CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	n Guide explains how	to comple	ete this form.	1 Filer ID to .) The Nakon Filors	2 Total pag	es filed. 5	
3 CANDIDATE/ OFFICEHOLDER	MS / MRS / MR		omas		VI	OFF	ICE USE ONLY	
NAME	NICKNAME		LAST			Date Received		
	Tom		niel					
4 CANDIDATE/	ADDRESS / PO BOX:		FI / SUME #	4,121	. The second			
OFFICEHOLDER MAILING	2930 Red BI	2930 Red Bluff Circle				FEB	2 2 2022	
ADDRESS	San Angelo,	Tx 769	004					
Change of Address			WWW.					
5 CANDIDATE/	AREA CODE	PHONE	NUMBER		A 1.1	Date Hand-deli	vered or Date Postmarked	
OFFICEHOLDER PHONE	(325)	234-	-4286			Receipt#	Amount S	
6 CAMPAIGN	MS / MRS / MR		rias.		. 1			
TREASURER NAME	MS		ebecca		D	Date Processe	d	
	NICKNAME		145"		. 559	Date maged		
	Becca		ores					
7 CAMPAIGN TREASURER	STREET ADDRESS 1			*· #		STAT	E: ZIP CODE	
ADDRESS	Christoval, Texas							
(Residence or Business	Residence		***************************************		4114 04 2011 0 2010 0 2011			
8 CAMPAIGN TREASURER	AREA CODE	PHONE	NUMBER	F 1	÷ 1.			
PHONE	(325)	(325) 656-3825						
9 REPORT TYPE	January 15	James a sanda a	30th day before el	ection F	Runoff	treasu	day after campaign urer appointment eholder Only)	
	July 15		8th day before elec	JUUII	xceeded Modified Reporting Limit	Final	Report (Attach C/OH - FR)	
10 PERIOD	Month	Day	*P3'		Stoath	Day	Year	
COVERED	1	21	22	THPOUGH	2	19	22	
11 ELECTION	ELECTION DA	TE			ALECTICAL TYPE			
	Month Day	Year	■ Promary	et som	(Tither Trestription			
	3 / 1 /	/ 22	Genera:	Apec a				
12 OFFICE	OFFICE HELD (if any)			13 0000	E SOUGHT I HERON	7,		
				Justic	e of the P	eace Pct	t. 2	
14 NOTICE FROM POLITICAL	THE CANDIDATE / OFFIC	CEHOLDER, 7	THESE EXPENDITURES	MAY HAVE BEEN MAD	E WITHOUT THE CAN	DIDATE'S OR OFFI	L COMMITTEES TO SUPPORT CEHOLDER'S KNOWLEDGE OR TICE OF SUCH EXPENDITURES.	
COMMITTEE(S)	COMMITTEE TYPE							
	GENERAL	COMMITT	EE ADDRESS		AND ADDRESS OF THE PARTY OF THE			
Additional Pages	OLIVEINAL							
	SPECIFIC	COMMITT	EE CAMPAIGN TRE.	ASURER NAME				
		СОММІТТ	TEE CAMPAIGN TRE	EASURER ADDRESS				
			COTO	DACEO				
			60 10	PAGE 2				

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Daniel, Thomas		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER TH PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	HAN \$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOAN	\$ 650.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	s 0.00
CONTRIBUTION BALANCE	 TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE L OF REPORTING PERIOD 	\$ 12,301.96
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS LAST DAY OF THE REPORTING PERIOD	S OF THE \$
	wear, or affirm, under penalty of perjury, that the accompanying report is t juired to be reported by me under Title 15, Election Code.	true and correct and includes all information
reu	dired to be reported by the dirder Title 15, Election Code.	
	Signature of	Candidate or Officeholder
	Signature of	Candidate of Officerolider
	Please complete either option belo	ow:
s s	RLA R. MEDLEY IOTARY PUBLIC TATE OF TEXAS ID # 1144499-3 nm. Expires 05-07-2023	nd
Sworn to and subscribed	before me by Charla R. Medley this th	he 22 day of February,
2022 to certify	which, witness my hand and seal of office. Charla R. Medley	Admin Sig Max
Signature of officer administe		Title of officer administering oath
	OR	
(2) Unsworn Declaration	on	
My name is	, and my date of birth	h is
My address is	(atract)	(etato) (zin codo) (countra)
Executed in	(street) (city) County, State of , on the day of (mo	(state) (zip code) (country) , 20 onth) (year)
	Signature of Car	ndidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

	aniel, Thomas	20 Filer ID (Ethics Co	mmission Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	■ SCHEDULE A1 MONETARY POLITICAL CONTRIBUTIONS		s 650.00
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 CO	NTRIBUTIONS	\$
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 FU	NDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A	BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT TO FILER	IONS RETURNED	\$

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
² FILER NAME Daniel, Th	iomas			3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor Jim Berkshire	City. State Zip Code		7 Amount of contribution (\$)
01/24/2022				100.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Date	Full name of contributor Phil Fox	our-of-state PAC	(E)#)	Amount of contribution (\$)
01/24/2022	Contributor address:		State: Zip Code	100.00
Principal occup	10804 W. Widrose Av	re. Las ve	Employer (See Instruct	tions)
Date 04/0000	Full name of contributor Addie Goodwin	put-of-state PAC	(ID#)	Amount of contribution (\$)
01/24/2022	Contributor address; 613 Sherwood Way	_	State. Zip Code Jelo, Tx 76901	100.00
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)
Date	te Full name of contributor out		- +ID#)	Amount of contribution (\$)
01/25/2022	Contributor address;	City:	State; Zip Code	200.00
	4717 S. Jackson St. #	144 San A	ngelo, Tx 76903	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The	Instruction Guide explains how to	complete t	his form.	1 Total pages Schedule A1:
Daniel, Th	omas		VIII 1	3 Filer ID (Ethics Commission Filers)
4 Date 01/27/2022	5 Full name of contributor Dr. Jack Lewright	out-of-state	PAS 45#	7 Amount of contribution (\$)
	6 Contributor address; 2520 Southland Sa	city; an Ang	gelo, Tx 76904	100.00
Principal occu	pation / Job title (See Instructions)	-	9 Employer (See Instruc	tions)
Date	Full name of contributor Gene Gully	out-of-state	P4C 4D#	Amount of contribution (\$)
02/02/2022	PO Box 360 Eola	City: 7	State: Zip Code	50.00
Principal occup	eation / Job title (See Instructions)	negative visit (ii ii	Employer (See Instruc	tions)
Date	Full name of contributor			Amount of contribution (\$)
02/11/2022	Lisa Foster Contributor address; 2922 Red Bluff Circle	*	State: Zip Code	100.00
Principal occup	pation / Job title (See Instructions)	14 (d. 4. 14 Manuskina 1848 mm)	Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state	PAC IID#	Amount of contribution (\$)
02/11/2022	Henry Dusek Contributor address; 2478 Fairview School R	City;	State: Zip Code	100.00
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	ctions)
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	ctions)