

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers)		2 Total pages filed: <u>1</u>		OFFICE USE ONLY FILED FOR RECORD Date received: <u>A.D. at 3:05 o'clock P. M.</u> <u>FEB 25 2024</u> SANDRA K. DUCKWORTH Clerk, County Court of Newell County, Texas By <u>Michelle Mealy</u> Deputy Receipt # _____ Amount \$ _____ Date Processed _____ Date Imaged _____		
3 CANDIDATE / OFFICEHOLDER NAME		MS / MRS / MR <u>Mr.</u>	FIRST <u>Colton</u>			MI <u>M</u>
		NICKNAME <u>HAVARD</u>	LAST			SUFFIX
4 ORIGINAL REPORT TYPE		<input type="checkbox"/> January 15 <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election		<input type="checkbox"/> Runoff <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> 15th day after treasurer appointment (officeholder only) <input type="checkbox"/> Final report Other (specify) _____		
5 ORIGINAL PERIOD COVERED		Month Day Year <u>01 / 01 / 24</u> THROUGH <u>01 / 25 / 24</u>				

6 EXPLANATION OF CORRECTION
Overlooked expenditure to East Texas Banner (JAY SHARP) for digital Advertising. (01/12/24 \$ 450.00)

7 SIGNATURE I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.
 Check ONLY if applicable:
 Semiannual reports: I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.
 Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.
[Signature]
 Signature of Candidate/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 Colton Havard, and my date of birth is 01/08/1995.
 My address is 2630 FM 1004, Call, TX, 75933, USA.
 Executed in Newton County, State of TEXAS, on the 25 day of February, 2024.
[Signature]
 Signature of Candidate/Officeholder (Declarant)

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections