## **DIRECT CAMPAIGN EXPENDITURES CAMPAIGN FINANCE REPORT**

## FORM DCE **COVER SHEET PG 1**

The DCE Instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers)   00083136					2 Total pages filed: 3		
3 FILER NAME	MS / MRS / MR	FIRST		MI	OFFICE USE ONLY		
	NICKNAME	LAST Jolt Action		SUFFIX	Date Received ELECTRONIC 02/12/2024	ALLY FILED	
4 FILER ADDRESS	ADDRESS / PO BOX; A	PT / SUITE #; CIT	Y; STATE;	ZIP CODE			
Change of Address	P.O. Box 4185				Date Hand-delivered	or Date Postmarked	
	Austin, TX 78765				Receipt #	Amount	
5 FILER PHONE	AREA CODE PHO (512) 537-1012	ONE NUMBER	EXTENSION		Date Processed		
6 REPORT TYPE	January 15		th day before election		Date Imaged		
	July 15		h day before election unoff				
7 PERIOD	Month Day Yea	r		Month Day	Year		
COVERED	01/01/2024	Tł	IROUGH	02/24/202	4		
8 ELECTION	ELECTION DATE Month Day Yea 03/05/2024		rrimary	ELECTION T Runoff Special	YPE Other		
9 FILER ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported					
(Attach lists on plain paper to complete this report if		B. Opposed					
necessary.)	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported					
		B. Opposed					
	3. Officeholders Assisted						
	(Identify by name or, if applicable, classify by party.)						
GO TO PAGE 2							
Forms provided by Te	exas Ethics Commission	www.et	hics.state.tx.us		Vers	ion V3.5.1.9000c47	

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## FORM DCE COVER SHEET PG 2

10 FILER NAME				11 Filer ID	(Ethics Commission Fil	ers)	
Jolt Action					00083136		
12 EXPENDITURE TOTALS	1. TOTAL UNITEMIZED POLITICAL EXPENDITURES			\$		0.00	
	2. TOTAL POLIT	ICAL EXPENDITURES		\$		0.00	
13 AFFIDAVIT							
		I swear, or affirm, ur true and correct and under Title 15, Elect	l includes all info	erjury, that the ac rmation required	companying report is to be reported by me		
		Signature of Filer					
		Signature of	individual with a	or uthority to sign or	h behalf of entity		
				er is an entity)			
	bed before me, by the sa	id tify which, witness my hand and seal o		this the	day		
Signature of officer administering oath		Printed name of officer administeri	ing oath	Title of office	er administering oath	_	

SUBTOTALS - DCE	FC COVER SH	EET PG 3 3 of 3
14 FILER NAME15 Filer IDJolt Action00083136		mission Filers)
16 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTO	TAL AMOUNT
1. X SCHEDULE F1: POLITICAL EXPENDITURES	\$	0.00
2. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	0.00
3. X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	0.00