

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 filed:	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mrs.	FIRST Jamie	MI S	OFFICE USE ONLY		
	NICKNAME	LAST Clem	SUFFIX			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ✓ Change of Address	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE 1602 Morris Ave. Sweetwater, TX 79556			<p>Date Received FILED FOR RECORD Time _____ o'clock ____/m JAN 22 2026 SHARLA KEITH NOLAN COUNTY CLERK</p>		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (325)	PHONE NUMBER 235-6288	EXTENSION			
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs.	FIRST Sarah	MI K	<p>Date Hand-delivered or Date Postmarked Receipt # _____ Amount \$ _____</p>		
	NICKNAME	LAST Jones	SUFFIX			
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE; ZIP CODE 146 Inkman Springs Rd. Sweetwater, TX 79556					
8 CAMPAIGN TREASURER PHONE	AREA CODE (325)	PHONE NUMBER 236-4200	EXTENSION			
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)		
	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded Modified Reporting Limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month 7	Day / 31	Year / 25	Month THROUGH 12	Day / 31	Year / 25
11 ELECTION	ELECTION DATE Month Day Year 3 / 3 / 26			ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special _____		
12 OFFICE	OFFICE HELD (if any) District Clerk			13 OFFICE SOUGHT (if known) District Clerk		
14 NOTICE FROM POLITICAL COMMITTEE(S) Additional Pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.					
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME				
		COMMITTEE ADDRESS				
		COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRESS				

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME

Jamie S Clem

16 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)

\$

2. **TOTAL POLITICAL CONTRIBUTIONS**
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

EXPENDITURE
TOTALS

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.

\$

4. **TOTAL POLITICAL EXPENDITURES**

\$ 750.00

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY
OF REPORTING PERIOD

\$

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

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 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 Jamie Clem, and my date of birth is 02/02/1969.
My address is 1602 Morris Ave., Sweetwater, TX, 79556, USA.

(street)

(city)

(state)

(zip code)

(country)

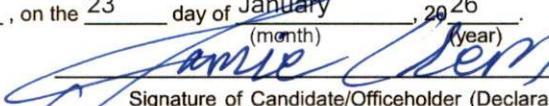
Executed in Nolan

County, State of Texas

, on the 23 day of January, 2026.

(month)

(year)


Signature of Candidate/Officeholder (Declarant)