# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction (	Guide explains hov	v to complete this form.	1 Filer ID (Ethics Co	ommission Filers)	2 Total pages	filed: 6
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR NICKNAME	FIRST Tammy LAST McRae		J. suffix	Date Received	EUSEONIX EULIVED E
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX		CITY; STATE;	ZIP CODE	MONTGOME JAN	V 13 2025 PATOS
Ulange of Address	10 Capsha	aw Ci C	onroe Tx 7738	,5		35AAAA
5 CANDIDATE/ OFFICEHOLDER PHONE	( 936)	PHONE NUMBER 676-7957	EXTENSIO		Date Hand-deliver	ed~or-Date Postmarked
6 CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST Teff		мі W	Date Processed	-
	NICKNAME	Jeff LAST		SUFFIX		
		N 8 a FD acc			Date Imaged	
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS	McRae (NO PO BOX PLEASE); APT / St	UITE #; CITY;		STATE;	ZIP CODE
(Residence or Business)	10 Capsł	naw Ct	Conroe		Тх	77385
8 CAMPAIGN TREASURER PHONE						
9 REPORT TYPE	January 15	30th day before e	Ll			after campaign appointment der Only)
	July 15	8th day before ele-	OUOI	eded Modified orting Limit	Final Rep	ort (Attach C/OH - FR)
10 PERIOD	Month	Day Year		Month	Day Ye	ar
COVERED	07	<b>/</b> 01 <b>/</b> 2024	THROUGH	12 /	/31 /202	24
11 ELECTION	ELECTION DA	NTE		ELECTION TYPE		
	Month Day	Year Primary	Runoff	Other		
	, working	,   -		Description		
		General General	Special			
12 OFFICE	OFFICE HELD (If any) Montgomery Cor	l unty Tax Assessor-Collector	. !	OUGHT (if known)	) Assessor-Collector	
			Ividitgomery	County Tax A	.ssessui-Collectol	
14 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFIC	CE OF POLITICAL CONTRIBUTIONS A CEHOLDER. THESE EXPENDITURES S AND OFFICEHOLDERS ARE REQUIR	MAY HAVE BEEN MADE W	ITHOUT THE CAND	DIDATE'S OR OFFICEHO	DLDER'S KNOWLEDGE OR
OCIMINITY LEGO	COMMITTEE TYPE	COMMITTEE NAME				
Additional Pages	GENERAL	COMMITTEE ADDRESS				
	SPECIFIC	COMMITTEE CAMPAIGN TREA	ASURER NAME			
		COMMITTEE CAMPAIGN TRE	ASURER ADDRESS			
		GO TO I	PAGE 2			

#### **CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS**

#### FORM C/OH **COVER SHEET PG 2**

				2010	
13 C / OH NAME	McRae, Tammy		14 Filer ID		
15 NOTICE FROM POLITICAL COMMITTEE(S)	M candidate / officeholder. These expenditures may have been made without the candidate's or officeholder. TICAL consent. Candidates and officeholders are required to report this information only if they receive notic				
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		*-	
	GENERAL	COMMETTER ADDRESS			
	SPECIFIC	COMMITTEE ADDRESS			
•		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRESS	S		
16 CONTRIBUTION TOTALS		  ZED POLITICAL CONTRIBUTIONS (OTHER THAN  ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00	
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)	)	\$ 550.00	
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$ 0.00	
	4. TOTAL POLITIC.	AL EXPENDITURES		\$ 2,190.63	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			\$ 47,941.68	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPA OF THE REPORT	AL AMOUNT OF ALL OUTSTANDING LOANS AS C TING PERIOD	OF THE LAST DAY	\$ 0.00	
17 AFFIDAVIT					
		I swear, or affirm, under penalty of true and correct and includes all i under Title 15, Election Code.			
	KIM ROE NOTARY PUBLIC, STATE OF TE Notary ID #13017659 Expires April 01,202	9-3 27 Jammy	Candidate or Officehold		
AFFIX NOT	TARY STAMP / SEAL ABO	DVE	11	In	
Swormto and subsci	cribed before me, by the sa	aid IAMMY McRAE rtify which, witness my hand and seal of office.	, this the	Tuday	
		. If willion, williess my hand and soul of office.			
	Dr. N	Kim Kot	NOTAR	4 Public	
Signature of office	er administeling	Printed name of officer administering	Title of officer a	dministering oath	

### SUBTOTALS - C/OH

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

				COVERS	3 of 6
18 FILER NAME McRae, Tammy  19 Filer ID					
ł	20 SCHEDULE SUBTOTALS  NAME OF SCHEDULE				TOTAL AMOUNT
1.	х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	550.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	2,190.63
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.		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	DNS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	
				•	,

	MONET	TARY POLITICAL CONTRIBUTION	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/6 3 Filer ID		
	The Instru	ction Guide explains how to complete this 1			
2	FILER NAME McRae, Tar				
4	Date 10/04/2024	<ul> <li>Full name of contributor</li></ul>		7 Amount of Contribution (\$)	\$300.06
В	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction	ls)	
	Date 10/10/2024	Full name of contributor		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	is)	

#### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Depart

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees
Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Candidate/Officeholder/Politica Credit Card Payment		
1	. Total pages Schedule F1:	: 2 FILER NAME 3 Filer ID	
	Sch: 1/2 Rpt: 5/6	McRae, Tammy	
4	Date	5 Payee name	
L	10/03/2024	East Montgomery County Fair Association	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,165,63	P. O. Box 704	
		Porter , TX 77365	
8		(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Candidate/Officeholder/Political Committee	
		Annual Fair & Livestock Auction	
L			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	_
Ĺ.,	exheuritrie to neuent otor	П	
Г	Date	Payee name	
İ_	09/13/2024	Hispanic Conservatives of Montgomery County	
Γ	Amount (\$)	Payee address; City; State; Zip Code	
	\$25.00	27119 W Balsam Fir Cir	
	1		
		Spring , TX 77386	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
		Check If Austin, TX, officeholder living expense  Annual Dues	
		Allilual Dues	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OF		i
	Data	T _	
	Date 08/14/2024	Payee name  Magnelia Support Croup	
_		Magnolia Support Group	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	P. O. Box 1578	
		Magnolia , TX 77353-1578	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	
		Candidate/Officeholder/Political Committee	
		Annual Fair & Livestock Auction	
	- 1:		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held H	
	•	· · · · · · · · · · · · · · · · · · ·	

#### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

#### SCHEDULE F1

Advertising Expense Accounting/Banking

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundralsing Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political C Credit Card Payment	Gift/Awards/Memorials Expense Prir	ing Expense ting Expense aries/Wages/Contract Labor to complete this form.	Travel In District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F1; 2		3	Filer ID
Sch: 2/2 Rpt; 6/6	McRae, Tammy		
	Payee name		
10/04/2024	Montgomery County Republican Party of T	exas	
	Payee address; City; State; Zi	Code	
\$500.00	18001 Hwy 105 W, Suite 101		
	Montgomery , TX 77356		
8 PURPOSE (a	A) Category (See Categories listed at the top of this schedule)		
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee		ide of Texas. Complete Schedule T. , officeholder living expense
	Candidate/Onicendide//Folitical Committee	Donation	,
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office	sought	Office held