

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Natalie E. Carter		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 30.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,525.00
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 LAST DAY OF REPORTING PERIOD	\$ 2,219.70
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$1,480.21

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.

Natalie Carter

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

Sworn to and subscribed before me by _____ this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Natalie Carter, and my date of birth is

My address is 9734 Carina Forest Court, Humble, TX, 77396, USA
(street) (city) (state) (zip code) (country)

Executed in Harris County, State of Texas, on the 15th day of January, 2025
(month) (year)

Natalie Carter

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME Natalie E. Carter		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1555.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 1
2 FILER NAME Natalie E. Carter		3 Filer ID (Ethics Commission Filers)
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deanie Allen	7 Amount of contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code [REDACTED] Kingwood, Texas 77345		
8 Principal occupation / Job title (See Instructions) Private Tutor		9 Employer (See Instructions) Self-Employed
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tesslyn R Mustain	Amount of contribution (\$) \$25.00
Contributor address; City; State; Zip Code [REDACTED], Humble, Texas 77346		
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Humble I.S.D.
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gayle Sampley	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code [REDACTED] Atascosita, Texas 77346		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donald Sampley	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code [REDACTED] Atascosita, Texas 77346		
Principal occupation / Job title (See Instructions) Self-Employed		Employer (See Instructions) N/A
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		