

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		<b>1</b> Filer ID (Ethics Commission Filers)	<b>2</b> Total pages filed:
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR      FIRST <u>Sheryl</u> MI <u>L</u>		<div style="border: 2px solid blue; padding: 10px; font-size: 24px; font-weight: bold; color: blue;">RECEIVED</div> <div style="color: red; font-weight: bold; font-size: 18px;">APR 05 2024</div> <div style="color: blue; font-size: 24px; font-weight: bold;">KS.</div>
	NICKNAME      LAST <u>English</u> SUFFIX		
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS  Change of Address	ADDRESS / PO BOX:      APT / SUITE #:      CITY:      STATE:      ZIP CODE <u>redacted for web posting</u>		
	AREA CODE      PHONE NUMBER      EXTENSION <u>redacted for web posting</u>		
<b>5</b> CANDIDATE / OFFICEHOLDER PHONE	MS / MRS / MR      FIRST <u>Stephanie</u> MI		Date Received
	NICKNAME      LAST <u>Neuharth</u> SUFFIX		Date Hand-delivered or Date Postmarked
<b>6</b> CAMPAIGN TREASURER NAME	STREET ADDRESS (NO PO BOX PLEASE);      APT / SUITE #:      CITY:      STATE:      ZIP CODE (Residence or Business)		Receipt #      Amount \$
	AREA CODE      PHONE NUMBER      EXTENSION <u>(702) 498 0138</u>		Date Processed
<b>7</b> CAMPAIGN TREASURER ADDRESS	REPORT TYPE <input type="checkbox"/> January 15 <input checked="" 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)		Date Imaged
	PERIOD COVERED Month      Day      Year      THROUGH      Month      Day      Year <u>1 / 17 / 2024</u> <u>4 / 5 / 2024</u>		
<b>8</b> CAMPAIGN TREASURER PHONE	ELECTION DATE Month      Day      Year      ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special		
	OFFICE HELD (if any) <u>School board trustee, pl 2</u>		
<b>9</b> REPORT TYPE	OFFICE SOUGHT (if known) <u>School board trustee, pl 2</u>		
	NOTICE FROM POLITICAL COMMITTEE(S) 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  Additional Pages	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

*Sheryl English*

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)

\$ *1250.00*

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

\$ *1800.00*

EXPENDITURE  
TOTALS

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.

\$

4. TOTAL POLITICAL EXPENDITURES

\$ *1750.00*

CONTRIBUTION  
BALANCE

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

\$ *0*

OUTSTANDING  
LOAN TOTALS

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

\$ *1300.00*

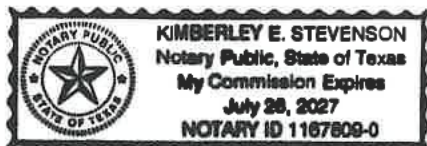
18 SIGNATURE

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.

*redacted for web posting*

Signature of Candidate or Officeholder

Please complete either option below:



(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by *Sheryl English* this the *5* day of *April*,  
20 *24*, to certify which, witness my hand and seal of office.

*redacted for web posting*

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_,  
(street) (city) (state) (zip code) (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,  
(month) (year)

Signature of Candidate/Officeholder (Declarant)

# MONETARY POLITICAL CONTRIBUTIONS

## 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: _____
2 FILER NAME <b>Sheryl English</b>		3 Filer ID (Ethics Commission Filers) _____
4 Date <b>3/1/24</b>	5 Full name of contributor out-of-state PAC (ID#: _____) <b>Jim Alexander</b> 6 Contributor address; City; State; Zip Code _____	7 Amount of contribution (\$) <b>200.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>2/28/24</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Dr Larry Lewis</b> Contributor address; City; State; Zip Code redacted for web posting _____; <b>Denton 76207</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>3/8/2024</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Scott Campbell</b> Contributor address; City; State; Zip Code redacted for web posting _____ <b>Denton 76201</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>3/26</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Marquis Nuby</b> Contributor address; City; State; Zip Code redacted for web posting _____ <b>Denton, TX</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## 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:
2 FILER NAME <b>Cheryl English</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>3/28/24</b>	<div style="display: flex; justify-content: space-between;"> <div>5 Full name of contributor <b>Lucas Holl</b></div> <div>out-of-state PAC (ID#:</div> </div> <hr/> <div style="display: flex; justify-content: space-between;"> <div>6 Contributor address; redacted for web posting</div> <div>City; <b>Denton</b></div> <div>State; <b>TX</b></div> <div>Zip Code <b>76201</b></div> </div>	7 Amount of contribution (\$) <b>100.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date <b>3/28</b>	<div style="display: flex; justify-content: space-between;"> <div>Full name of contributor <b>Kevin Roden</b></div> <div>out-of-state PAC (ID#:</div> </div> <hr/> <div style="display: flex; justify-content: space-between;"> <div>Contributor address; redacted for web posting</div> <div>City; <b>Denton</b></div> <div>State; <b>TX</b></div> <div>Zip Code <b>76201</b></div> </div>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <b>3/29</b>	<div style="display: flex; justify-content: space-between;"> <div>Full name of contributor <b>Jacqueline Jackson</b></div> <div>out-of-state PAC (ID#:</div> </div> <hr/> <div style="display: flex; justify-content: space-between;"> <div>Contributor address; redacted for web posting</div> <div>City; <b>Corinth TX</b></div> <div>State; <b>TX</b></div> <div>Zip Code <b>76200</b></div> </div>	Amount of contribution (\$) <b>150.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <b>3/21/2024</b>	<div style="display: flex; justify-content: space-between;"> <div>Full name of contributor <b>Anonymous donor</b></div> <div>out-of-state PAC (ID#:</div> </div> <hr/> <div style="display: flex; justify-content: space-between;"> <div>Contributor address; redacted for web posting</div> <div>City; <b>No info given</b></div> <div>State; <b>No info given</b></div> <div>Zip Code <b>No info given</b></div> </div>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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



# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME

Sheryl English

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3050.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$