 62959 7 Purpose for which amount is received Check if political contribution returned to filer

		FORM C/OH - FR
	The Instruction Guide explains how to complete this form. ** Complete only if "Report Type" on page 1 is marked "Final Report" **	Page 6 of 6
1	C/OH NAME	2 Filer ID (Ethics Commission Filers)
	Stogner, Sarah E. (Ms.)	00086276
3	SIGNATURE	
	I do not expect any further political contributions or political expenditures in connection with my candias a final report terminates my campaign treasurer appointment. I also understand that I may not acc campaign expenditures without a campaign treasurer appointment on file.	
	Ms. Sara	ah E. Stogner
		ndidate / Officeholder
1	FILER WHO IS NOT AN OFFICEHOLDER	
•	** Complete A & B below only if you are not an officeholder **	
	A CAMPAIGN FUNDS	
	Check only one:	
	X I do not have unexpended contributions or unexpended interest or income earned from politic	cal contributions.
	I have unexpended contributions or unexpended interest or income earned from political conconvert unexpended political contributions or unexpended interest or income earned on political understand that I must file an annual report of unexpended contributions and that I may not runexpended interest or income earned on political contributions longer than six years after film must dispose of unexpended political contributions and unexpended interest or income earned with the requirements of Election Code 254.204.	ical contributions to personal use. I also etain unexpended contributions or ling this report. Further, I understand that I
	B ASSETS	
	Check only one:	
	\overline{X} I do not retain assets purchased with political contributions or interest or other income from p	political contributions.
	I do retain assets purchased with political contributions or interest or other income from politic convert assets purchased with political contributions or interest or other income from political understand that I must dispose of assets purchased with political contributions in accordance 254.204.	contributions to personal use. I also
	Ms. Sara	ah E. Stogner
	Signature	e of Candidate
5	OFFICEHOLDER	
•	** Complete this section only if you are an officeholder **	
	I am aware that I remain subject to filing requirements applicable to an officeholder who does also aware that I will be required to file reports of unexpended contributions if, after filing the retain political contributions, interest or other income from political contributions, or assets purinterest or other income from political contributions.	last required report as an officeholder, I
	Signature	of Officeholder

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to comple	te this form.	1 Filer ID (Ethics Commis 00086276		2 Total pages fil	ed: 3
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST		MI	OFFICE U	JSE ONLY
NAME	Ms.	Sarah E.			Date Received ELECTRONICA	ALLY FILED
	NICKNAME	LAST		SUFFIX	··· 01/15/2024	
		Stogner				
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT /	SUITE#; CIT	Υ;	ZIP CODE	Date Hand-delivered or	r Date Postmarked
MAILING ADDRESS	PO Box 1383				Receipt #	Amount
Change of Address	Monahans, TX 79756					
					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER NAME	Ms.	Sarah E.				
	NICKNAME	 LAST		SUFFIX		
		Stogner				
6 CAMPAIGN	STREET ADDRESS (NO PO I	BUX DI EVSE).	ΔΡΊ	/ SUITE#; CITY	· STA	ATE; ZIP CODE
TREASURER ADDRESS	101 Smith Dr	JOXT LLAGE),	7-11	7 3011E #, GITT	, 317	ATE, ZII CODE
(Residence or Business)	Monahans, TX 79756					
7 CAMPAIGN	AREA CODE PHONE	E NUMBER E	EXTENSION			
TREASURER PHONE	(432) 664-0641		-X121101011			
8 REPORT TYPE	X January 15	30th day before	election	Runoff	15th day after car	
		Toth downbafara	alastian \Box	Eveneded modified	appointment (office	
	July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (Atta	ach C/OH-FR)
9 PERIOD COVERED	Month Day Year			Month Day	Year	
COVERED	07/01/2023	TH	IROUGH	12/31/20	23	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	P	rimary	Runoff	Other	
	11/05/2024	XG	eneral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGH	Γ (if known)	
II OFFICE	None			District Attorney		
		CO T	O DACE 2			
		GU I	O PAGE 2			

FORM C/OH COVER SHEET PG 2

13 C / OH NAME	Stogner, Sarah E. (M	s.)	14 Filer ID (I 00086276	Ethics Commission Filers)		
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	COMMITTEE NAME				
Ш	GENERAL	#ProjectRedTX				
		COMMITTEE ADDRESS				
	X SPECIFIC	1108 Lavaca St 110-610				
		Austin, TX 78701				
		COMMITTEE CAMPAIGN TREASURER NAME				
		Hamilton, Wayne				
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS			
		1108 Lavaca St 110-610				
		Austin, TX 78701				
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00		
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 4,855.34		
EXPENDITURE TOTALS	\$ 0.00					
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 11,855.74		
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LARIOD	AST DAY OF THE	\$ 1,602.99		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 11,000.00		
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.				
		Ms. S	Sarah E. Stogner			
		Signature of	Candidate or Officeholo	der		
AFFIX NO	TARY STAMP / SEAL AB	OVE				
Sworn to and subs	cribed before me, by the s	aid	, this the	day		
of	, 20, to ce	ertify which, witness my hand and seal of office.				
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath		

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

					3 01 13
18 FIL	ER NAN	ME	19 Filer ID	(Ethic	s Commission Filers)
Sto	ogner, S	Sarah E. (Ms.)	00086276		
		E SUBTOTALS			SUBTOTAL AMOUNT
NA	ME OF	SCHEDULE			
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	2,648.42
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	2,206.92
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	X	SCHEDULE E: LOANS		\$	11,000.00
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	;	\$	11,855.74
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	NS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS C	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	NS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	ETURNED	\$	

l	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDUL	E A1
7	Γhe Instru	ction Guide explains hov	to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/6 Rpt: 4/13	
	FILER NAME Stogner, Sai	rah E. (Ms.)			3	Filer ID (Ethics Commission 00086276	n Filers)
4 [Date 11/28/2023	Full name of contributor Amelang, AndrewContributor address; City; S	out-of-state PAC (ID#:_		7	Amount of Contribution (\$)	\$100.00
8 F	Principal occu	TX pation / Job title (See Instructions	s)	9 Employer (See Instructions	<u> </u> ;)		
	Date L0/06/2023	Full name of contributor Aniello, William Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$21.38
F	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
	Date 11/09/2023	Full name of contributor Ash-Miller, Ryan Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$15.00
F	Principal occu	TX pation / Job title (See Instructions	s)	Employer (See Instructions) ;)		
	Date L0/06/2023	Full name of contributor Backscheider, Alison Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$50.00
F	Principal occu	TX pation / Job title (See Instructions	s)	Employer (See Instructions	j 5)		
	Date 12/12/2023	Full name of contributor Barnes, John Contributor address; City; S				Amount of Contribution (\$)	\$50.00
F	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	<u> </u> 5)		

MONET	ARY POLITICAL CONTRIBU	TIONS	SCHEDULE A1
The Instruc	ction Guide explains how to complete t	his form.	1 Total pages Schedule A1: Sch: 2/6 Rpt: 5/13
2 FILER NAME Stogner, Sar	ah E. (Ms.)		3 Filer ID (Ethics Commission Filers) 00086276
4 Date 12/13/2023	 Full name of contributor out-of-state PAC Barnes, John Contributor address; City; State; Zip Code 	(ID#:)	7 Amount of Contribution (\$) \$50.00
8 Principal occu	TX pation / Job title (See Instructions)	9 Employer (See Instructions	5)
Date 10/06/2023	Full name of contributor out-of-state PAC Brenner, Jim Contributor address; City; State; Zip Code	(ID#:)	Amount of Contribution (\$) \$10.72
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
Date 09/14/2023	Full name of contributor out-of-state PAC Brown, Douglas Contributor address; City; State; Zip Code	(ID#:)	Amount of Contribution (\$) \$21.12
Principal occu	TX pation / Job title (See Instructions)	Employer (See Instructions	s)
Date 09/14/2023	Full name of contributor out-of-state PAC Castleman, William Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$52.37
Principal occu	TX pation / Job title (See Instructions)	Employer (See Instructions	5)
Date 10/05/2023	Full name of contributor out-of-state PAC Chu, Eddie Contributor address; City; State; Zip Code TX	(ID#:)	Amount of Contribution (\$) \$5.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
		•	

	MONET	ARY POLITICAL CONTRIBUTIO	ONS		SCHEDULE	A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/6 Rpt: 6/13	
2	FILER NAME Stogner, Sar	ah E. (Ms.)		3	Filer ID (Ethics Commission 00086276	Filers)
4	Date 09/14/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$312.65
8	Principal occu	TX pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 10/06/2023	Full name of contributor out-of-state PAC (ID#: Deutsch, Christopher Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/14/2023	Full name of contributor out-of-state PAC (ID#:_Ebner, Clay Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$104.42
	Principal occu	TX pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/28/2023	Full name of contributor			Amount of Contribution (\$)	\$104.42
	Principal occu	TX pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/15/2023	Full name of contributor out-of-state PAC (ID#:_ Hudson, James Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$52.37
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

N	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDUL	E A1
T	he Instru	ction Guide explains hov	to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/6 Rpt: 7/13	
	ILER NAME Stogner, Sai	rah E. (Ms.)			3	Filer ID (Ethics Commissio 00086276	n Filers)
	Pate 19/16/2023	5 Full name of contributor Lambert, Matthew6 Contributor address; City; S	out-of-state PAC (ID#:_		7	Amount of Contribution (\$)	\$50.00
8 F	rincipal occu	TX pation / Job title (See Instructions	s)	9 Employer (See Instructions	5)		
	Pate 19/18/2023	Full name of contributor Liu, Zach Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$50.00
F	rincipal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
	Pate 0/06/2023	Full name of contributor Mehnert, Katie Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$100.00
P	rincipal occu	TX pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
	Pate 19/14/2023	Full name of contributor Newton, Christopher Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$50.00
F	rincipal occu	TX pation / Job title (See Instructions	;)	Employer (See Instructions	5)		
	Pate 19/22/2023	Full name of contributor O'Neill, Daulton Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$21.38
F	rincipal occu	Pation / Job title (See Instructions	s)	Employer (See Instructions	<u> </u>		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULI	■ A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 5/6 Rpt: 8/13	
2	FILER NAME Stogner, Sar	ah E. (Ms.)		3	Filer ID (Ethics Commission 00086276	Filers)
4	Date 09/14/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$104.42
8	Principal occu	TX pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 09/14/2023	Full name of contributor out-of-state PAC (ID#: Purvis, Dwayne Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$104.42
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/06/2023	Full name of contributor			Amount of Contribution (\$)	\$10.00
	Principal occu	TX pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/06/2023	Full name of contributor)		Amount of Contribution (\$)	\$25.00
	Principal occu	TX pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/05/2023	Full name of contributor out-of-state PAC (ID#:_Sarlls, Ed Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
		-				

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDULE	A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/6 Rpt: 9/13	
2	FILER NAME Stogner, Sar	ah E. (Ms.)		3	Filer ID (Ethics Commission F 00086276	Filers)
4	Date 09/14/2023	 Full name of contributor)	7	Amount of Contribution (\$)	\$52.37
8	Principal occu	TX pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 09/15/2023	Full name of contributor out-of-state PAC (ID#:_Velko, Mark Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$21.38
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#:_Yang, Andrew Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$1	.,000.00
	Principal occu	TX pation / Job title (See Instructions)	Employer (See Instructions			
	politician	pation 7 300 title (See Instituctions)	self	,		
	Date 10/06/2023	Full name of contributor)		Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction G	uide explains how to complete this f	orm.	1	Total pages Schedule A2: Sch: 1/1 Rpt: 10/13
2 FILER NAME			3	Filer ID (Ethics Commission Filers)
Stogner, Sarah E. (M	s.)		١	00086276
4 TOTAL OF UNITE	MIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$	
12/04/2023 #Proj	ame of contributor)	8	Amount of contribution (\$) In-kind contribution description \$1,250.00 I filing fee
10 Principal occupation / Jo	bb title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON-	-JU	
12 Contributor's principal o	ccupation (FOR JUDICIAL)	13 Contributor's job title ((FC	DR JUDICIAL) (See instructions)
14 Contributor's employer/l	aw firm (FOR JUDICIAL)	15 Law firm of contributo	r's	spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, I	aw firm of parent(s) (if any) (FOR JUDICIAL)			
10/04/2023 Jagg	ame of contributor out-of-state PAC (ID#: ers, Amanda butor address; City; State; Zip Code			Amount of contribution (\$) In-kind contribution (\$) description \$900.00 It-shirts
TX				Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Jo	bb title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON-	-JU	IDICIAL) (See instructions)
Contributor's principal o	ccupation (FOR JUDICIAL)	Contributor's job title ((FC	OR JUDICIAL) (See instructions)
Contributor's employer/l	aw firm (FOR JUDICIAL)	Law firm of contributo	r's	spouse (if any) (FOR JUDICIAL)
If contributor is a child, I	aw firm of parent(s) (if any) (FOR JUDICIAL)			
12/04/2023 Stogr	nme of contributor out-of-state PAC (ID#: ner, Sarah butor address; City; State; Zip Code)		Amount of contribution (\$) In-kind contribution description \$56.92 postage
	hans, TX 79756			Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Jo	bb title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON-	-JU	IDICIAL) (See instructions)
Contributor's principal o	ccupation (FOR JUDICIAL)	Contributor's job title ((FC	OR JUDICIAL) (See instructions)
Contributor's employer/l	aw firm (FOR JUDICIAL)	Law firm of contributo	r's	spouse (if any) (FOR JUDICIAL)
If contributor is a child, I	aw firm of parent(s) (if any) (FOR JUDICIAL)			

	LOANS							SCHEDULE E	
	The Instruction Guide explains how to complete this form.						1 Total pages Schedule E: Sch: 1/1 Rpt: 11/13		
2	FILER NAME Stogner, Sarah E. (Ms.)					3	Filer ID 000862	(Ethics Commission Filers)	
4	TOTAL OF UNITEMIZED LOANS						\$		
5	Date of loan 08/14/2023	<u> </u>				9 Loan Amount (\$) \$1,000.00			
6	Is lender a financial institution?	8 Lender address;	City;	State;	Zip Code			10 Interest Rate	
	No	Monahans, TX 7975	6					11 Maturity Date	
12 Principal occupation / Job title (See Instructions) attorney				13 Employer (See Instructions) Stogner Legal					
14	Description of Collateral X None				15 Check if personal funds we	l into political account (See Instructions)			
16	GUARANTOR INFORMATION	17 Name of guarantor						19 Amount Guaranteed (\$)	
	X not applicable	18 Guarantor address;	City;	State;	Zip Code				
20 Principal occupation					21 Employer (See Instructions	s)			
	Date of loan	Name of lender		out-of-state PA	C (ID#:			Loan Amount (\$)	
	09/27/2023	Stogner, Sarah						\$10,000.00	
	Is lender a financial institution?	Lender address;	City;	State;	Zip Code			Interest Rate	
	No	Monahans, TX 7975	6					Maturity Date	
	Principal occupation	on / Job title (See Instruction	ns)		Employer (See Instructions	s)		I	
	attorney			Stogner Legal					
	Description of Collateral X None			Check if personal funds we	l into political account (See Instructions)				
	GUARANTOR INFORMATION	Name of guarantor						Amount Guaranteed (\$)	
	X not applicable	Guarantor address;	City;	State;	Zip Code				
Principal occupation			Employer (See Instructions)						

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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 co	mple	ete this form.
1	Total pages Schedule F1: Sch: 1/2 Rpt: 12/13	2 FILER NAME Stogner, Sarah E. (Ms.)	3 Filer ID (Ethics Commission Filers) 00086276	
4	Date 10/02/2023	5 Payee name Armic Systems		'
6	Amount (\$) \$937.50	7 Payee address; City; State; Zip Co	ode	
8	PURPOSE OF EXPENDITURE	TX (a) Category (See Categories listed at the top of this schedule) website design	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sarah4rrc.com
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soul	ight	Office held
	Date 10/03/2023	Payee name Deluxe Business		
	Amount (\$) \$90.74	Payee address; City; State; Zip Co	ode	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) checks	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Checks
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ight	Office held
	Date 10/04/2023	Payee name Levs, Josh		
	Amount (\$) \$2,100.00	Payee address; City; State; Zip Co	ode	
		GA		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PR consultant
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ight	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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/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 F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)						
L	Sch: 2/2 Rpt: 13/13	Stogner, Sarah E. (Ms.)	00086276						
4	Date	5 Payee name							
L	10/20/2023	Sunny Side Up Creations							
6	Amount (\$) \$227.50	7 Payee address; City; State; Zip Code GA							
8	PURPOSE OF EXPENDITURE	Advertising Expense	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense ign						
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	10/05/2023	Texas Tribune							
	Amount (\$) \$8,500.00	Payee address; City; State; Zip Code							
		TX							
	PURPOSE OF EXPENDITURE	Check if Austi	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense varticipated in event and also reporting as ation Texas Forward Party PAC						
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH In	struction (Guide explains how to com	plete this form.	1 Filer ID (Ethics Commis 00086276	sion Filers)	2 Total pages fi	led: 5
3 CANDIDA		MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
OFFICEH	IOLDER	Ms.	Sarah E.			OFFICE	OSL ONL!
NAME		Wis.	Saran L.			Date Received	
						ELECTRONIC	ALLY FILED
						07/15/2024	
		NICKNAME	LAST		SUFFIX	01/13/2024	
			Stogner				
4 CANDIDA	ATE /	ADDRESS / PO BOX; AI	PT / SUITE #; CIT	Y:	ZIP CODE	Date Hand-delivered o	r Date Postmarked
OFFICEH	IOLDER	PO Box 1383	,	,			
MAILING		FO BOX 1363				Receipt #	Amount
ADDRES	S					receipt "	7 unoune
Change	of Address	Monahans, TX 79756					
-		,				Date Processed	
						Date Imaged	
5 CAMPAIC	3N	MS / MRS / MR	FIRST		MI		
TREASU	RER	Ms.	Sarah E.				
NAME		IVIS.	Saran L.				
		NICKNAME	LAST		SUFFIX		
			Stogner				
6 CAMPAIC	2N	STREET ADDRESS (NO F	DO DOV DI EACE):	ADT	/ SUITE #; CITY;	CT.	ATE; ZIP CODE
TREASU		·	O BOX FLEASE),	AFI	/3011E#, CITT,	317	ATE, ZIF CODE
ADDRES		101 Smith Dr					
(Residence o	or Business)						
(residence c	or business)	Monahans, TX 79756					
		,					
7 CAMPAIC	GN	AREA CODE PH	ONE NUMBER E	EXTENSION			
TREASU		(432) 664-0641					
PHONE		(432) 004-0041					
8 REPORT		_	_	_	_	-	
TYPE		January 15	30th day before	e election	Runoff	15th day after ca appointment (offi	mpaign treasurer
		10k 15	8th day before	alastian 🖂	Eveneded modified	-	
		X July 15	8th day before		Exceeded modified reporting limit	Final Report (Att	acii C/OH-FR)
9 PERIOD	_	Month Day Yea	r		Month Day	Year	
COVERE	D	01/01/2024	TH	HROUGH	06/30/2024	4	
10 ELECTIO	N	ELECTION DATE			ELECTION TYPE		
		Month Day Yea	r	rimary	Runoff	Other	
		11/05/2024		,			
		11/05/2024	XG	eneral	Special		
11 OFFICE		OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
		OT TIOL TILLE (II diriy)					ace Ward County
					District 143	aid County) Fi	acc ward County
		<u> </u>					
			60.1	O PAGE 2			
				O FAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 5

13 C / OH NAME	Stogner, Sarah E. (M	s.)	14 Filer ID ((Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expen These expenditures may have been made without I officeholders are required to report this information	ut the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
<u> </u>	GENERAL			
	CDEOLEIG	COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAM	<u> </u>	
		COMMITTEE CAMPAIGN TREASURER ADDI	RESS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER T ES OF LOANS, OR CONTRIBUTIONS MADE E		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOA	NS)	\$ 7,106.38
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF TH RIOD	ELAST DAY OF THE	\$ 1,469.09
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS TING PERIOD	AS OF THE LAST DAY	\$ 10,000.00
17 AFFIDAVIT		I swear, or affirm, under per true and correct and include under Title 15, Election Cod	s all information required to	
			s. Sarah E. Stogner	
		Signature	of Candidate or Officehol	der
AFFIX NO	TARY STAMP / SEAL AB	DVE		
		aid	, this the	day
of	, 20, to co	ertify which, witness my hand and seal of office.		
Signature of offi	cer administering	Printed name of officer administering	Title of officer	r administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

					7 V L	3 of 5
l		NAM ner, S	arah E. (Ms.)	19 Filer ID 00086276	(Ethic	cs Commission Filers)
ı			E SUBTOTALS SCHEDULE		:	SUBTOTAL AMOUNT
1	[X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	251.38
2	ı. [X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	6,855.00
3	3. [SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4	ı. [SCHEDULE E: LOANS		\$	
5	i. [SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	
6	i. [SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7	· [SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8	3.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9). [SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
1	.0.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$	
1	.1. [SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
1	.2.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 4/5	
2	FILER NAME Stogner, Sar	ah E. (Ms.)		3	Filer ID (Ethics Commissio 00086276	n Filers)
4	Date 02/23/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00
_		Katy, TX 77450	1	Ĺ		
8	oil & gas	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 05/25/2024	Full name of contributor out-of-state PAC (ID: Mark , Smart Contributor address; City; State; Zip Code	#:		Amount of Contribution (\$)	\$21.38
	Dringing age	Waycross, GA 31503	Employer (Coo Instruction			
	attorney	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 02/10/2024	Full name of contributor out-of-state PAC (ID: Rhonda, Beale Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$100.00
		Celina, TX 75009				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 05/09/2024	Full name of contributor out-of-state PAC (ID: Ryan, Ash-Miller Contributor address; City; State; Zip Code Portland, MI 48875	#:		Amount of Contribution (\$)	\$30.00
	Principal occu student	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 05/08/2024	Full name of contributor out-of-state PAC (ID: Zacek, Collin Contributor address; City; State; Zip Code Rockwall, TX 75087	#:)		Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
			1			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	ction Guide explains how to complete this f	orm	1 Total pages Schedule A2:
THE HISTIA	Ction Guide explains now to complete this i		Sch: 1/1 Rpt: 5/5
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Stogner, Sa	ran E. (Ms.)		00086276
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution contribution (\$) description
06/21/2024	#ProjectRedTX		\$5,305.00 printed material - signs
	7 Contributor address; City; State; Zip Code		
	Austin, TX 78701		Check if travel outside of Texas. Complete Schedule
10 Principal occu	upation / 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 contributo	or's spouse (if any) (FOR JUDICIAL)
40.15			
16 If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Data	Full pages of southibutes.		Associated Indicate contribution
Date 06/21/2024	Full name of contributor out-of-state PAC (ID#: #ProjectRedTX)	Amount of In-kind contribution contribution (\$) description
00/21/2024	Contributor address; City; State; Zip Code		\$300.00 printed materials - signs
	Contributor address, City, State, 21p Code		
	Austin, TX 78701		Check if travel outside of Texas. Complete Schedule
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)
	rational and an expension (EOD JUDIOIAL)	O toile , te ole i ele title	(FOR HIDIOIAL) (Considerations)
Contributors	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor ut-of-state PAC (ID#:)	Amount of In-kind contribution
06/21/2024	#ProjectRedTX		contribution (\$) description \$1,250.00 printed materials -
	Contributor address; City; State; Zip Code		graphics
			İ
	Austin, TX 78701		Check if travel outside of Texas. Complete Schedule
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	· ·
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
		-	
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
ii continuatori	is a dima, law littl of paretities) (if ally) (FOR JUDICIAL)		

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complet		1 Filer ID (Ethics Commis 00086276		2 Total pages file 5	d:
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST		MI	OFFICE U	SE ONLY
NAME	Ms.	Sarah E.			Date Received ELECTRONICA	I I Y FII FD
	NICKNAME	LACT		CLIFFIX	10/06/2024	
		LAST Stogner		SUFFIX	10/00/2024	
4 CANDIDATE /	ADDRESS / PO BOX; APT /	SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or I	Date Postmarked
OFFICEHOLDER MAILING ADDRESS	PO Box 1383				Receipt #	Amount
Change of Address	Monahans, TX 79756					
	Worldham, 17, 19130				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER NAME	Ms.	Sarah E.				
	NICKNAME	 LAST		SUFFIX		
		Stogner		331111		
6 CAMPAIGN	STREET ADDRESS (NO PO E	OV DI EACE):	A D.7	// SUITE #; CITY;	STA ⁻	TE; ZIP CODE
TREASURER ADDRESS	101 Smith Dr	OOA PLEASE),	API	/3011E#, CITT,	SIA	IE, ZIP CODE
(Residence or Business)	Monahans, TX 79756					
7 CAMPAIGN TREASURER		NUMBER E	EXTENSION			
PHONE	(432) 664-0641					
8 REPORT TYPE	January 15 X	30th day before	election	Runoff	15th day after cam	paign treasurer
	July 15	8th day before 6	election \square	Exceeded modified	appointment (office Final Report (Attac	
		our day before e	Siection	reporting limit	_	11 0/011-1 1()
9 PERIOD COVERED	Month Day Year			Month Day	Year	
COVERED	07/01/2024	IH	IROUGH	09/26/202	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	P	rimary	Runoff	Other	
	11/05/2024	XG	eneral	Special		
				_		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
	None			District Attorney Loving, and Ward	(Multi-county) Dis d	trict 143 Reeves,
	1			1		
		GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 5

13 C / OH NAME	Stogner, Sarah E. (M	s.)	14 Filer ID ((Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without in difficeholders are required to report this information	the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		I ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 1,112.65
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 2,441.24
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 10,000.00
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.		
		Ms. :	Sarah E. Stogner	
			Candidate or Officehol	der
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of office.		
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				J V LIX	3 of 5
18 FILE		ME Sarah E. (Ms.)	19 Filer ID 00086276	(Ethics	Commission Filers)
l		E SUBTOTALS SCHEDULE		SU	BTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	612.65
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	500.00
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.		SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR TO FILER	RETURNED	\$	

FARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
uction Guide explains how to complete this f	orm.	1		
		3	Filer ID (Ethics Commission	ı Filers)
Colleen, O'Callaghan		7	Amount of Contribution (\$)	\$300.00
Petaluma, CA 94952	T			
upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
<u> </u>)		Amount of Contribution (\$)	\$312.65
Henrico, VA 23229	Employer (See Instructions	(2		
	uction Guide explains how to complete this f arah E. (Ms.) 5 Full name of contributor out-of-state PAC (ID#:_ Colleen, O'Callaghan 6 Contributor address; City; State; Zip Code Petaluma, CA 94952 aupation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Flaherty, Danna Contributor address; City; State; Zip Code	Full name of contributor out-of-state PAC (ID#:) Flaherty, Danna Contributor address; City; State; Zip Code Henrico, VA 23229	Juction Guide explains how to complete this form. 1	Juction Guide explains how to complete this form. 1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/5

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 5/5 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Stogner, Sarah E. (Ms.) 00086276 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 09/15/2024 Smokey, Briggs \$500.00 newspaper advertisement 7 Contributor address; City; State; Zip Code Monahans, TX 79756 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) Rancher 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 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)

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

	Guide explains how to complet		1 Filer ID (Ethics Commi 00086276		2 Total pages file	
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST		MI	OFFICE U	SE ONLY
NAME	Ms.	Sarah E.			Date Received ELECTRONICA	LLY FILED
		LAST Stogner		SUFFIX	10/27/2024	
4 CANDIDATE /	ADDRESS / PO BOX; APT /	SUITE#; CIT	Y;	ZIP CODE	Date Hand-delivered or	Date Postmarked
OFFICEHOLDER MAILING ADDRESS	PO Box 1383				Receipt #	Amount
Change of Address	Monahans, TX 79756					
	·				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER NAME	Ms.	Sarah E.				
	NICKNAME L	 -AST		SUFFIX		
	S	Stogner				
6 CAMPAIGN	STREET ADDRESS (NO PO B	OX PLEASE):	AP ⁻	r / SUITE #; CITY;	STA	TE; ZIP CODE
TREASURER ADDRESS	101 Smith Dr	,,		, ,		ŕ
(Residence or Business)	Monahans, TX 79756					
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE (432) 664-0641	NUMBER E	XTENSION			
8 REPORT TYPE	January 15	30th day before	election	Runoff	15th day after can appointment (office	
	July 15	8th day before e	election	Exceeded modified reporting limit	Final Report (Attac	ch C/OH-FR)
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	09/27/2024	ТН	ROUGH	10/26/202	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	Pr	rimary	Runoff	Other	
	11/05/2024	ΧG	eneral	Special		
11 OFFICE	OFFICE HELD (if any)	l		12 OFFICE SOUGHT	(if known)	
	None			District Attorney Loving, and War	(Multi-county) Dis d	trict 143 Reeves,
				1		
		GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 7

13 C / OH NAME	Stogner, Sarah E. (M	s.)	14 Filer ID (00086276	Ethics Commissio	n Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditual These expenditures may have been made without difficeholders are required to report this information	the candidate's or office	holder's knowledg	ge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	X GENERAL	#ProjectRedTX			
		COMMITTEE ADDRESS			
	SPECIFIC	1108 Lavaca St 110-610			
		Austin, TX 78701			
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS		
		TX			
16 CONTRIBUTION	1. TOTAL UNITEM	'^` ZED POLITICAL CONTRIBUTIONS (OTHER THA	N DI EDGES I OANS		
TOTALS		ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$	0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 2	2,700.00
EXPENDITURE TOTALS		IZED POLITICAL EXPENDITURES		\$ 1	L,200.00
		AL EXPENDITURES		\$ 5	5,400.00
CONTRIBUTION BALANCE	REPORTING PE			\$ 2	2,488.61
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 10	0,000.00
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.			
		Ms.:	Sarah E. Stogner		
		Signature of	Candidate or Officehole	der	
AFFIX NO	TARY STAMP / SEAL AB	OVE			
Sworn to and subs	cribed before me, by the s	aid	, this the	day	,
		ertify which, witness my hand and seal of office.			
Signature of offi	cer administering	Printed name of officer administering	Title of officer	administering oat	th

SUBTOTALS - C/OH

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

					3 of 7
_	ER NAM	ME Sarah E. (Ms.)	19 Filer ID 00086276	(Ethic	es Commission Filers)
		E SUBTOTALS SCHEDULE		5	SUBTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	50.00
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	2,650.00
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.		SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	
6.	Х	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	4,000.00
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	1,400.00
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONET	TARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	action Guide explains how to complete this	1	Total pages Schedule A1: Sch: 1/1 Rpt: 4/7		
2	FILER NAME Stogner, Sa		3	Filer ID (Ethics Commission Filers) 00086276		
4	Date 10/07/2024	 Full name of contributor	7	Amount of Contribution (\$) \$50.00		
8	Principal occumarketing	Flower Mound, TX 75022 upation / Job title (See Instructions)	9	Employer (See Instructions	 S)	
			•			

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 5/7 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Stogner, Sarah E. (Ms.) 00086276 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 10/25/2024 Coulston, Dusty \$2,650.00 radio ad production and 7 Contributor address; City; State; Zip Code distribution and refreshments for meet & igreet Monahans, TX 79756 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) (See instructions) 11 Employer (FOR NON-JUDICIAL) rancher self 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 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)

UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F2: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 6/7 Stogner, Sarah E. (Ms.) 00086276 \$ TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS 5 Date Payee name 10/15/2024 Monahans Paper Amount (\$) Payee address; City; State; Zip Code \$2,000.00 107 W. 2nd St Monahans, TX 79756 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense newspaper advertisements 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/14/2024 Pecos Enterprise Amount (\$) Payee address; City; State; Zip Code \$2,000.00 324 S Cedar Pecos, TX 79772 TYPE OF Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense newspaper ads Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 7/7 Stogner, Sarah E. (Ms.) 00086276 Date Payee name 10/04/2024 Ace Hardware 6 Amount (\$) Payee address; City; State; Zip Code \$200.00 410 S. Betty Reimbursement from political contributions intended Monahans, TX 79756 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Sign frame materials Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

CANDIDATE / OFFICEHOLDER DAILY PRE-ELECTION REPORT

FORM DAILY-C C/OH

(Total page	s filed:		OFFICE USE ONLY		
00086276				1 of 2			Date Received		
3	CANDIDATE /	MS/MRS/MR	FIRST				MI	ELECTRONICAL	LLY FILED
	OFFICEHOLDER NAME	Ms.	Sarah E.				10/28/2024		
		NICKNAME	LAST SUFFIX						
			Stogner						
								Date Hand-delivered or F	Postmarked
4	CANDIDATE /	ADDRESS / PO BOX;	APT / SI	UITE#;	CITY;	STATE;	ZIP CODE		
	OFFICEHOLDER ADDRESS							Receipt #	Amount
		REDACTED PE	R 254.031	3, GOV'T	CODE				
						-		Date Processed	
5	OFFICE SOUGHT							Date Imaged	
		District Attorney (Mu	lti-county)	District 14	13 Reeves,	Loving, and	Ward		

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 2/2 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Stogner, Sarah E. (Ms.) 00086276 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 10/28/2024 Dusty, Coulston \$4,059.00 advertisement for radio 7 Contributor address; City; State; Zip Code Monahans, TX 79756 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) rancher self 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 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)

CANDIDATE / OFFICEHOLDER DAILY PRE-ELECTION REPORT

FORM DAILY-C C/OH

1	•	nmission Filers)	;	2 Total page	s filed:			OFFICE U	ISE ONLY
	00086276			1 of 2				Date Received	
3	CANDIDATE /	MS/MRS/MR	FIRST				MI	ELECTRONICAL	LY FILED
	OFFICEHOLDER NAME	Ms.	Sarah E.				11/04/2024		
		NICKNAME	LAST				SUFFIX		
			Stogne	r					
								Date Hand-delivered or F	ostmarked
4	CANDIDATE /	ADDRESS / PO BOX;	APT	/ SUITE #;	CITY;	STATE;	ZIP CODE		
	OFFICEHOLDER ADDRESS							Receipt #	Amount
		REDACTED PE	R 254.0	313, GOV'T	CODE				
								Date Processed	
5	OFFICE SOUGHT							Date Imaged	
		District Attorney (Μι	ılti-coun	ty) District 14	43 Reeves,	Loving, and	Ward		

ETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
struction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 2/2
	3 Filer ID (Ethics Commission Filers) 00086276
5 Full name of contributor out-of-state PAC (ID#:	7 Amount of Contribution (\$) \$500.00
League City, TX 77573 occupation / Job title (See Instructions) 9 Employer (See Inst	ructions)
	,
- !: -: -:	Prine, Charley 6 Contributor address; City; State; Zip Code League City, TX 77573 I occupation / Job title (See Instructions) 9 Employer (See Inst

CORRECTION/AMENDMENT AFFIDAVIT FORM COR-C/OH FOR CANDIDATE/OFFICEHOLDER Filer ID (Ethics Commission Filers) 2 Total pages filed: **OFFICE USE ONLY** 00086276 Date Received CANDIDATE / MS / MRS / MR **FIRST** MI **ELECTRONICALLY FILED OFFICEHOLDER** Ms. Sarah E. 01/15/2025 NAME NICKNAME LAST **SUFFIX** Stogner Date Hand-delivered or Date Postmarked **ORIGINAL** X January 15 Runoff Other (specify) REPORT TYPE Receipt # July 15 Exceeded modified reporting limit Amount 15th day after campaign treasurer 30th day before election appointment (officeholder only) Date Processed 8th day before election Final Report (Attach C/OH-FR) ORIGINAL PERIOD Month Month Day Year Day Year Date Imaged **COVERED THROUGH** 10/27/2024 12/31/2024 **EXPLANATION OF CORRECTION** Inadvertent omission discovered after proofing filed report before deadline **AFFIDAVIT** I swear, or affirm, under penalty of perjury, that this corrected report is true and correct. Check the box next to any and all applicable statements: Semiannual reports: I swear, or affirm that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report. Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith. Ms. Sarah E. Stogner Signature of Candidate or Officeholder AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said ____, this the ___ _____, 20_____, to certify which, witness my hand and seal of office.

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

Printed name of officer administering oath

Signature of officer administering oath

Title of officer administering oath

FORM C/OH CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00086276 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Ms. Sarah E. NAME Date Received **ELECTRONICALLY FILED** 01/15/2025 NICKNAME LAST **SUFFIX** Stogner CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** PO Box 1383 MAILING Receipt # Amount **ADDRESS** Change of Address Monahans, TX 79756 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Sarah E. NAME NICKNAME LAST **SUFFIX** Stogner STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE; **TREASURER** 101 Smith Dr **ADDRESS** (Residence or Business) Monahans, TX 79756 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (432) 664-0641 **PHONE** REPORT

January 15

Day

Day

11/05/2024

OFFICE HELD (if any)

ELECTION DATE

10/27/2024

Year

Year

District Attorney (Multi-county) District 143 Ward

July 15

Month

Month

TYPE

PERIOD

10 ELECTION

11 OFFICE

COVERED

30th day before election

8th day before election

THROUGH

Primary

χ General

Runoff

Exceeded modified reporting limit

Month

ELECTION TYPE

Runoff

Special

Day

12/31/2024

12 OFFICE SOUGHT (if known)

District Attorney

Year

Other

15th day after campaign treasurer appointment (officeholder only)
Final Report (Attach C/OH-FR)

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

3 of 8

13 C / OH NAME	Stogner, Sarah E. (M	s.)	14 Filer ID 00086276	(Ethics Commission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without officeholders are required to report this information	the candidate's or offic	eholder's knowledge or		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
ш°	GENERAL					
		COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS			
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THATES OF LOANS, OR CONTRIBUTIONS MADE ELI		\$ 0.00		
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$ 8,659.00		
EXPENDITURE TOTALS						
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 750.00		
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE RIOD	LAST DAY OF THE	\$ 2,633.66		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	S OF THE LAST DAY	\$ 11,000.00		
17 AFFIDAVIT		I swear, or affirm, under penal true and correct and includes under Title 15, Election Code.	all information required			
		Ms.	Sarah E. Stogner			
		Signature of	of Candidate or Officeho	lder		
AFFIX NO	TARY STAMP / SEAL ABO	DVE				
Sworn to and subs	cribed before me, by the s	aid	, this the	day		
of	, 20, to ce	rtify which, witness my hand and seal of office.				
Signature of office	cer administering	Printed name of officer administering	Title of office	er administering oath		

SUBTOTALS - C/OH

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

				4 of 8
18 FILER NA Stogner,	(Ethics	Commission Filers)		
20 SCHEDU NAME OF	SI	JBTOTAL AMOUNT		
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	600.00	
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	8,059.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE E: LOANS		\$	
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	450.00	
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	_	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	_
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	_
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	300.00
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS O	OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

	MONETARY POLITICAL CONTRIBUTIONS		SCHEDULE A1			
	The Instruction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 5/8			
2	FILER NAME Stogner, Sarah E. (Ms.)	3	Filer ID (Ethics Commission 00086276	n Filers)		
4	Date 11/03/2024 5 Full name of contributor out-of-state PAC (ID#:) Levendis, Catherine 6 Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$100.00		
	New Orleans, LA 70124					
8	Principal occupation / Job title (See Instructions) government relations 9 Employer (See Instruct Ochsner	ctions)				
	Date Full name of contributor out-of-state PAC (ID#:) 11/04/2024 Prine, Charley)	Amount of Contribution (\$)	\$500.00		
	Contributor address; City; State; Zip Code					
	League City, TX 77573 Principal occupation / Job title (See Instructions) Mediator Employer (See Instruct Prine Mediation	ctions)				

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 6/8 3 Filer ID (Ethics Commission Filers) FILER NAME Stogner, Sarah E. (Ms.) 00086276 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 10/28/2024 Dusty, Coulston \$4,059.00 advertisement for radio 7 Contributor address; City; State; Zip Code Monahans, TX 79756 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) rancher self 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 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 Full name of contributor Amount of In-kind contribution out-of-state PAC (ID#: contribution (\$) description 10/30/2024 Smokey, Briggs \$4,000.00 Paid for advertising in Contributor address; City; State; Zip Code Monahans News and Pecos Enterprise. Monahans, TX 79756 Check if travel outside of Texas. Complete Schedule T. (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) 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) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Leg	od/Beverage Expense t/Awards/Memorials Expense gal Services ne Instruction Guide explains		se s/Contract Labor	Travel in Dis Travel Out o OTHER (ent	
1	Total pages Schedule F1:					3 Filer ID	(Ethics Commission Filers)
L	Sch: 1/1 Rpt: 7/8	Stogner, Sara	h E. (Ms.)			0008627	6
4	Date	5 Payee name					
L	11/05/2024	Little Flower S					
6	Amount (\$)	7 Payee address;		e; Zip Code			
	\$450.00	1208 Andrews	S HWY				
		Crane, TX 797	731				
8	PURPOSE OF		Categories listed at the top of this so	chedule) (b)	Description		
	EXPENDITURE	Event Expense	e			outside of Texas. (, TX, officeholder li	Complete Schedule T.
					flowers for ele		
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Office	holder name	Office sought		Office	e held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 8/8 Stogner, Sarah E. (Ms.) 00086276 Date Payee name 11/05/2024 Pesina, Mary 6 Amount (\$) Payee address; City; State; Zip Code \$300.00 605 2nd St Reimbursement from political contributions intended Grandfalls, TX 79742 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. 8 OF Check if Austin, TX, officeholder living expense **Event Expense EXPENDITURE** catering for election night party Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH