CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT					FORM C/OH COVER SHEET PG 1		
The C/OH Instruction Guide explains how to complete this form.  1 Filer ID (Ethics Commission Filers)					2 Total pages filed:		
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	Robert		M	OFFICE USE ONLY		
NAME	NICKNAME	ROSE	Date Received				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address		Walnut Cr		ATE; ZIP CODE	RECEIVED		
5 CANDIDATE/ OFFICEHOLDER PHONE	Bryan AREA CODE (979)	PHONE NUMBER 575-414	EXT	TENSION	Date Hand dalivered of Date Date Ha		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR  NICKNAME	FIRST LAST		SUFFIX	Date Imaged		
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS	(NO PO BOX PLEASE); APT/S	Creek	C.f.	STATE; ZIP CODE		
(Residence or Business)	Bryan	1 / X /	180/	/			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION  (979) 575-4148						
9 REPORT TYPE	January 15	30th day before e		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 / 25	THROUGH	Month 7	Day Year / 15 / 2025		
11 ELECTION	Month Day	Year Primary General	Runoff Special	Other Description			
12 OFFICE	OFFICE HELD (if any)		<b>13</b> OF	FICE SOUGHT (if known	)		
14 NOTICE FROM POLITICAL COMMITTEE(S)  Additional Pages	THE CANDIDATE / OFFIC CONSENT. CANDIDATES	CEHOLDER. THESE EXPENDITURES AND OFFICEHOLDERS ARE REQUI	S MAY HAVE BEEN M	ADE WITHOUT THE CAN	ADE BY POLITICAL COMMITTEES TO SUPPORT DIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR HEY RECEIVE NOTICE OF SUCH EXPENDITURES.		
	COMMITTEE TYPE	COMMITTEE NAME					
	GENERAL	COMMITTEE ADDRESS					
	SPECIFIC	COMMITTEE CAMPAIGN TRE					
		COMMITTEE CAMPAIGN TR	EASURER ADDRES	SS			
		GO TO	PAGE 2				

## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 2

CAMPAIG	N FINANCE REPORT		O V LIX OI	ILLI I G Z	
15 C/OH NAME	<del></del>	<b>16</b> File	er ID (Ethics C	ommission Filers)	
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	THAN	\$		
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	ANS)	\$		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.		\$		
	4. TOTAL POLITICAL EXPENDITURES	\$			
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE OF REPORTING PERIOD	E LAST DAY	\$ 2	66 88	
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS A LAST DAY OF THE REPORTING PERIOD	AS OF THE	\$	113	
	wear, or affirm, under penalty of perjury, that the accompanying report i	is true and c	orrect and inc	ludes all information	
		1			
	fall ,	lose			
	Signature of	of Candidate	or Officehold	er	
NOTARY MANUSEAL Sworn to and subscribed 20 25 , to certify	Please complete either option be before me by Robert Rose this which, witness my hand and seal of office.	v (d	Q day of	July.	
heas	m 1- 2	noc	City	Secretar	
Signature of officer administe			Title of office	r administering oath	
(2) Unsworn Declaration	on on				
My name is	, and my date of bi	rth is		•	
My address is					
	(street) (city)	(state)	(zip code)	(country)	
Executed in	County, State of , on the day of (r	month)	, 20	-	
	(1	nontri)	(year)		

Signature of Candidate/Officeholder (Declarant)