

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 FIRST MI

NICKNAME LAST SUFFIX
Ms Shawna Gass

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

PO Box 111 Gail, Tx 79738

☐ Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE PHONE NUMBER EXTENSION

(806) 201-2536

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR FIRST MI

NICKNAME LAST SUFFIX
Same

7 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

Same

8 CAMPAIGN
TREASURER
PHONE

AREA CODE PHONE NUMBER EXTENSION

() Same

9 REPORT TYPE

☐ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (Officeholder Only)
☐ July 15 ☐ 8th day before election ☐ Exceeded Modified Reporting Limit ☒ Final Report (Attach C/OH - FR)

10 PERIOD
COVERED

Month Day Year Month Day Year

12/31/2025 THROUGH 06/30/2026

11 ELECTION

ELECTION DATE

Month Day Year

03/03/2026

ELECTION TYPE

☒ Primary ☐ Runoff ☐ Other Description
☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any)

Treasurer

13 OFFICE SOUGHT (if known)

14 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

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

OFFICE USE ONLY

Date Received

FILED FOR RECORD

July 13, 2026

AT 11:40 O'CLOCK A.M.

JANA UNDERWOOD

County Clerk, Tarrant County, Texas

Date Hand-delivered or Date Postmarked

Receipt #

Amount \$

Date Processed

Date Imaged

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