# 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 File 00088385		<ol> <li>Total pages file</li> <li>11</li> </ol>	
3 CANDIDATE /	MS / MRS / MR FIRST		MI	OFFICE U	
OFFICEHOLDER	Albert				
NAME				Date Received	
				ELECTRONICAL	LY FILED
	NICKNAME LAST		SUFFIX	01/15/2025	
	Hunte	r			
4 CANDIDATE /	ADDRESS / PO BOX; APT / SUITE	#; CITY;	ZIP CODE	Date Hand-delivered or D	Date Postmarked
OFFICEHOLDER	PO BOX 291	<i>"</i> , on ,	ZII GODE		
MAILING	PO BOX 291			Receipt #	Amount
ADDRESS					
Change of Address	Meridian, TX 76665			Date Processed	
				Date Imaged	
				Date maged	
5 CAMPAIGN	MS/MRS/MR FIRST		MI		
TREASURER	Mr. Albert	I			
NAME		L.			
	NICKNAME LAST		SUFFIX		
	Hunter				
6 CAMPAIGN	STREET ADDRESS (NO PO BOX PL	.EASE); APT / SUI	TE #; CITY;	STAT	E; ZIP CODE
TREASURER ADDRESS	263 County Road 2601				
(Residence or Business)					
(Residence of Busiliess)	Meridian, TX 76665				
7 CAMPAIGN	AREA CODE PHONE NUME	BER EXTENSION			
TREASURER PHONE	(254) 366-8439				
THOME					
8 REPORT				_	
TYPE	X January 15 30th	day before election Runoff		15th day after camp appointment (office	
	July 15 8th d	ay before election 🔲 Exceed	ded modified	Final Report (Attacl	
		reportin		T man report (Attach	
9 PERIOD	Month Day Year		Month Day	Year	
COVERED	Month Day Year 10/27/2024	THROUGH	Month Day 12/31/2024		
	10/2//2024	millooon	12/31/2024	ł	
10 ELECTION					
IU ELECTION	ELECTION DATE Month Day Year		ECTION TYPE Runoff	Other	
	Wohin Day Tea		Runon		
		General	Special		
11 OFFICE	OFFICE HELD (if any)	<b>12</b> O	FFICE SOUGHT (	(if known)	
	None District HD 13				
		GO TO PAGE 2			
Forms provided by Te	exas Ethics Commission	www.ethics.state.tx.us		Versior	n V4.1.0.5dd2ace2

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

#### FORM C/OH COVER SHEET PG 2 2 of 11

13 C / OH NAME	Hunter, Albert		14 Filer ID (E 00088385	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditur These expenditures may have been made without the officeholders are required to report this information	he candidate's or officel	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	S	
16 CONTRIBUTION TOTALS	N PLEDGES, LOANS, CTRONICALLY)	\$ 0.00		
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	)	<b>\$</b> 125.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		<b>\$</b> 0.00
	4. TOTAL POLITIC		<b>\$</b> 717.42	
CONTRIBUTION BALANCE	REPORTING PE			<b>\$</b> 4,002.19
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS ( TING PERIOD	OF THE LAST DAY	<b>\$</b> 0.00
17 AFFIDAVIT				
		I swear, or affirm, under penalty true and correct and includes all under Title 15, Election Code.		
		Α	Albert Hunter	
		Signature of	Candidate or Officehold	ler
AFFIX NOT	TARY STAMP / SEAL ABO	DVE		
Sworn to and subsc	ribed before me, by the sa	aid	, this the	day
		ertify which, witness my hand and seal of office.		
Signature of offic	er administering	Printed name of officer administering	Title of officer	administering oath
Forms provided by Te	as Ethics Commission	www.ethics.state.tx.us	V	/ersion V4.1.0.5dd2ace2

SUBTOTALS - C/OH	FORM C/OH OVER SHEET PG 3 3 of 11	
18 FILER NAME Hunter, Albert	19 Filer ID 00088385	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT	
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$</b> 125.00
2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 0.00
3. X SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0.00
4. X SCHEDULE E: LOANS		\$ 0.00
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	<b>\$</b> 717.42
6. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0.00
7. X SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$ 0.00
8. X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0.00
9. X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$ 0.00
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

	MONET	Ā	RY POLITICAL CONTRIBUTIONS		SCHEDULE	A1	
	The Instru	cti	on Guide explains how to complete this form.		1	Total pages Schedule A1: Sch: 1/1 Rpt: 4/11	
2	FILER NAME Hunter, Albe				3	Filer ID (Ethics Commission F 00088385	-ilers)
4	Date       5       Full name of contributor       out-of-state PAC (ID#:)         11/07/2024       Comer, Jane         6       Contributor address; City; State; Zip Code					Amount of Contribution (\$)	\$25.00
8	Principal occu retired	Ipat	Waco, TX 76710 ion / Job title (See Instructions) 9 Employer (See In retired	nstructions	5)		
	Date 10/28/2024		Full name of contributor       out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$100.00
_	Principal occurretired	Ipat	Woodway, TX 76712 ion / Job title (See Instructions) Employer (See In retired	nstructions	5)		

PLEDGED CONTRIBUTIONS	SCHEDULE B
The Instruction Guide explains how to complete this form.	1 Total pages Schedule B: Sch: 1/1 Rpt: 5/11
2 FILER NAME Hunter, Albert	3 Filer ID     (Ethics Commission Filers)       00088385
<sup>4</sup> TOTAL OF UNITEMIZED PLEDGES	\$ 0.00
5 Date       6 Full name of pledgor	8 Amount of pledge (\$) [9 In-kind description (If applicable) Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (See Instructions)         11 Employer (See Instructions)	ctions)

LOANS		SCHED	ULE E
The Instruction Guide explains how to complete this form.	ages Schedule E: /1 Rpt: 6/11		
2 FILER NAME Hunter, Albert	(Ethics Commissio 385	n Filers)	
<sup>4</sup> TOTAL OF UNITEMIZED LOANS		\$	0.00
5 Date of loan 7 Name of lender out-of-state PAC (ID#:		) <b>9</b> Loan Amount (\$	3)
6 Is lender a 8 Lender address; City; State; Zip Code financial institution?		10 Interest Rate	
		<b>11</b> Maturity Date	
<b>12</b> Principal occupation / Job title (See Instructions) <b>13</b> Employer (See Instruction)	ns)		
14 Description of Collateral     15 Check if personal funds w       None	were deposite	d into political accour (See Instruction	
16 GUARANTOR 17 Name of guarantor INFORMATION		19 Amount Guaran	iteed (\$)
not applicable <b>18</b> Guarantor address; City; State; Zip Code			
20 Principal occupation     21 Employer (See Instruction)	ns)		

	POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1							
	Advertising Expense Accounting/Banking Consulting Expense	Expenditure categories for Box 8(a)           Event Expense         Loan Repayment/Reimbursement         Solicitation/Fundraising Expense           Fees         Office Overhead/Rental Expense         Transportation Equipment & Related Expense           Food/Beverage Expense         Polling Expense         Travel in District						
	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment							
1	Total pages Schedule F1: Sch: 1/5 Rpt: 7/11	2 FILER NAME     3 Filer ID     (Ethics Commission Filers       Hunter, Albert     00088385	)					
4	Date 12/12/2024	5 Payee name CEFCO						
6	Amount (\$) \$105.01	7 Payee address; City; State; Zip Code 9417 China Springs Waco, TX 76708						
8	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense</li> <li>(b) Description         Check if travel outside of Texas. Complete Schedule T.         Check if Austin, TX, officeholder living expense         fuel     </li> </ul>						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
	Date	Payee name						
	11/25/2024	Circle K						
	Amount (\$) \$93.01	Payee address; City; State; Zip Code 335 W HWY 6						
		Waco, TX 76710						
	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Fuel</li> </ul> </li> </ul>						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
F	Date	Payee name						
	12/06/2024	Circle K						
	Amount (\$) \$41.50	Payee address; City; State; Zip Code 335 W HWY 6						
		Waco, TX 76710						
	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense</li> <li>(b) Description         Check if travel outside of Texas. Complete Schedule T.         Check if Austin, TX, officeholder living expense         Fuel     </li> </ul>						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

### SCHEDULE F1

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Gift/Award Legal Serv	erage Expense Is/Memorials Expense	e F	Office Over Polling Exp Printing Exp Salaries/Wa	ense Iges/Contract Labor		Transportation E Travel in District Travel Out of Di	
1	Total pages Schedule F1:	2	FILER NAM	E					3	Filer ID	(Ethics Commission Filers)
	Sch: 2/5 Rpt: 8/11		Hunter, All	pert						00088385	
4	Date	5	Payee name	9					-		
	12/30/2024		Circle K								
6	Amount (\$)	7	Payee addre	ess; (	City;	State;	Zip Coc	е			
	\$33.00		335 W HW	'Y 6							
			Waco, TX	76710							
8	PURPOSE	(a)	Category (		ies listed at the top of	f this school	(مارر	b) Description			
	OF				ipment And R		uie)		l outsi	ide of Texas. Corr	nplete Schedule T.
	EXPENDITURE		Expense					Check if Austi	n, TX	, officeholder living	g expense
								fuel			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Of	ficeholde	rname	Off	ice soug	ht		Office h	eld
	Date		Payee name	9							
	11/06/2024		Golden Co	rral							
	Amount (\$)		Payee addre	ess; (	City;	State;	Zip Coc	e			
	\$14.16		563 North	Drive							
			Waco, TX	76710							
	PURPOSE	(a)	Category (	See Categor	ies listed at the top of	f this schedu	ule)	b) Description			
	OF EXPENDITURE		Food/Beve								nplete Schedule T.
									n, TX	, officeholder living	g expense
								Food			
	Complete ONLY if direct		Candidate/Of	fiacholdo		0#	ice soug	ht		Office h	ald
	expenditure to benefit C/Oł		Januluale/OI	licenoiuei	name	UII	ice soug	in in		Office In	eiu
	Data	<u> </u>									
	Date		Payee name IHOP Hills								
	11/12/2024										
	Amount (\$)		Payee addr		City;	State;	Zip Coc	e			
	\$18.16		316 I-35 H	WY							
					664E						
	DUDDOGE		HILLSBOF				1.				
	PURPOSE OF				ies listed at the top of	f this schedu	ule)	b) Description	Loutsi	ide of Texas Com	nplete Schedule T.
	EXPENDITURE		Food/Beve	rage Ex	pense					, officeholder living	
								Dan cakes		·	
	Complete ONLY if direct		Candidate/Of	ficeholde	r name	Off	ice soug	ht		Office h	eld
	expenditure to benefit C/OF	Н									

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

### SCHEDULE F1

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	r F Mmittee L	Event Expense Fees Food/Beverage Expense Sift/Awards/Memorials Expen Legal Services The Instruction Guide e	Offic Pollin se Print Sala	e Overhe ng Exper ting Expe ries/Wag	nse es/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:						3	Filer ID	(Ethics Commission Filers)
-	Sch: 3/5 Rpt: 9/11	Hunter, Albe	rt				ľ	00088385	(
4	Date	Payee name							
	10/28/2024	Murphy USA	<b>N</b>						
6	Amount (\$)	Payee addres	s; City;	State; Zip	Code				
	\$55.25	316 I-35 HW	Υ						
		HILLSBORC	), TX 76645						
8	PURPOSE	Category (See	e Categories listed at the top	of this schedule)	(b	) Description			
	OF EXPENDITURE	Transportatio	on Equipment And F					ide of Texas. Com	
	-	Expense					і, ТХ,	, officeholder living	expense
						Fuei			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Offic	eholder name	Office	sough	t		Office he	ald
	Date	Payee name							
	11/04/2024	Murphy USA	۱.						
	Amount (\$)	Payee addres	s; City;	State; Zip	Code	!			
	\$58.26	Cleburne							
		Cleburne, T>	K 76033						
	PURPOSE	Category (See	e Categories listed at the top	of this schedule)	(b	Description			
	OF EXPENDITURE		on Equipment And I	Related				ide of Texas. Com	
		Expense					ı, ТХ,	, officeholder living	expense
						fuel			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Offic	eholder name	Office	sough	t		Office he	eld
	Date	Payee name							
	12/09/2024	Murphy USA	۱.						
	Amount (\$)	Payee addres	s; City;	State; Zip	Code	!			
	\$44.48	316 I-35 HW	Υ						
		HILLSBORC	), TX 76645						
	PURPOSE	Category (See	e Categories listed at the top	of this schedule)	(b	) Description			
	OF EXPENDITURE		on Equipment And I	Related				ide of Texas. Com	
		Expense				<u> </u>	ı, ТХ,	, officeholder living	expense
						fuel			
	-								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Offic	eholder name	Office	sough	t		Office he	eld

_				
	POLITICAL EXE	PENDITURES FROM POLITICAL		SCHEDULE F1
⊢		EXPENDITURE CATEGORIES FOR I	BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayr Fees Office Overh Food/Beverage Expense Polling Expens - Gift/Awards/Memorials Expense Printing Expe	ment/Reimbursement ead/Rental Expense nse ense ges/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME	3	Filer ID (Ethics Commission Filers)
	Sch: 4/5 Rpt: 10/11	Hunter, Albert		00088385
4	Date	5 Payee name		
	11/01/2024	Oriental Trading Company		
6	Amount (\$) \$69.02	7 Payee address; City; State; Zip Code P O Box 2308	9	
L		Omaha, NE 68103-2308	-	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (k Event Expense		de of Texas. Complete Schedule T. officeholder living expense parade
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sough	nt	Office held
	Date	Payee name		
	10/29/2024	Sam's Club		
	Amount (\$) \$43.26	Payee address; City; State; Zip Code 2301 E Waco Dr.	9	
		Waco, TX 76705		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b Event Expense		le of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sough	nt	Office held
	Date	Payee name		
	10/29/2024	Sam's Club		
	Amount (\$) \$24.75	Payee address; City; State; Zip Code 2301 E Waco Dr.	9	
L		Waco, TX 76705		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (k Event Expense		de of Texas. Complete Schedule T. officeholder living expense Shack

Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

Office held

	POLITICAL EXI CONTRIBUTIO	PENDITURES FROM POLITICAL	SCHEDULE F1
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	EXPENDITURE CATEGORIES FOR BOX 8(a)           Event Expense         Loan Repayment/Reimbursement           Fees         Office Overhead/Rental Expense           Food/Beverage Expense         Polling Expense           -         Gift/Awards/Memorials Expense           Committee         Legal Services           The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1: Sch: 5/5 Rpt: 11/11	2 FILER NAME 3 Hunter, Albert	Filer ID     (Ethics Commission Filers)       00088385
4	Date 11/12/2024	5 Payee name Sam's Club	
6	Amount (\$) \$47.45	7 Payee address; City; State; Zip Code 2301 E Waco Dr. Waco, TX 76705	
8	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. X, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 10/28/2024	Payee name Walmart	
	Amount (\$) \$70.11	Payee address; City; State; Zip Code 401 Coke Ave Hillsboro, TX 76645	
	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. X, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held