

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: 15
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <u> </u> FIRST <u>Tommy</u> MI <u>J</u> NICKNAME LAST <u>Usery</u> SUFFIX <u> </u>	OFFICE USE ONLY	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <u>4006 Blair Lane San Angelo, TX 76904</u>	JAN 18 2022	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <u>(325) 340-0075</u>	Date Received	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <u> </u> FIRST <u>Patricia</u> MI <u>A.</u> NICKNAME LAST <u>Usery</u> SUFFIX <u> </u>	Date Hand-delivered or Date Postmarked	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <u>4006 Blair Lane San Angelo TX 76904</u>	Receipt #	Amount \$
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <u>(325) 234-0686</u>	Date Processed	
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 Day Year Month Day Year <u>11 / 13 / 2021</u> THROUGH <u>1 / 15 / 2022</u>		
11 ELECTION	ELECTION DATE Month Day Year <u>3 / 1 / 2022</u>	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)	13 OFFICE SOUGHT (if known) <u>Tom Green County Judge</u>	
14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> 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.		
	<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	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 <u>Tommy J. Usery</u>		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)	\$ <u>1,500.00</u>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>5,412.03</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>10,777.09</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>4,839.12</u>

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 Tommy J. Usery, and my date of birth is 12/27/1954.
 My address is 4006 Blair Lane, San Antonio, TX, 78204, USA.
 (street) (city) (state) (zip code) (country)
 Executed in Tom Green County, State of Texas, on the 16 day of January, 20 22.
 (month) (year)

 Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

**FORM C/OH
COVER SHEET PG 3**

19 FILER NAME <i>Tommy J. Usery</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>1650.00</i>
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ <i>4839.12</i>
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>3758.15</i>
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

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: <u>1/2</u>
2 FILER NAME <u>Tommy J. Usery</u>		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Dan Gray</u>	7 Amount of contribution (\$) <u>100⁰⁰</u>
	6 Contributor address; City; State; Zip Code <u>101 Estate Dr. San Angelo TX 76903</u>	
8 Principal occupation / Job title (See Instructions) <u>Retired</u>		9 Employer (See Instructions)
Date <u>12/4/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Keith Key</u>	Amount of contribution (\$) <u>2500⁰⁰</u>
	Contributor address; City; State; Zip Code <u>San Angelo, TX 76904</u>	
Principal occupation / Job title (See Instructions) <u>Retired</u>		Employer (See Instructions)
Date <u>12/14/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Randy Armer</u>	Amount of contribution (\$) <u>500⁰⁰</u>
	Contributor address; City; State; Zip Code <u>3131 San Antonio St San Angelo, TX 76901</u>	
Principal occupation / Job title (See Instructions) <u>Retired</u>		Employer (See Instructions)
Date <u>12/14/2021</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Michael A. Baird</u>	Amount of contribution (\$) <u>500⁰⁰</u>
	Contributor address; City; State; Zip Code <u>7464 Plantation Ct Wall, TX 76957</u>	
Principal occupation / Job title (See Instructions) <u>Attorney</u>		Employer (See Instructions) <u>Self</u>

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

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
2 FILER NAME Tommy J. Usery		3 Filer ID (Ethics Commission Filers)
4 Date 12/20/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linda Offill	7 Amount of contribution (\$) 10000
6 Contributor address; City; State; Zip Code 7686 Chapparral Run San Angelo, TX 76901		
8 Principal occupation / Job title (See Instructions) Accounting		9 Employer (See Instructions)
Date 1/3/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milicey Englert	Amount of contribution (\$) 10000
Contributor address; City; State; Zip Code 3814 Lake Ridge Dr. San Angelo TX 76904		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/6/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Searls	Amount of contribution (\$) 10000
Contributor address; City; State; Zip Code 2017 Valley View San Angelo TX 76904		
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Republic Services
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
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.

LOANS

SCHEDULE E

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 E: 117
2 FILER NAME Tommy J. Usery		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 11/13/2021	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Tommy J. Usery	9 Loan Amount (\$) 750⁰⁰
6 Is lender a financial institution? Y <input type="radio"/> N <input checked="" type="radio"/>	8 Lender address; City; State; Zip Code 4006 Blair Lane San Angelo TX 76904	10 Interest rate 0%
		11 Maturity date N/A
12 Principal occupation / Job title (See Instructions) Attorney		13 Employer (See Instructions) Self
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)

Date of loan 11/16/2021	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Tommy J. Usery	Loan Amount (\$) 4.88
Is lender a financial institution? Y <input type="radio"/> N <input checked="" type="radio"/>	Lender address; City; State; Zip Code 4006 Blair Lane San Angelo TX 76904	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Description of Collateral <input checked="" type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor Guarantor address; City; State; Zip Code	Amount Guaranteed (\$)
Principal Occupation (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

LOANS

SCHEDULE E

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 E: 2/7
2 FILER NAME Tommy J. Usery		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 11/15/2021	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Tommy J. Usery	9 Loan Amount (\$) 1,000⁰⁰
6 Is lender a financial institution? Y <input checked="" type="radio"/> N	8 Lender address; City; State; Zip Code 4006 Blair Lane San Angelo TX 76904	10 Interest rate 6%
		11 Maturity date N/A
12 Principal occupation / Job title (See Instructions) Attorney		13 Employer (See Instructions) Self
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	Loan Amount (\$)
Is lender a financial institution? Y N	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

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LOANS

SCHEDULE E

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 E: 3/7
2 FILER NAME Tommy J. Usery		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 12/03/2021	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Tommy J. Usery	9 Loan Amount (\$) 1,000⁰⁰
6 Is lender a financial institution? Y <input checked="" type="radio"/> N	8 Lender address; City; State; Zip Code 4006 Blair Lane San Angelo TX 76904	10 Interest rate 0%
		11 Maturity date N/A
12 Principal occupation / Job title (See Instructions) Attorney		13 Employer (See Instructions) self
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan 12/13/2021	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Tommy J. Usery	Loan Amount (\$) 1,000⁰⁰
Is lender a financial institution? Y <input checked="" type="radio"/> N	Lender address; City; State; Zip Code Tommy J. Usery 4006 Blair Lane San Angelo TX 76904	Interest rate 0%
		Maturity date N/A
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Description of Collateral <input checked="" type="checkbox"/> none		<input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

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LOANS

SCHEDULE E

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 E: 4/7
2 FILER NAME Tommy J. Usery		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 12/4/21	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Tommy J. Usery	9 Loan Amount (\$) 4.57
6 Is lender a financial institution? Y <input checked="" type="radio"/> N <input type="radio"/>	8 Lender address; City; State; Zip Code 4006 Blair Lane San Angelo TX 76901	10 Interest rate 0%
		11 Maturity date N/A
12 Principal occupation / Job title (See Instructions) Attorney		13 Employer (See Instructions) Self
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan 12/30/21	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Tommy J. Usery	Loan Amount (\$) 110.20
Is lender a financial institution? Y <input checked="" type="radio"/> N <input type="radio"/>	Lender address; City; State; Zip Code same	Interest rate 0%
		Maturity date N/A
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Description of Collateral <input checked="" type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor Guarantor address; City; State; Zip Code	Amount Guaranteed (\$)
Principal Occupation (See Instructions)		Employer (See Instructions)

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

LOANS

SCHEDULE E

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 E: 5/7
2 FILER NAME Tommy I. Usery		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 12/30/31	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Tommy I. Usery	9 Loan Amount (\$) 37.78
6 Is lender a financial institution? Y <input checked="" type="radio"/> N	8 Lender address; City; State; Zip Code 4006 Blair Lane San Angelo TX 76904	10 Interest rate 0%
		11 Maturity date N/A
12 Principal occupation / Job title (See Instructions) Attorney		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan 12/30/21	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Tommy I. Usery	Loan Amount (\$) 12.74
Is lender a financial institution? Y N	Lender address; City; State; Zip Code 4006 Blair Lane San Angelo TX 76904	Interest rate 0%
		Maturity date N/A
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Description of Collateral <input checked="" type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor Guarantor address; City; State; Zip Code	Amount Guaranteed (\$)
Principal Occupation (See Instructions)		Employer (See Instructions)

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

LOANS

SCHEDULE E

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 E: 6/7
2 FILER NAME Tommy J. Usary		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 1/6/2022	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Tommy J. Usary	9 Loan Amount (\$) 30.83
6 Is lender a financial institution? Y <input checked="" type="radio"/> N	8 Lender address; City; State; Zip Code 4006 Blair Lane San Angelo TX 76904	10 Interest rate 0%
		11 Maturity date N/A
12 Principal occupation / Job title (See Instructions) Attorney		13 Employer (See Instructions) Self
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan 1/8/22	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Tommy J. Usary	Loan Amount (\$) 196.54
Is lender a financial institution? Y <input checked="" type="radio"/> N	Lender address; City; State; Zip Code 4006 Blair Lane San Angelo TX 76904	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Description of Collateral <input checked="" type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

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LOANS

SCHEDULE E

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 E: 7/7
2 FILER NAME Tommy J. Usery		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 1/4/22	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Tommy J. Usery	9 Loan Amount (\$) 492.78
6 Is lender a financial institution? Y (N)	8 Lender address; City; State; Zip Code 4006 Blair Lane San Angelo TX 76904	10 Interest rate 0%
		11 Maturity date N/A
12 Principal occupation / Job title (See Instructions) Attorney		13 Employer (See Instructions) Self
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan 1/14/22	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Tommy J. Usery	Loan Amount (\$) 203.25
Is lender a financial institution? Y (N)	Lender address; City; State; Zip Code 4006 Blair Lane San Angelo TX 76904	Interest rate 0%
		Maturity date N/A
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Description of Collateral <input checked="" type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor Guarantor address; City; State; Zip Code	Amount Guaranteed (\$)
Principal Occupation (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Tommy J. Usery</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>11/19/2021</i>	5 Payee name <i>Vista Print</i>	
6 Amount (\$) <i>356.24</i>	7 Payee address; <i>9250 Red Rock Rd</i>	City; State; Zip Code <i>Reno NV 89506</i>
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising</i>	(b) Description <i>Cards</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Tommy J. Usery</i>	Office sought / Office held <i>County Judge</i>
Date <i>11/19/2021</i>	Payee name <i>Rene Buttons</i>	
Amount (\$) <i>231.38</i>	Payee address; <i>4970 Chipewau Rd</i>	City; State; Zip Code <i>Medina OH 44256</i>
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>Buttons</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Same</i>	Office sought / Office held
Date <i>12/4/2021</i>	Payee name <i>Vista Print</i>	
Amount (\$) <i>926.59</i>	Payee address; <i>9250 Red Rock Rd</i>	City; State; Zip Code <i>Reno NV 89506</i>
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>Yard Signs</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Same</i>	Office sought / Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Tommy I. Usery</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>12/16/2021</i>	5 Payee name <i>Amazon</i>
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6 Amount (\$) <i>211.08</i>	7 Payee address; <i>410 Terry Ave N.</i>	City; <i>Seattle</i>	State; <i>WA.</i>	Zip Code <i>98109</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising</i>	(b) Description <i>Yard Stakes</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Tommy I Usery</i>	Office sought <i>Tam Green County Judge</i>	Office held
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Date <i>12/17/2021</i>	Payee name <i>Amazon</i>
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Amount (\$) <i>128.68</i>	Payee address; <i>410 Terry Ave. N</i>	City; <i>Seattle</i>	State; <i>WA</i>	Zip Code <i>98109</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>Yard Stakes.</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>12/20/21</i>	Payee name <i>Facebook</i>
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Amount (\$) <i>\$10.00</i>	Payee address; <i>1 Hacker Way</i>	City; <i>Menlo Park</i>	State; <i>CA</i>	Zip Code <i>94025</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>Electronic Page Boost</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Tommy I. Usery</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>12/27/21</i>	5 Payee name <i>Vista Print</i>	
6 Amount (\$) <i>421.86</i>	7 Payee address; City; State; Zip Code <i>9250 Red Rock Rd Reno NV 89506</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising</i>	(b) Description <i>Signs</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Tommy I. Usery</i>	Office sought / Office held <i>Tom Green County Judge</i>
Date <i>12/27/21</i>	Payee name <i>Texas Frank</i>	
Amount (\$) <i>10.00</i>	Payee address; City; State; Zip Code <i>San Angelo TX 76904</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Service fee</i>	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Same</i>	Office sought / Office held
Date <i>12/27/21</i>	Payee name <i>Super Cheap Signs</i>	
Amount (\$) <i>1462.32</i>	Payee address; City; State; Zip Code <i>9200 Waterford Centre Blvd Austin TX 78758 #100</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertisement</i>	Description <i>Large Signs.</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Same</i>	Office sought / Office held

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