# STATE / COUNTY CHAIR CAMPAIGN FINANCE REPORT

# FORM SC C/OH COVER SHEET PG 1

| The SC C/OH Instruction ( | Suido avalaina haw ta aamalata              | this form       | 1 Filer ID                          |        | 2 Total pages filed:                   |  |  |
|---------------------------|---------------------------------------------|-----------------|-------------------------------------|--------|----------------------------------------|--|--|
| The SC C/OH Instruction C | Guide explains how to complete              | this form.      | (Ethics Commission Filers) 00084273 | )      | 3                                      |  |  |
| 3 CANDIDATE<br>NAME       | MS / MRS / MR<br>Ms.                        | FIRST<br>Amy E. |                                     | MI     | OFFICE USE ONLY                        |  |  |
|                           | IVIS.                                       | Allly E.        |                                     |        | Date Received                          |  |  |
|                           |                                             |                 |                                     |        | ELECTRONICALLY FILED                   |  |  |
|                           | NICKNAME                                    | LAST            | •.                                  | SUFFIX | 01/08/2025                             |  |  |
|                           |                                             | Hamrick Lev     | VIS                                 |        |                                        |  |  |
| 4 CANDIDATE               | ADDRESS / PO BOX; AP                        | T / SUITE #; C  | CITY; STATE; ZIP CO                 | DDE    | Date Hand-delivered or Date Postmarked |  |  |
| ADDRESS                   | 3215 Ellscott Drive                         |                 |                                     |        | Receipt # Amount                       |  |  |
|                           |                                             |                 |                                     |        |                                        |  |  |
| Change of Address         | Spring, TX 77386                            |                 |                                     |        | Date Processed                         |  |  |
|                           |                                             |                 |                                     |        | Date Imaged                            |  |  |
|                           |                                             |                 |                                     |        |                                        |  |  |
| 5 CAMPAIGN<br>TREASURER   | MS / MRS / MR                               | FIRST           |                                     |        | MI                                     |  |  |
| NAME                      | Ms.                                         | Caroline        |                                     |        |                                        |  |  |
|                           | NICKNAME                                    | LAST            |                                     |        | SUFFIX                                 |  |  |
|                           | MORNAME                                     | Stansky         |                                     |        | 30111X                                 |  |  |
|                           |                                             | · · · · · · ·   |                                     |        |                                        |  |  |
| C CAMPAICNI               | CTDEET ADDDECC (NO D                        | O BOY DI FACE   | ADT / CLUTE #                       | CITY   | CTATE: 710 CODE                        |  |  |
| 6 CAMPAIGN<br>TREASURER   | STREET ADDRESS (NO Post 2342 Greenglade Dr. | O BOX PLEASE)   | ; APT/SUITE#;                       | CITY;  | STATE; ZIP CODE                        |  |  |
| ADDRESS                   | 2042 Greenglade Dr.                         |                 |                                     |        |                                        |  |  |
| (Residence or Business)   | Spring, TX 77386                            |                 |                                     |        |                                        |  |  |
|                           |                                             |                 |                                     |        |                                        |  |  |
| 7 CAMPAIGN                | AREA CODE                                   | PHONE N         | NUMBER                              |        | EXTENSION                              |  |  |
| TREASURER<br>PHONE        | (832) 335-0746                              |                 |                                     |        |                                        |  |  |
|                           |                                             |                 |                                     |        |                                        |  |  |
| 8 REPORT TYPE             |                                             |                 |                                     |        |                                        |  |  |
|                           | X January 15                                | 30th day        | y before convention / elect         | tion   | Runoff                                 |  |  |
|                           | July 15                                     | 8th day         | before convention / election        | on     | Final report (Attach SC C/OH-FR)       |  |  |
|                           |                                             |                 |                                     |        |                                        |  |  |
| 9 PERIOD<br>COVERED       | 1                                           | <b>Year</b>     | THROUGH                             |        | Month Day Year                         |  |  |
|                           | 07/01/2024                                  |                 | THROUGH                             |        | 12/31/2024                             |  |  |
| 10 CONVENTION /           | Month Day                                   | /ear            | 11 OFFICE                           |        | STATE CHAIR                            |  |  |
| ELECTION DATE             |                                             |                 | SOUGH                               | Т      | X COUNTY CHAIR                         |  |  |
|                           |                                             |                 |                                     |        |                                        |  |  |
| 12 POLITICAL<br>PARTY     | Democrat                                    |                 |                                     |        |                                        |  |  |
|                           | Montgomery                                  |                 |                                     |        |                                        |  |  |
|                           |                                             |                 |                                     |        |                                        |  |  |
|                           |                                             |                 |                                     |        |                                        |  |  |
|                           |                                             |                 |                                     |        |                                        |  |  |
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|                           |                                             |                 |                                     |        |                                        |  |  |

#### STATE / COUNTY CHAIR CAMPAIGN FINANCE REPORT: SUPPORT & TOTALS

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

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| 13 CANDIDATE NAME                              | Hamrick Lewis, Amy                                                                     | <b>14</b> Filer ID ( 00084273                                                                                       | Ethics Commission Filers) |                    |  |  |
|------------------------------------------------|----------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|---------------------------|--------------------|--|--|
| 15 NOTICE<br>FROM<br>POLITICAL<br>COMMITTEE(S) |                                                                                        | oolitical expenditures by political committees to suppandidate's knowledge or consent. Candidates are rependitures. |                           |                    |  |  |
| Additional Pages                               | COMMITTEE TYPE                                                                         | COMMITTEE NAME                                                                                                      |                           |                    |  |  |
|                                                | GENERAL                                                                                |                                                                                                                     |                           |                    |  |  |
|                                                |                                                                                        | COMMITTEE ADDRESS                                                                                                   |                           |                    |  |  |
|                                                | SPECIFIC                                                                               |                                                                                                                     |                           |                    |  |  |
|                                                |                                                                                        | COMMITTEE CAMPAIGN TREASURER NAME                                                                                   |                           |                    |  |  |
|                                                |                                                                                        | COMMITTEE CAMPAIGN TREASURER ADDRES                                                                                 | SS                        |                    |  |  |
|                                                |                                                                                        |                                                                                                                     |                           |                    |  |  |
| 16 CONTRIBUTION<br>TOTALS                      | 1. TOTAL UNITEM<br>OR GUARANTE                                                         | \$ 0.00                                                                                                             |                           |                    |  |  |
|                                                |                                                                                        | <b>AL CONTRIBUTIONS</b><br>PLEDGES, LOANS, OR GUARANTEES OF LOANS                                                   | 5)                        | \$ 0.00            |  |  |
| EXPENDITURE<br>TOTALS                          | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES                                             |                                                                                                                     |                           | \$ 0.00            |  |  |
|                                                | 4. TOTAL POLITIC                                                                       | AL EXPENDITURES                                                                                                     |                           | \$ 0.00            |  |  |
| CONTRIBUTION<br>BALANCE                        | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD |                                                                                                                     |                           | <b>\$</b> 463.88   |  |  |
| OUTSTANDING<br>LOAN TOTALS                     | 6. TOTAL PRINCIP<br>OF THE REPOR                                                       | AL AMOUNT OF ALL OUTSTANDING LOANS AS<br>TING PERIOD                                                                | OF THE LAST DAY           | \$ 0.00            |  |  |
| 17 AFFADAVIT                                   |                                                                                        |                                                                                                                     |                           |                    |  |  |
|                                                |                                                                                        | I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.                    |                           |                    |  |  |
|                                                |                                                                                        | Ms Am                                                                                                               | ny E. Hamrick Lewis       |                    |  |  |
|                                                | Signature of Candidate                                                                 |                                                                                                                     |                           |                    |  |  |
| AFFIX NO                                       | TARY STAMP / SEAL ABO                                                                  | DVE                                                                                                                 |                           |                    |  |  |
| Sworn to and subso                             | cribed before me, by the s                                                             | aid                                                                                                                 | , this the                | day                |  |  |
|                                                |                                                                                        | ertify which, witness my hand and seal of office.                                                                   | ·                         |                    |  |  |
|                                                |                                                                                        |                                                                                                                     |                           |                    |  |  |
| Signature of office                            | er administering oath                                                                  | Printed name of officer administering oath                                                                          | Title of officer          | administering oath |  |  |

#### SUBTOTALS - SC C/OH

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

|                                                            |                              | 3 of 3          |
|------------------------------------------------------------|------------------------------|-----------------|
| 18 CANDIDATE NAME Hamrick Lewis, Amy E. (Ms.)              | (Ethics Commission Filers)   |                 |
| 20 SCHEDULE SUBTOTALS  NAME OF SCHEDULE                    |                              | SUBTOTAL AMOUNT |
| 1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTION            | NS                           | \$              |
| 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL           | CONTRIBUTIONS                | \$              |
| 3. SCHEDULE B: PLEDGED CONTRIBUTIONS                       |                              | \$              |
| 4. SCHEDULE E: LOANS                                       |                              | \$              |
| 5. SCHEDULE F1: POLITICAL EXPENDITURES FROM PO             | LITICAL CONTRIBUTIONS        | \$              |
| 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS                |                              | \$              |
| 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM               | POLITICAL CONTRIBUTIONS      | \$              |
| 8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CA             | -<br>IRD                     | \$              |
| 9. SCHEDULE G: POLITICAL EXPENDITURES FROM PER             | RSONAL FUNDS                 | \$              |
| 10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBU            | JTIONS TO A BUSINESS OF C/OH | \$              |
| 11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM            | POLITICAL CONTRIBUTIONS      | \$              |
| 12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS TO FILER | , AND CONTRIBUTIONS RETURNED | \$              |
|                                                            |                              |                 |