# 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 Filers)	2 Total pages f	iled: 14
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Shannon		мі D		USEONLY
NAIVIE	NICKNAME	LAST Martin		SUFFIX	Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	PO Box 306	C: APT SUITE #;	CITY; STATE; Victoria TX	ZIP CODE 77902		OEIVI IUL 1 5 2024
Change of Address	1051 0005					
5 CANDIDATE/ OFFICEHOLDER PHONE	(361 )	564-8154	EXTENS	ION		d or Date Postmarked
6 CAMPAIGN TREASURER	MS / MRS / MR Mrs	FIRST Shelly		MI M	Recei <b>pt</b> #	Amount \$
NAME					Date Processed	
	NICKNAME	Marbach		SUFFIX	Date Imaged	
7 CAMPAIGN	STREET ADDRESS	(NO PO BOX PLEASE); APT /	SUITE #; CITY	:	STATE:	ZIP CODE
TREASURER ADDRESS	1253 FM 446 Residence	Control of the contro	Vic	ctoria	TX	77905
(Residence or Business)	residence					
8 CAMPAIGN TREASURER PHONE	AREA CODE ( 361 )	PHONE NUMBER 935-3247	EXTENSI	ON		
9 REPORT TYPE	January 15	30th day before				fter campaign ppointment er Only)
	July 15	8th day before e	HECHOIT	eeded Modified orting Limit	Final Repo	rt (Attach C/OH - FR)
10 PERIOD	Month	Day Year		Month	Day Yea	r
COVERED	5	/ 19 / 24	THROUGH	6	/ 30 / 24	
11 ELECTION	ELECTION DA	ATE		ELECTION TYPE		
	Month Day	Year Primary	Runoff	Other		
	11 / 5	/ 24 ■ Genera	I Special	Description		
12 055105	OFFICE HELD (if any)		12 00000	POLICUT //	.1	
12 OFFICE	N/A			SOUGHT (if known		
14 NOTICE FROM POLITICAL	THE CANDIDATE / OFFIC	CE OF POLITICAL CONTRIBUTIONS CEHOLDER, THESE EXPENDITURE S AND OFFICEHOLDERS ARE REQU	ES MAY HAVE BEEN MADE I	WITHOUT THE CANE	DIDATE'S OR OFFICEHOL	DER'S KNOWLEDGE OR
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME				THE STATE OF THE S
Additional Pages	GENERAL	COMMITTEE ADDRESS	aller in the comment of the control			
	SPECIFIC	COMMITTEE CAMPAIGN TR	EASURER NAME			
		COMMITTEE CAMPAIGN TE	REASURER ADDRESS			
		GO TO	PAGE 2			

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM C/OH COVER SHEET PG 2

15 C/OH NAME Shannon D. Martin		11	6 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)		\$	0.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$	3,750.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.		\$	95.70
	4.	TOTAL POLITICAL EXPENDITURES		\$	10,546.25
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST OF REPORTING PERIOD	DAY	\$	245.58
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T LAST DAY OF THE REPORTING PERIOD	HE	\$	17,200.00

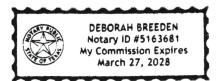
18 SIGNATURE

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.

Signature of Candidate or Officeholder

# Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before	pre me by Deborah L	breeden	this	the 15-	th day of	JU14.
20 24, to certify which is the state of the	ch, witness my hand and seal of office of the seal of the se	1 0	eden g oath	Not	Title of office	ublic administering oath
	personal dependent services	OR		515 May 200		No Personal Confession
(2) Unsworn Declaration						
My name is		, an	d my date of bi	rth is		
iviy address is	(street)		(city)	(state)	(zip code)	(country)
Executed in	County, State of	, on the	day of	month)	, 20	
			Signature of C	Candidate/Off	ficeholder (Decl	arant)

# SUBTOTALS - C/OH

# FORM C/OH COVER SHEET PG 3

	FILER NAME nannon D. Martin	20 Filer ID (Ethics Co	mmissi	on Filers)	
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT	
1.	■ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	3,750.00	
2.	2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS				
3.	3. SCHEDULE B: PLEDGED CONTRIBUTIONS				
4.	■ SCHEDULE E: LOANS	\$	17,200.00		
5.	■ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	\$	10,546.25		
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$			
7.	7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS				
8.	8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD				
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUN	\$			
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A	\$			
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$		
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT TO FILER	IONS RETURNED	\$		

# 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: 4
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Shannon	D. Martin			
4 Date	5 Full name of contributor Cliff & Cathy Thomas	out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
05/20/2024	6 Contributor address;	City;	State; Zip Code	500.00
	PO Box 2748	Victoria	TX 77902	000100
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Owner			C.L. Thomas Inc.	
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
0.5/0.0/0.004	David Morris			400.00
05/20/2024	Contributor address;	City;	State; Zip Code	400.00
	180 Pozzi Road	Victoria '	TX 77905	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
05/00/0004	Ashlie Thomas			050 00
05/20/2024	Contributor address;	City;	State; Zip Code	250.00
	202 W. Power	Victoria TX 77901		200.00
Principal occup Office Manag	pation / Job title (See Instructions)		Employer (See Instruction C.L. Thomas Inc.	tions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
	June Stone			
05/20/2024	Contributor address;	City;	State; Zip Code	250.00
	107 Ridge View	Victoria	TX 77904	200.00
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	ctions)
Retired				

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# SCHEDULE A1

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

The	Instruction Guide explains how to complete th	is form.	1 Total pages Schedule A1: 4
2 FILER NAME Shannon	D. Martin		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PA Linda Elmore	AC (ID#:)	7 Amount of contribution (\$)
05/20/2024	6 Contributor address; City;	State; Zip Code	100.00
	405 Roseland Ave. Victo	ria TX 77901	
8 Principal occu Owner	pation / Job title (See Instructions)	9 Employer (See Instruct Lentz Hardware	ions)
Date	Full name of contributor out-of-state PA	AC (ID#:)	Amount of contribution (\$)
05/21/2024	Contributor address; City; 4179 Coletoville Road Victo	State; Zip Code	500.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor out-of-state PA	AC (ID#:)	Amount of contribution (\$)
06/03/2024	Dennis O'Connor Hewitt		1 000 00
00/03/2024		State; Zip Code	1,000.00
	PO Box 2211 Victori	a TX 77902	
Principal occup Owner	eation / Job title (See Instructions)	TC Oil & Gas	ions)
Date	Full name of contributor out-of-state P/	AC (ID#:)	Amount of contribution (\$)
06/03/2024	Larry & Kathy Tomanek  Contributor address; City;	State; Zip Code	150.00
	202 E Hiller Street Vie	ctoria TX 77901	
Principal occup Owner	eation / Job title (See Instructions)	Employer (See Instruction	

## ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

## SCHEDULE A1

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

Instruction Guide explains how t	o complete thi	s form.		1 Total pages Schedule A1:
Martin				3 Filer ID (Ethics Commission Filers)
5 Full name of contributor John McNeill				7 Amount of contribution (\$)
6 Contributor address;	City;			\$100.00
P O Box 129	Nursery	TX	77976	
upation / Job title (See Instructions)				
Full name of contributor  Darrell & Sandra Hester	out-of-state PA	C (ID#:	)	Amount of contribution (\$)
Contributor address;				\$100.00
341 Hester Road	Victoria	TX	77905	
pation / Job title (See Instructions)				Stions)
		C (ID#:	)	Amount of contribution (\$)
Contributor address; City;				\$100.00
705 Tranquillo Drive	Victoria	TX	77905	
pation / Job title (See Instructions)		1		
Full name of contributor Estate of Warren Alkek	out-of-state PA	.C (ID#:	)	Amount of contribution (\$)
Contributor address;	City;	State;	Zip Code	\$250.00
118 N Main Street	Victoria	TX	77901	
pation / Job title (See Instructions)		Empl	oyer (See Instru	ctions)
	Martin  5 Full name of contributor John McNeill  6 Contributor address; P O Box 129  Ipation / Job title (See Instructions)  Full name of contributor Darrell & Sandra Hester Contributor address; 341 Hester Road  pation / Job title (See Instructions)  Full name of contributor Joe & Debbie Humphreys Contributor address; 705 Tranquillo Drive  pation / Job title (See Instructions)  Full name of contributor See Instructions  Full name of contributor Pation / Job title (See Instructions)  Full name of contributor Estate of Warren Alkek Contributor address; 118 N Main Street	Martin  5 Full name of contributor John McNeill  6 Contributor address; City; P O Box 129 Nursery  Ipation / Job title (See Instructions)  Full name of contributor Darrell & Sandra Hester  Contributor address; City; 341 Hester Road Victoria  Pation / Job title (See Instructions)  Full name of contributor Joe & Debbie Humphreys  Contributor address; City; 705 Tranquillo Drive Victoria  Pation / Job title (See Instructions)  Full name of contributor Dation / Job title (See Instructions)  Full name of Contributor Contributor address; City; Tos Tranquillo Drive Victoria  Full name of Contributor Contributor address; City:  Tall Name of Contributor Contributor address; City:  118 N Main Street Victoria	5 Full name of contributor John McNeill 6 Contributor address; City; State; P O Box 129 Nursery TX  pation / Job title (See Instructions)  Full name of contributor Darrell & Sandra Hester  Contributor address; City; State; 341 Hester Road Victoria TX  pation / Job title (See Instructions)  Full name of contributor Joe & Debbie Humphreys  Contributor address; City; State; T05 Tranquillo Drive Victoria TX  pation / Job title (See Instructions)  Full name of contributor Joe & Debbie Humphreys  Contributor address; City; State; T05 Tranquillo Drive Victoria TX  Pation / Job title (See Instructions)  Full name of contributor Pation / Job title (See Instructions)  Full name of Contributor Contributor address; City; State; TX  Pation / Job title (See Instructions)  Full name of Contributor Contributor address; City: State; TX  State:  TX  TX  TX  TX  TX  TX  TX  TX  TX  T	Martin  5 Full name of contributor     John McNeill  6 Contributor address;

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# 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	s form.	1 Total pages Schedule A1: 4
2 FILER NAME Shannon				3 Filer ID (Ethics Commission Filers)
<b>4</b> Date	5 Full name of contributor out-of-state PAC (ID#:)  Penni Gietz			7 Amount of contribution (\$)
06/10/2024	6 Contributor address;	City;	State; Zip Code	50.00
8 Principal occu Retired	upation / Job title (See Instructions)		9 Employer (See Instruc	itions)
Date	Full name of contributor	out-of-state PA	C (ID#:)	Amount of contribution (\$)
	Contributor address;		State; Zip Code	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	tions)
Date	Full name of contributor	out-of-state PA	C (ID#:)	Amount of contribution (\$)
	Contributor address;		State; Zip Code	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PA	C (ID#:)	Amount of contribution (\$)
	Contributor address;	City;	State; Zip Code	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruc	tions)
			1	

### LOANS SCHEDULE E

If the requested	information is not applicable, DO NO	I include this page in the rep	oort.
The	Instruction Guide explains how to compl	ete this form.	1 Total pages Schedule E: 3
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Shannon D. Mart	in		
4 TOTAL OF UN	ITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender out-of-state F	PAC (ID#: )	9 Loan Amount (\$)
10/03/2023	Shannon D. Martin		2,000.00
6 Is lender	9		10 Interest rate
a financial	8 Lender address; City;	State; Zip Code	0.00
Institution? Y ✓ N	89 Weber Lane Victoria	TX 77905	11 Maturity date
			06/01/2025
	on / Job title (See Instructions)	13 Employer (See Instructions)	
Firefighter		City of Victoria	
14 Description of Colla	ateral	Check if personal fund account (See Instruction	ds were deposited into political ions)
16 GUARANTOR INFORMATION	17 Name of guarantor		19 Amount Guaranteed (\$)
	18 Guarantor address; City;	State; Zip Code	
not applicable			
20 Principal Occupat	ion (See Instructions)	21 Employer (See Instructions)	
Date of loan	Name of lender	PAC (ID#:)	Loan Amount (\$)
02/12/2024	Shannon D. Martin		2,000.00
Is lender a financial	Lender address; City;	State; Zip Code TX 77905	Interest rate 0.00
Institution? Y ✓ N	89 Weber Lane Victoria	TX 77905	Maturity date 06/01/2025
Principal occupation	on / Job title (See Instructions)	Employer (See Instructions)	
Retired - City of	Victoria Fire Department		
Description of Colla	ateral	Chock if pareanal fund	ds were deposited into political
none		account (See Instruct	
GUARANTOR INFORMATION	Name of guarantor		Amount Guaranteed (\$)
	Guarantor address; City;	State; Zip Code	
not applicable			
Principal Occupati	on (See Instructions)	Employer (See Instructions)	
	ATTACH ADDITIONAL COD	IEC OF THIS COUEDING ACTUS	- DED
If le	ender is out-of-state PAC, please see Ins	IES OF THIS SCHEDULE AS NEE struction guide for additional re	

### SCHEDULE E LOANS

2 FILER NAME Shannon D. Martin  4 TOTAL OF UNITEMIZ  5 Date of loan 04/05/2024 Shann  6 Is lender a financial Institution? Y N  12 Principal occupation / Job Retired - City of Victoria  14 Description of Collateral none  16 GUARANTOR INFORMATION  18 Guaranto (See  Date of loan 04/15/2024 Shann  Is lender a financial Is lender a financial	non D. Martin nder address; ber Lane title (See Instructions) Fire Departmen me of guarantor arantor address;	□ out-of-state F  City:  Victoria  )	State: Zip Cod TX 77905  13 Employer (See Instruction Check if personal account (See Instruction)	3,000.00  10 Interest rate 0.00  11 Maturity date 06/01/2025  ons)  all funds were deposited into political istructions)  19 Amount Guaranteed (\$)
Shannon D. Martin  4 TOTAL OF UNITEMIZ  5 Date of loan	non D. Martin nder address; ber Lane title (See Instructions) Fire Departmen me of guarantor arantor address;	City: Victoria	State: Zip Cod TX 77905  13 Employer (See Instruction Check if personal account (See Instruction)	\$ 0.00  9 Loan Amount (\$) 3,000.00  10 Interest rate 0.00  11 Maturity date 06/01/2025  ons)  all funds were deposited into political instructions)  19 Amount Guaranteed (\$)
4 TOTAL OF UNITEMIZ  5 Date of loan  04/05/2024  6 Is lender a financial Institution? Y N  12 Principal occupation / Job Retired - City of Victoria  14 Description of Collateral none  16 GUARANTOR INFORMATION  18 Guan  17 Nar  18 Guan  17 Nar  18 Guan  19 Principal Occupation (See  Date of loan  04/15/2024  Is lender a financial Institution? Y N  Principal occupation / Job	non D. Martin nder address; ber Lane title (See Instructions) Fire Departmen me of guarantor arantor address;	City: Victoria	State: Zip Cod TX 77905  13 Employer (See Instruction Check if personal account (See Instruction)	9 Loan Amount (\$) 3,000.00  10 Interest rate 0.00  11 Maturity date 06/01/2025  ons)  all funds were deposited into political instructions)  19 Amount Guaranteed (\$)
5 Date of loan 04/05/2024 Shani 6 Is lender a financial Institution? Y N  12 Principal occupation / Job Retired - City of Victoria 14 Description of Collateral none 16 GUARANTOR INFORMATION 18 Guarant Nation Nation (See  Date of loan Nation	non D. Martin nder address; ber Lane title (See Instructions) Fire Departmen me of guarantor arantor address;	City: Victoria	State: Zip Cod TX 77905  13 Employer (See Instruction Check if personal account (See Instruction)	9 Loan Amount (\$) 3,000.00  10 Interest rate 0.00  11 Maturity date 06/01/2025  ons)  all funds were deposited into political instructions)  19 Amount Guaranteed (\$)
O4/05/2024 Shann  Is lender a financial Institution?  Y N  Principal occupation / Job  Retired - City of Victoria  Institution of Collateral Institution  Institution of Collateral Institution  Institution of Collateral Institution  Institution of Collateral Institution  Na  O4/15/2024 Sha  Is lender a financial Institution?  Y N  Principal occupation / Job	non D. Martin  Inder address;  Reber Lane  Ititle (See Instructions)  Fire Departmen  The of guarantor  arantor address;	City: Victoria	State: Zip Cod TX 77905  13 Employer (See Instruction Check if personal account (See Instruction)	3,000.00  10 Interest rate 0.00  11 Maturity date 06/01/2025  all funds were deposited into political instructions)  19 Amount Guaranteed (\$)
6 Is lender a financial Institution? Y N  12 Principal occupation / Job Retired - City of Victoria  14 Description of Collateral none  16 GUARANTOR INFORMATION  18 Guaranton and applicable  20 Principal Occupation (See Date of loan Na O4/15/2024 Sha  Is lender a financial Institution? Y Na Principal occupation / Job	der address; ber Lane title (See Instructions) Fire Departmen me of guarantor arantor address;	City: Victoria	State; Zip Cod TX 77905  13 Employer (See Instruction Check if personal account (See Instruction)	10 Interest rate 0.00  11 Maturity date 06/01/2025  ons)  al funds were deposited into political instructions)  19 Amount Guaranteed (\$)
a financial Institution? Y N  12 Principal occupation / Job Retired - City of Victoria 14 Description of Collateral none 16 GUARANTOR INFORMATION 18 Guaranto 17 Nar INFORMATION 18 Guaranto 18 Guaranto 19 Nar INFORMATION 18 Guaranto 19 Nar INFORMATION 19 Principal Occupation (See Information) 19 Principal occupation / Job	title (See Instructions) Fire Departmen me of guarantor arantor address;	City: Victoria	State; Zip Cod TX 77905  13 Employer (See Instruction Check if personal account (See Instruction)	0.00  11 Maturity date 06/01/2025  ons)  al funds were deposited into political instructions)  19 Amount Guaranteed (\$)
Y N  12 Principal occupation / Job  Retired - City of Victoria  14 Description of Collateral none  16 GUARANTOR INFORMATION  18 Guar  17 Nar  18 Guar  17 Nar  18 Guar  18 Guar  19 Principal Occupation (See  Date of loan  104/15/2024  Sha  Is lender a financial Institution? Y N  Principal occupation / Job	title (See Instructions) Fire Departmen me of guarantor arantor address;	nt	13 Employer (See Instruction  15  Check if persons account (See In	06/01/2025  al funds were deposited into political astructions)  19 Amount Guaranteed (\$)
12 Principal occupation / Job Retired - City of Victoria 14 Description of Collateral none 16 GUARANTOR INFORMATION 18 Guar not applicable 20 Principal Occupation (See  Date of loan 04/15/2024  Is lender a financial Institution? Y N  Principal occupation / Job	Fire Departmen	nt	Check if persona account (See In	al funds were deposited into political astructions)  19 Amount Guaranteed (\$)
Retired - City of Victoria  14 Description of Collateral  none  16 GUARANTOR INFORMATION  18 Guaranton  17 Nar  18 Guaranton  18 Guaranton  19 Principal Occupation (See  Date of loan  04/15/2024  Is lender a financial Institution? Y N  Principal occupation / Job	Fire Departmen	nt	Check if persona account (See In	al funds were deposited into political structions)  19 Amount Guaranteed (\$)
none  16 GUARANTOR INFORMATION  18 Guaranton Inot applicable  20 Principal Occupation (See Date of loan Na O4/15/2024 Sha  Is lender a financial Institution?  Y N  Principal occupation / Job	me of guarantor arantor address;		Check if personal account (See In	19 Amount Guaranteed (\$)
none  16 GUARANTOR INFORMATION  18 Guaranton  19 Interpretation (See Interpretation)  10 Principal Occupation (See Interpretation)  10 Interpretation (See Interpretation)  11 National Interpretation (See Interpretation)  12 Interpretation (See Interpretation)  13 Interpretation (See Interpretation)  14 Interpretation (See Interpretation)  15 Interpretation (See Interpretation)  16 Guaranton  17 National Interpretation (See Interpretation)  17 National Interpretation (See Interpretation)  18 Guaranton  19 Interpretation (See Interpretation)  19 Interpretation  19 Interpretation  10 Interpretation  10 Interpretation  10 Interpretation  11 National Interpretation  12 Interpretation  13 Interpretation  14 Interpretation  15 Interpretation  16 Interpretation  17 National Interpretation  18 Interpretation  18 Interpretation  19 Interpretation  19 Interpretation  19 Interpretation  10 Interpretation  10 Interpretation  10 Interpretation  10 Interpretation  10 Interpretation  11 Interpretation  12 Interpretation  13 Interpretation  14 Interpretation  15 Interpretation  16 Interpretation  17 Interpretation  17 Interpretation  18 Interpretation	arantor address;		Check if personal account (See In	19 Amount Guaranteed (\$)
INFORMATION  18 Gus  not applicable  20 Principal Occupation (See  Date of loan  04/15/2024 Sha  Is lender a financial Institution?  Y ✓ N  Principal occupation / Job	arantor address;			
not applicable  20 Principal Occupation (See  Date of loan  04/15/2024  Is lender a financial Institution?  Y N  Principal occupation / Job	arantor address;			de
Date of loan  O4/15/2024  Is lender a financial Institution?  Y  N  Principal Occupation (See	Instructions)			
Date of loan Na  04/15/2024 Sha  Is lender a financial Institution?  Y N  Principal occupation / Job	Instructions)			
04/15/2024 Sha  Is lender a financial Institution?  Y ✓ N  Principal occupation / Job			21 Employer (See Instruction	ons)
04/15/2024 Sha  Is lender a financial Institution?  Y ✓ N  Principal occupation / Job	ame of lender	□ out-of-state	PAC (ID#:	) Loan Amount (\$)
a financial Institution? 89 Y N  Principal occupation / Job	nnon D. Martin	_ out-on-state	, , , , , , , , , , , , , , , , , , , ,	3,000.00
Y N  Principal occupation / Job	nder address;	City;	State; Zip Cod TX 7790	0.00
	Weber Lane	Victoria	17 7790	Maturity date 06/01/2025
,			Employer (See Instruction	ons)
Description of Collateral		and an extension of the state o	Check if person account (See In	al funds were deposited into political
none				Amount Guaranteed (\$)
GUARANTOR Nai INFORMATION	me of guarantor			Amount Guaranteed (e)
Gu	arantor address;	City;	State; Zip Coo	de
not applicable			T = 1	
Principal Occupation (See	Instructions)		Employer (See Instruction	ons)
If lender is				

### LOANS SCHEDULE E

if the requested	information is not applicable, DO NO	I include this page in the re	port.
The	Instruction Guide explains how to comp	lete this form.	1 Total pages Schedule E: 3
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Shannon D. Mari	tin		
4 TOTAL OF UN	IITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender	PAC (ID#:)	9 Loan Amount (\$)
05/17/2024	Shannon D. Martin	The second secon	4,000.00
			10 Interest rate
a financial	8 Lender address; City;	State; Zip Code	0.00
Institution?	89 Weber Lane Victoria	TX 77905	11 Maturity date
YVN			06/01/2025
12 Principal occupation	on / Job title (See Instructions)	13 Employer (See Instructions)	
Retired - City of \	/ictoria Fire Department		
14 Description of Colla	ateral	Check if personal fun account (See Instruct	ds were deposited into political tions)
16 GUARANTOR INFORMATION	17 Name of guarantor		19 Amount Guaranteed (\$)
not applicable	18 Guarantor address; City;	State; Zip Code	
		24 =	
20 Principal Occupat	ion (See Instructions)	21 Employer (See Instructions)	
Date of loan		PAC (ID#:)	Loan Amount (\$)
06/26/2024	Shannon D. Martin		3,200.00
ls lender	Lender address; City;	State; Zip Code	Interest rate
a financial Institution?	89 Weber Lane Victoria	TX 77905	0.00
YVN			Maturity date 06/01/2025
Deleviori	(15) 100 (00)	Frankrick (October 1997)	00/01/2023
	Victoria Fire Department	Employer (See Instructions)	
Description of Colla none	ateral	Check if personal fun account (See Instruct	ds were deposited into political tions)
GUARANTOR INFORMATION	Name of guarantor		Amount Guaranteed (\$)
	Guarantor address; City;	State; Zip Code	
not applicable			
Principal Occupati	on (See Instructions)	Employer (See Instructions)	
	ATTACH ADDITIONAL COP	PIES OF THIS SCHEDULE AS NEI	

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense **Event Expense** Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Expense Transportation Equipment & Related Expense Consulting Expense Contributions/Donations Made By Food/Beverage Expense Polling Expense Travel In District Gift/Awards/Memorials Expense Printing Expense Travel Out Of District Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Shannon D. Martin 5 Payee name 4 Date Optimum Media 05/21/2024 Zip Code City: State: 6 Amount (\$) 7 Payee address; Long Island NY 11101 1 Court Square 1,425.04 (b) Description (a) Category (See Categories listed at the top of this schedule) Cable TV Campaign Advertising Advertising Expense PURPOSE OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office held Candidate / Officeholder name Office sought 9 Complete ONLY if direct expenditure to benefit C/OH Payee name Date Victoria Radio Works 05/21/2024 Zip Code State: City; Amount (\$) Payee address; 77901 Victoria TX 3613 N Main 438.60 Description Category (See Categories listed at the top of this schedule) Advertising Expense Radio Campaign Advertising **PURPOSE** OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office held Candidate / Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Pavee name 05/23/2024 **KAVU TV** Amount (\$) Pavee address: City; State; Zip Code Victoria TX 77901 3808 N Navarro 811.75 Description Category (See Categories listed at the top of this schedule) TV Campaign Advertising **PURPOSE** Advertising Expense OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office held Candidate / Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Solicitation/Fundraising Expense Accounting/Banking Transportation Equipment & Related Expense Consulting Expense Contributions/Donations Made By Food/Beverage Expense Gift/Awards/Memorials Expense Travel In District Polling Expense Travel Out Of District Printing Expense Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor Other (enter a category not listed above) Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 1 Total pages Schedule F1: 2 FILER NAME Shannon D. Martin 5 Payee name 4 Date 05/23/2024 Victoria Radio Works 6 Amount (\$) 7 Pavee address: Zip Code City; State: 3613 N Main St Victoria TX 77901 459.00 (b) Description (a) Category (See Categories listed at the top of this schedule) Radio Campaign Advertising Advertising Expense PURPOSE OF **EXPENDITURE** Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH Payee name Date 06/04/2024 Chris Nicholson State: Zip Code Amount (\$) Pavee address: City; TX 77902 PO Box 2522 Victoria 3,800.00 Description Category (See Categories listed at the top of this schedule) Consulting Expense Advising PURPOSE OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office sought Office held Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Payee name 06/10/2024 USPS Amount (\$) Payee address; Zip Code City; State: 77901 Victoria TX 312 S Main 13.60 Description Category (See Categories listed at the top of this schedule) Advertising Expense **PURPOSE** Postage OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office sought Office held Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

## **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out of District
Others (page 2019) and listed above.

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	Other (enter a catego	y not listed above)	
1 Total pages Schedule F1:	2 FILER NAME Shannon D. Martin		3 Filer ID (Ethics Commission Filers)		
4 Date 06/26/2024	5 Payee name UPS Store				
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code	
\$3,502.56	8806 N Navarro	Victoria	TX	77904	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	are provide an armonda provincia de la companya de		
PURPOSE OF EXPENDITURE	Advertising Expense	Printing Door Hangers & Mailers			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	tin, TX, officeholder living	expense	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held	
Date	Payee name				
Amount (\$)	Payee address;	City;	State;	Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description			
	Check if travel outside of Texas. Complete Schedule T. Chec		tin, TX, officeholder living	expense	
Complete ONLY if direct expenditure to benefit C/Oh				Office held	
Date	Payee name				
Amount (\$)	Payee address;	City;	State;	Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description			
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	tin, TX, officeholder living	expense	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NE	EDED		