The C/OH Instruction G	uide explains how	to complete this form.	1 Filer ID (Ethics Commission File) 00062676	lers) 2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Mark	. M	OFFICE USE ONLY
NAME	NICKNAME	Snider	SUFFIX	Date Received RECEIVED
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	Box 33/6		city: state; zip code 1e++ Tx. 79083	HH 15 2021
Change of Address			Water Control of the	
5 CANDIDATE/ OFFICEHOLDER PHONE	(806) 8	PHONE NUMBER 278-4036	E XTENSION	Date Hand-delivered or Date Posimarkan 7/17/7 Receipt # Amount \$
6 CAMPAIGN TREASURER NAME	MS / MRS / MR NICKNAME	Mark Snider	SUFFIX	Pate RosessedSED JUE (1 5 202) Date Imaged
7 CAMPAIGN TREASURER ADDRESS		,,	Stinnett	state; zip code 7x 79083
(Residence or Business)				
8 CAMPAIGN TREASURER PHONE	(806) 3	PHONE NUMBER 41-027/	EXTENSION	
9 REPORT TYPE	January 15	30th day before	election Runoff	15th day after campaign treasurer appointment (Officeholder Only)
	July 15	8th day before e	lection Exceeded Modifie Reporting Limit	
10 PERIOD COVERED	Month	Day Year / 1 / 2 /		b / 30/21
11 ELECTION	ELECTION DA	TE	ELECTION	TYPE
	Month Day	Year Primary		
	/ /	Genera Genera	Descrip Special	uon
12 OFFICE	84th Judici	ial District Attu	13 OFFICE SOUGHT (if	known)
14 NOTICE FROM POLITICAL	THE CANDIDATE / OFFICE	EHOLDER. THESE EXPENDITURI	ES MAY HAVE BEEN MADE WITHOUT THE	RES MADE BY POLITICAL COMMITTEES TO SUPPORT E CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR ILY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME		·
Additional Pages	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC	COMMITTEE CAMPAIGN TR	EASURER NAME	
		COMMITTEE CAMPAIGN TE	REASURER ADDRESS	SCANNE
		GO TO	PAGE 2	JUL 15 202

15 C/OH NAME	ark W. Sni	der	16 Filer ID (Ethics Commission Filers) 00062676			
17 CONTRIBUTION TOTALS		CAL CONTRIBUTIONS (OTHER THARANTEES OF LOANS, OR	\$ O			
	2. TOTAL POLITICAL CONTI (OTHER THAN PLEDGES, LC	RIBUTIONS DANS, OR GUARANTEES OF LOANS	\$ (
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITI	CAL EXPENDITURE.	\$			
	4. TOTAL POLITICAL EXPEN	IDITURES	\$ (
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIB OF REPORTING PERIOD	UTIONS MAINTAINED AS OF THE L	AST DAY \$			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT LAST DAY OF THE REPORT	OF ALL OUTSTANDING LOANS AS ING PERIOD	OF THE \$			
18 SIGNATURE s	wear or affirm under penalty of periury	that the accompanying report is t	rue and correct and includes all information			
	quired to be reported by me under Title 15		1			
,,	quille to be repensed by me annue man	,				
		Signature of 0	Candidate or Officeholder			
	Please com	plete either option belo	ow:			
		•				
and the same of th	TAMMY A MCBRAYER					
AD MAY	NOTARY PUBLIC					
	STATE OF TEXAS					
(1) Affidavit	MY COMM. EXP. 05/14/25 NOTARY ID 688563-1					
googgoogg	THE TART IS COUNTY IN THE SECOND OF THE SECO					
			4			
NOTARY STAMP/SEA		(
6 ()	before me by Mark S	enider this th	2 th day of Children			
Sworn to and subscribed			e day of,			
20 _ d, to certify	which, witness my hand and seal of office	0 -				
Manay	ur IAmm	4 Magrayer	Notary PUBLC			
Signature of officer administr	///	officer administering oath	Title of officer administering oath			
		OR				
(2) Unsworn Declarati	on					
My name is		, and my date of birth	is			
Mv address is		,				
,	(street)	(city)	(state) (zip code) (country)			
E 6. 12.	, ,	(,,	, , , , , , , , , , , , , , , , , , , ,			
Executed in	County, State of	, on theday of (mo	nth) (year)			
		Signature of Can	didate/Officeholder (Declarant)			

AND WILLIAM TO WAR

12 अधि दशकी

PO Box 3318 Stinnett, TX 79083

Mark W. Snider

Texas Ethics Commission PO Box-12070 Austin, TX 78711-2070

Texas Ethics Commission RECEIVED JUL 15 2021

SKONOT TAME

The C/OH Instruction C	Guide explains how	to complet	te this form.	1 Fi 626	,	cs Commission Filers	(a) 2 Tot	al pages fil	ed: 2
3 CANDIDATE / OFFICEHOLDER	Ms / MRs / MR Mr.	r Mar	rk			мı VV.		OFFICE	USE ONLY
NAME	NICKNAME		LAST ider	••••		SUFFIX	· Date Re	Mary Carlotte, Language Company	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX BOX 3318 S		PT / SUITE #; TX 79083	CITY; }	STAT	E; ZIP CODE	Stortion (2 5 2022 cs Commission
Change of Address									
5 CANDIDATE/ OFFICEHOLDER PHONE	(806)	341-			EXTE	NSION		1/18	or Date Postmarked
6 CAMPAIGN	MS / MRS / MR	F	FIRST			MI	- Receipt	#	Amount \$
TREASURER	Mr.	Ma	ark			W.	Date Pr	hassan	
NAME	NICKNAME		 _AST			SUFFIX		MEGGE	one a ciari di
	NONVINE		nider			33,110	Date în	aged V	.W JAN 4 0 600
7 CAMPAIGN TREASURER ADDRESS	324 Farmer	•	·		С	ITY;		STATE;	ZIP CODE
(Residence or Business)									
8 CAMPAIGN TREASURER	AREA CODE	PHONE 1			EXTE	NSION			
PHONE	(806)	341-	0271						
9 REPORT TYPE	January 15	The second secon	30th day before	election	and construction of the second	Runoff		15th day aft treasurer ap (Officeholde	
	July 15	ericree Estate Asian	8th day before e	lection	a i	Exceeded Modified Reporting Limit	1	Final Repor	t (Attach C/OH - FR)
10 PERIOD	Month	Day	Year			Month	n Day	Year	
COVERED	7 /	/1/	/ 21	Т	HROUGH	12	/ 31	/ 21	
11 ELECTION	ELECTION DA	TE				ELECTION TY	PE		
	Month Day	Year	Primary	,	Runoff	Other			
		/	Genera	1	Special	Description			
12 OFFICE	OFFICE HELD (if any)		I.		13 OFFIC	CE SOUGHT (if knd	wn)		
Z OFFICE	84th Judici		rict Attorr	пеу		,	,		
14 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTIC THE CANDIDATE / OFFIC CONSENT. CANDIDATES	CEHOLDER. TH	IESE EXPENDITURI	ES MAY HA	VE BEEN MAI	DE WITHOUT THE CA	ANDIDATE'S OF	R OFFICEHOL	DER'S KNOWLEDGE OR
COMMITTEE(3)	COMMITTEE TYPE	COMMITTE	E NAME						
Additional Pages	GENERAL	COMMITTE	E ADDRESS						
	SPECIFIC	COMMITTE	E CAMPAIGN TR	EASURER	NAME				
		COMMITTE	E CAMPAIGN TE	REASURE	R ADDRESS	3			
		,	GO TO	DAC	E 2				
			[] []	- AI-	_ /				

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Mark W. Snider				1D (Ethics C 2676	ommission Filers)
17 CONTRIBUTION TOTALS	,				0.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$	0.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.		\$	0.00
	4.	TOTAL POLITICAL EXPENDITURES		\$	0.00
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	ST DAY	\$	0.00
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OI LAST DAY OF THE REPORTING PERIOD	THE	\$	0.00

18 SIGNATURE

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

Signature of Candidate or Officeholder

Please complete either option below:



Snider
Box 3318
Stinnett TX
79083



PARAMETE TX 791

FIRST CLASS

Texas Ethics Commission P.D. Box 12070 Austin, Tx 78711-2070

STATES OF THE PARTY OF THE PART

The C/OH Instruction G	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers) 62676	2 Total pages filed: 2
3 CANDIDATE / OFFICEHOLDER	Ms / MRS / MR FIRST Mr. Mark	мі W.	OFFICE USE ONLY
NAME	NICKNAME LAST Snider	SUFFIX	Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	Box 3318 Stinnett, TX 79083	CITY; STATE; ZIP CODE	JUL 2 5 2022 Texas Ethics Commission
Change of Address			Constraints of the organization
5 CANDIDATE/ OFFICEHOLDER PHONE	(806) 341-0271	EXTENSION	Date Hand-delivered pr Date
6 CAMPAIGN TREASURER NAME	Ms/Mrs/Mr First Mr. Mark	MI W . SUFFIX	Date Processed PROCESSED IIII 2 5 202
	NICKNAME LAST Snider	SUFFIX	Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / S 324 Farmer St. Stinnett, TX 79		STATE; ZIP CODE
		EVTENDION	
8 CAMPAIGN TREASURER PHONE	(806) 341-0271	EXTENSION	
9 REPORT TYPE	January 15 30th day before 6	election Runoff	15th day after campaign treasurer appointment (Officeholder Only)
	July 15 8th day before ele	ection Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year 1 / 1 / 22	THROUGH 6	Day Year / 30 / 22
11 ELECTION	ELECTION DATE	ELECTION TYPE	
	Month Day Year Primary General	Runoff Other Description Special	
12 OFFICE	OFFICE HELD (if any) 84th Judicial District Attorn	13 OFFICE SOUGHT (if known	ı)
14 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURE CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUI COMMITTEE TYPE COMMITTEE NAME	S MAY HAVE BEEN MADE WITHOUT THE CAN	DIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR
Additional Pages	GENERAL COMMITTEE ADDRESS	EASIDED NAME	
	SPECIFIC COMMITTEE CAMPAIGN TRE COMMITTEE CAMPAIGN TR	EASURER ADDRESS	
	GO TO	PAGE 2	

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Mark W. Snider				r ID (Ethics 0 32676	Commission Filers)
17 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$	0.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$	0.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.		\$	0.00
	4.	TOTAL POLITICAL EXPENDITURES		\$	0.00
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS	ST DAY	\$	0.00
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OI LAST DAY OF THE REPORTING PERIOD	F THE	\$	0.00

18 SIGNATURE

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

Signature of Candidate or Officeholder

Please complete either option below:

000000000000000000000000000000000000000	**************************************
(1) A fida viscos	TAMMY A MCBRAYER NOTARY PUBLIC STATE OF TEXAS MY COMM. EXP. 05/14/25 NOTARY ID 688563-1

Stinnett, TX 79083 Mark W. Snider PO Box 3318

TOTAL

3)

PUS POSTAGE PAID STINNETT, TX

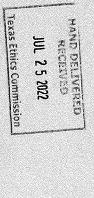
\$0.60 R2308M153490-5

State Bar of Texas Ethics Committee PO Box 12487

Austin, TX 78711-2487

Charlescalinary Consels

Ü 22 22



JUL 25 2022

Ju- 2. 778

Texas Ethics Commission <10 Lindsey Pollack

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 00062676 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Mark W. NAME Date Received **ELECTRONICALLY FILED** 01/17/2023 NICKNAME LAST **SUFFIX** Snider CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** P.O. Box 3318 MAILING Amount Receipt # **ADDRESS** Stinnett, TX 79083 Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Mark W. NAME NICKNAME LAST **SUFFIX** Snider STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE; **TREASURER** 324 Farmer St. **ADDRESS** (Residence or Business)

EXTENSION

THROUGH

Primary

General

Runoff

Exceeded modified reporting limit

Month

ELECTION TYPE

Runoff

Special

Day

12/31/2022

12 OFFICE SOUGHT (if known)

Year

Other

30th day before election

8th day before election

Stinnett, TX 79083

PHONE NUMBER

AREA CODE

(806) 341-0271

January 15

Day

Day

OFFICE HELD (if any)

ELECTION DATE

07/01/2022

Year

Year

District Attorney (Multi-county) District 84

July 15

Month

Month

CAMPAIGN

PHONE

REPORT TYPE

PERIOD

10 ELECTION

11 OFFICE

COVERED

TREASURER

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

13 C / OH NAME	Snider, Mark W. (The Honorable) 14 Filer ID 00062676				(Ethics Commission I	Filers)	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures ma	ccepted or political expenditu ay have been made without t ired to report this information	the candidate's or office	eholder's knowledge	or	
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME					
	GENERAL						
		COMMITTEE ADDRE	SS				
	SPECIFIC						
		COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPA	IGN TREASURER ADDRES	SS			
16 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) \$					0.00	
		CAL CONTRIBUTIONS PLEDGES, LOANS, OF	R GUARANTEES OF LOANS	5)	\$	0.00	
EXPENDITURE TOTALS	3. TOTAL UNITEM	\$	0.00				
	4. TOTAL POLITICAL EXPENDITURES \$					0.00	
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AST DAY OF THE	\$	0.00			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	OF THE LAST DAY	\$	0.00			
17 AFFIDAVIT					-		
		true	wear, or affirm, under penalty e and correct and includes al der Title 15, Election Code.				
				orable Mark W. Snide Candidate or Officeho		_	
			Oignature of	Candidate of Cincent	idei		
AFFIX NO	TARY STAMP / SEAL AB	OVE					
				, this the	day		
of	, 20, to c	ertify which, witness my	hand and seal of office.				
		5		-		_	
Signature of offi	cer administering	Printed name of o	officer administering	ritle of office	r administering oath		

SUBTOTALS - C/OH

	3 of	3
18 FILER NAME Snider, Mark W. (The Honorable)	19 Filer ID (Ethics Commission Filers) 00062676	
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT	
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBU	SUTIONS \$	
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4. SCHEDULE E: LOANS	\$	
5. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CO	ONTRIBUTIONS \$	
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL	CONTRIBUTIONS \$	
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUI	JNDS \$	
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO) A BUSINESS OF C/OH \$	
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL	CONTRIBUTIONS \$	
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTO FILER	STRIBUTIONS RETURNED \$	

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 00062676 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Mark W. NAME Date Received **ELECTRONICALLY FILED** 07/12/2023 NICKNAME LAST **SUFFIX** Snider CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** P.O. Box 3318 MAILING Amount Receipt # **ADDRESS** Stinnett, TX 79083 Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Mark W. NAME NICKNAME LAST **SUFFIX** Snider STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE; **TREASURER** 324 Farmer St. **ADDRESS** (Residence or Business) Stinnett, TX 79083 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (806) 341-0271 **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

OFFICE HELD (if any)

ELECTION DATE

01/01/2023

Year

Year

District Attorney (Multi-county) District 84

PERIOD

10 ELECTION

11 OFFICE

COVERED

THROUGH

Primary

General

Month

ELECTION TYPE

Runoff

Special

Day

06/30/2023

12 OFFICE SOUGHT (if known)

Year

Other

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C / OH NAME	Snider, Mark W. (The Honorable) 14 Filer ID 00062676			(Ethics Commission F	-ilers)			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without d officeholders are required to report this information	t the candidate's or offic	ceholder's knowledge o	or			
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME						
	GENERAL	COMMITTEE ADDRESS	OMMITTEE ADDRESS					
	SPECIFIC							
		COMMITTEE CAMPAIGN TREASURER NAME						
		COMMITTEE CAMPAIGN TREASURER ADDRE	ESS					
16 CONTRIBUTION TOTALS		I IZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		, \$	0.00			
		2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 0.0						
EXPENDITURE TOTALS	3. TOTAL UNITEM	\$	0.00					
	4. TOTAL POLITICAL EXPENDITURES \$							
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$							
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF	\$	0.00					
17 AFFIDAVIT		I swear, or affirm, under penal true and correct and includes under Title 15, Election Code.	all information required					
		The Hor	norable Mark W. Snic	ler				
		Signature o	of Candidate or Officeho	older	_			
AFFIX NO	TARY STAMP / SEAL AB	OVE						
		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 or office	co. dariiiilototiiig	·a name or omoer administering	The of office	c. administering outil				

SUBTOTALS - C/OH

			3 of 3
18 FILER NAM Snider, M	ME lark W. (The Honorable)	19 Filer ID 00062676	(Ethics Commission Filers)
	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	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 C/OH Instruction (Guide explains how to comple	ete this form.	1 Filer ID (Ethics Commis 00062676	sion Filers)	2 Total pages filed: 4	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE USE ONLY	
OFFICEHOLDER NAME	The Honorable	Mark W.			Date Received	
					ELECTRONICALLY FILED	
	NICKNAME	LAST		SUFFIX	01/11/2024	
	MICKINAIWIE	Snider		SOFFIX	0-7-1-0-1	
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or Date Postmarked	
MAILING	P.O. Box 3318				Receipt # Amount	
ADDRESS					The state of the s	
Change of Address	Stinnett, TX 79083				Date Processed	
					Date Imaged	
5 CAMPAIGN TREASURER		FIRST		MI		
NAME	Mr.	Mark W.				
	NICKNAME	LAST		SUFFIX		
		Snider				
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO	BOX PLEASE);	APT	/ SUITE #; CITY;	STATE; ZIP CODE	
ADDRESS	324 Farmer St.					
(Residence or Business)						
	Stinnett, TX 79083					
7 CAMPAIGN	AREA CODE PHON	E NUMBER E	EXTENSION			
TREASURER	(806) 341-0271	L NOMBLIX L	EXTENSION			
PHONE	(000) 541-0271					
8 REPORT						
TYPE	X January 15	30th day before	election	Runoff	15th day after campaign treasurer	
		Tout to before			appointment (officeholder only)	
	July 15	8th day before	election	Exceeded modified reporting limit	Final Report (Attach C/OH-FR)	
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	Month Day Year 07/01/2023	TH	IROUGH	Month Day 12/31/202		
	07/01/2023			12/31/202	5	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	XP	rimary	Runoff	Other	
	03/05/2024			Coosial		
			Seneral	Special		
44 055105				La office coulding		
11 OFFICE	OFFICE HELD (if any) District Attorney (Multi-cou	nty) District 94		12 OFFICE SOUGHT	(If known) (Multi-county) District 84	
	District Attorney (Multi-cou	rity) District 64		District Attorney	(Multi-county) District 64	
		GO T	O PAGE 2			
1						

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C / OH NAME	Snider, Mark W. (The	Honorable)	14 Filer ID 00062676	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political expen These expenditures may have been made witho officeholders are required to report this informa	ut the candidate's or offic	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAMI		
		COMMITTEE CAMPAIGN TREASURER ADDR	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)	\$ 0.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	\$ 0.00		
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 1,250.00
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF TH RIOD	E LAST DAY OF THE	\$ 0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS TING PERIOD	AS OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT		l swear, or affirm, under per true and correct and include under Title 15, Election Cod	s all information required	
		The H	onorable Mark W. Snid	er
		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
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

			3 of 4
18 FILER NAME Snider, Mark	k W. (The Honorable)	19 Filer ID 00062676	(Ethics Commission Filers)
20 SCHEDULE S NAME OF SC			SUBTOTAL AMOUNT
1. S	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2. S	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. S	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. S	SCHEDULE E: LOANS		\$
5. S	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$
6. S	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. S	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
8. S	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. X S	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$ 1,250.00
10. S	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$
11. S	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$
	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(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) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Total pages Schedule G: Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 4/4 Snider, Mark W. (The Honorable) 00062676 Date Payee name 11/21/2023 The Republican Party of Texas 6 Amount (\$) Payee address; City; State; Zip Code \$1,250.00 807 Brazos, Suite 701 Reimbursement from political contributions intended Austin, TX 78701 **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 Fees **EXPENDITURE** candidate filing fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

The C/OH Instruction	n Guide explains how to com	nplete this form.	lete this form. 1 Filer ID (Ethics Commission Filers) 00062676		2 Total pages filed: 3		
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE U	JSE ONLY	
OFFICEHOLDER NAME	The Honorable	Mark W.			Date Received ELECTRONICA	ALLY FILED	
	NICKNAME	LAST Snider		SUFFIX	07/13/2024		
4 CANDIDATE /	ADDRESS / PO BOX; A	PT / SUITE #; CIT	Y;	ZIP CODE	Date Hand-delivered or	r Date Postmarked	
OFFICEHOLDER MAILING ADDRESS	P.O. Box 3318				Receipt #	Amount	
Change of Address	Stinnett, TX 79083				Date Processed		
					Date Imaged		
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	<u> </u>		
TREASURER NAME	Mr.	Mark W.		IVII			
	NICKNAME	LAST Snider		SUFFIX			
6 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO F 324 Farmer St.	PO BOX PLEASE);	АРТ	/ SUITE#; CITY;	STA	ATE; ZIP CODE	
(Residence or Business)	Stinnett, TX 79083						
7 CAMPAIGN TREASURER PHONE	AREA CODE PH (806) 341-0271	ONE NUMBER E	EXTENSION				
8 REPORT TYPE	January 15	30th day before		Runoff	15th day after car appointment (office	ceholder only)	
	X July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (Atta	ach C/OH-FR)	
9 PERIOD COVERED	Month Day Yea 01/01/2024		IROUGH	Month Day 06/30/202	Year 24		
10 ELECTION	ELECTION DATE Month Day Yea 11/05/2024		rimary seneral	ELECTION TYPE Runoff Special	Other		
11 OFFICE	OFFICE HELD (if any) District Attorney (Multi-o	county) District 84	Hutchinson	12 OFFICE SOUGHT District Attorney	(if known) (Multi-county) Dis	strict 84th	
		GO T	O PAGE 2				

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C / OH NAME	Snider, Mark W. (The	Honorable)	14 Filer ID (I 00062676	Ethics Commission Fi	ilers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without d officeholders are required to report this information	the candidate's or office	holder's knowledge oi	r
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC	COMMITTEE ADDRESS			
	5. 255				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS		
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$	0.00
	2. TOTAL POLITIC (OTHER THAN F	S)	\$	0.00	
EXPENDITURE TOTALS	3. TOTAL UNITEM	\$	0.00		
	4. TOTAL POLITIC	AL EXPENDITURES		\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LERIOD	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.			
		The Hen	arabla Mark W. Caida	_	
			orable Mark W. Snide f Candidate or Officehold		-
VEELX NO	TARY STAMP / SEAL ABO	OVE			
AFFIX NO	TART STAINF / SEAL AD	OVE			
		aidertify which, witness my hand and seal of office.	, this the	day	
UI	, 20, to ce	anny which, whiless my hand and seal of office.			
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath	-

SUBTOTALS - C/OH

			3 of 3
18 FILER NAM Snider, M	ME lark W. (The Honorable)	19 Filer ID 00062676	(Ethics Commission Filers)
	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	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 FOR TO FILER	RETURNED	\$

The C/OH Instruction (Guide explains how to complete		Filer ID (Ethics Commis 00062676		2 Total pages filed: 5		
3 CANDIDATE /	MS / MRS / MR	IRST		MI	OFFICE	USE ONLY	
OFFICEHOLDER NAME	The Honorable N	Mark W.			Date Received ELECTRONIC	ALLY FILED	
	NICKNAME L			SUFFIX	01/06/2025		
		Snider					
4 CANDIDATE /	ADDRESS / PO BOX; APT / S	SUITE#; CITY	' ;	ZIP CODE	Date Hand-delivered of	or Date Postmarked	
OFFICEHOLDER MAILING ADDRESS	P.O. Box 3318				Receipt #	Amount	
Change of Address	Stinnett, TX 79083						
	Summer, 17, 19000				Date Processed		
					Date Imaged		
5 CAMPAIGN	MS / MRS / MR F	IRST		MI	<u> </u>		
TREASURER NAME	Mr. N	1ark W.					
	NICKNAME L	 AST		SUFFIX			
		Snider		301117			
6 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BO 324 Farmer St.	OX PLEASE);	API	/ SUITE #; CITY	; STA	ATE; ZIP CODE	
(Residence or Business)	Stinnett, TX 79083						
7 CAMPAIGN	AREA CODE PHONE	NUMBER EX	XTENSION				
TREASURER PHONE	(806) 341-0271						
8 REPORT TYPE	X January 15	30th day before 6	election	Runoff		mpaign treasurer	
					appointment (offi		
	July 15	8th day before el	lection	Exceeded modified reporting limit	Final Report (Att	ach C/OH-FR)	
9 PERIOD	Month Day Year			Month Day	Year		
COVERED	07/01/2024	THE	ROUGH	12/31/20	24		
10 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month Day Year	Pri	mary	Runoff	Other		
		Ge	eneral	Special			
				,			
11 OFFICE	OFFICE HELD (if any)		5	12 OFFICE SOUGH	T (if known)		
	District Attorney (Multi-count 84 Hutchinson	ty) Place Stinn	ett District				
	•			•			
		GO TO	O PAGE 2				

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C / OH NAME	Snider, Mark W. (The	Honorable)	14 Filer ID 00062676	(Ethics Commission Fil	lers)	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political expendit These expenditures may have been made without officeholders are required to report this informatio	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 ADDRE	SS			
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$	0.00	
	2. TOTAL POLITIC (OTHER THAN F	S)	\$	0.00		
EXPENDITURE TOTALS	3. TOTAL UNITEM	\$	0.00			
	4. TOTAL POLITIC	1. TOTAL POLITICAL EXPENDITURES				
CONTRIBUTION BALANCE	5. TOTAL POLITICATION 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.				
		The Hon	orable Mark W. Snide	er		
		Signature o	f Candidate or Officehol	lder		
AFFIX NO	TARY STAMP / SEAL ABO	OVE				
Sworn to and subs	cribed before me, by the sa	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	r administering oath	-	

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				3 01 3			
18 FILER NA	ME	19 Filer ID	(Ethics Commiss	sion Filers)			
	Mark W. (The Honorable)	00062676					
	SCHEDULE SUBTOTALS NAME OF SCHEDULE						
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS						
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00			
3. X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00			
4. X	4. X SCHEDULE E: LOANS						
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS				0.00			
6. X	6. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS						
7. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	0.00			
8. X	8. X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD			0.00			
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	\$				
			1				

PLE	DGED CONTRIBU	TIONS			SCHEDULE	В		
The Instruction Guide explains how to complete this form.					1 Total pages Schedule B: Sch: 1/1 Rpt: 4/5			
2 FILER N				3	Filer ID (Ethics Commission Filers)			
<u></u>	Mark W. (The Honorable)	.=0		+	00062676	0.00		
TOTAL OF UNITEMIZED PLEDGES Date 6 Full name of pledgorout-of-state PAC (ID#:					\$	0.00		
5 Date	6 Full name of pledgor	out-of-state PAC (ID#	t:	_) 8	Amount of 9 In-kind description pledge (\$) (If applicable)			
	7 Pledgor Address;	City; State; Zip Code	9					
] [Check if travel outside of Texas. Complete Sch	edule T		
10 Principal	occupation / Job title (See Instru	ctions)	11 Employer (See In:	structi	ions)			

	LOANS					SCH	IEDULE E	
	The Instruction	on Guide explains how to	complete this f	orm.	1 Total pages Schedule E: Sch: 1/1 Rpt: 5/5			
2	FILER NAME Snider, Mark W.	(The Honorable)				ID (Ethics Comm	nission 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 Amoi	unt (\$)	
6	Is lender a financial institution?	8 Lender address; City;	State;	Zip Code		10 Interest Ra		
						11 Maturity Da	ate	
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See Instructio	ns)	•		
14	Description of Coll None	ateral		15 Check if personal funds v	vere deposi	ted into political ad (See Instru		
16	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Gu	uaranteed (\$)	
	not applicable	18 Guarantor address; City;	State;	Zip Code				
20	Principal occupation	on		21 Employer (See Instructio	ns)	l		