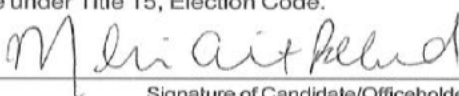
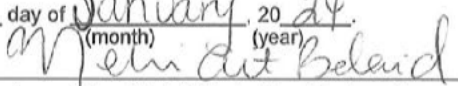


CANDIDATE / OFFICEHOLDER REPORT OF UNEXPENDED CONTRIBUTIONS

FORM C/OH-UC
COVER SHEET PG 1

The C/OH-UC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	
2 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST MI	OFFICE USE ONLY	
	NICKNAME LAST SUFFIX	Date Received	
3 CANDIDATE / OFFICEHOLDER ADDRESS ☐ change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		Date Hand-delivered or Date Postmarked
	Receipt # Amount \$		Date Processed
4 REPORT TYPE	☒ Annual ☐ Final Disposition		Date Imaged
5 PERIOD COVERED	Month Day Year Month Day Year 10 / 29 / 24 THROUGH 12 / 31 / 24		
6 TOTALS	1. TOTAL AMOUNT OF UNEXPENDED POLITICAL CONTRIBUTIONS AS OF DECEMBER 31 OF THE PREVIOUS YEAR.		\$ 8.86
	2. TOTAL AMOUNT OF INTEREST AND OTHER INCOME EARNED ON UNEXPENDED POLITICAL CONTRIBUTIONS DURING THE PREVIOUS YEAR.		\$
7 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/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 <u>Melissa Ait Belaid</u> and my date of birth is <u>9-16-1986</u> My address is <u>[REDACTED]</u> <u>Princeton TX 75407 USA</u> <u>Collin</u> (street) <u>Texas</u> (city) <u>TX</u> (state) <u>75407</u> (zip code) <u>USA</u> (country) Executed in _____ County, State of _____, on the <u>16</u> day of <u>January</u>, 20<u>24</u>.  _____ Signature of Candidate/Officeholder (Declarant)			