		CE REPORT		FORM C/OH COVER SHEET PG 1	
The C/OH Instruction	Guide explains ho	w to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:	
3 CANDIDATE/ OFFICEHOLDER NAME	MS/MRS/MR Mr.	FiRST Brian	мı J	OFFICE USE ONLY	
NAME	NICKNAME	LAST Fritze	SUFFIX	Date Received FILED  Jana Kennon, County Cle	k
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	2323 High Vernon, TX	School Drive	CITY; STATE; ZIP CODE	Wilbarger County, Texas FEB 0 8 2024	
Change of Address				Xan allomn	
5 CANDIDATE/ OFFICEHOLDER PHONE	( 940 )	PHONE NUMBER 886-8473	EXTENSION	Date Hand-tyllivered or Date Postmarked By	_Depu
6 CAMPAIGN	MS / MRS / MR	FIRST	MI	Receipt # Amount \$	
TREASURER NAME	Mrs.	Donna		Date Processed	
MAINE	NICKNAME	LAST	SUFFIX		
	f	Hager		Date imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	P.O. Box 18 Vernon, TX		JITE #; CITY;	STATE: ZIP CODE	
8 CAMPAIGN TREASURER PHONE	( 940 )	PHONE NUMBER 357-367	EXTENSION		
REPORT TYPE	January 15 July 15	30th day before elec	tion Exceeded Modified	15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)	
IO PERIOD COVERED	Month 12	Day Year  / 15 / 23	Reporting Limit  Month  THROUGH  1	Day Year / 15 / 24	
1 ELECTION	Month Day	Year Primary  24 General	Runoff Other Description  Special		
2 OFFICE	OFFICE HELD (If any) Wilbarger (	County Sheriff	13 OFFICE SOUGHT (If known) Wilbarger County	/ Sheriff	
14 NOTICE FROM POLITICAL  THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE'S OR OFFICEHOLDER: KNOWLEDGE OR COMMITTEES.  COMMITTEE(S)					
	COMMITTEE TYPE	COMMITTEE NAME			
Additional Pages	GENERAL	COMMITTEE ADDRESS			
SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TREA	SURER ADDRESS		
		GO TO P	AGE 2		

#### CANDIDATE / OFFICEHOLDER FORM C/OH **COVER SHEET PG 2** CAMPAIGN FINANCE REPORT 15 C/OH NAME 16 Filer ID (Ethics Commission Filers) 17 CONTRIBUTION TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN **TOTALS** PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR 0.00CONTRIBUTIONS MADE ELECTRONICALLY) 2. **TOTAL POLITICAL CONTRIBUTIONS** 1,885.00 (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **EXPENDITURE** 3. TOTAL UNITEMIZED POLITICAL EXPENDITURE. **TOTALS** \$ TOTAL POLITICAL EXPENDITURES 2601.35 \$ CONTRIBUTION TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY 5. 0.00BALANCE OF REPORTING PERIOD **OUTSTANDING** TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE 0.00**LOAN TOTALS** 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 Brian Fritze this the Sworn to and subscribed before me by \_\_\_\_\_ , to certify which witness my hand and seal of office. **COUNTY CLERK OF WILBARGER COUNTY** Signature of officer administering of Printed name of officer administering oath Title of officer administering oath (2) Unsworn Declaration

#### SUBTOTALS - C/OH

## FORM C/OH COVER SHEET PG 3

[	rian Fritze 20 Filer ID	(Ethics Commis	sion Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	1,885.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	0.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	s	0.00
4.	SCHEDULE E: LOANS	s	0.00
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ \$	2601.35
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	0.00
7,	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTION	ons \$	0.00
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	s	0.00
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	s	0.00
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF	F C/OH \$	0.00
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		0.00
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETUR	NED \$	0.00

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## 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			_	_	3 Filer ID (Ethics Commission Filers)		
4	Date 12/15/2023	5 Full name of contributor  Jonathan Haseletf	out-of-state PAC			7 Amount of contribution (\$)250,00		
		6 Contributor address; 14949 FM RD 2074	City; Vernon	State; TX				
8	Principal occu	pation / Job title (See Instructions)		9 Emp	lloyer (See Instruct	ions)		
-	Date 12/22/2023	Full name of contributor	out-of-state PAC		)	Amount of contribution (\$)150.00		
		Contributor address; 8919 CR 107N	City; Vernon	State; TX	Zip Code 76384			
ı	Principal occup	ation / Job title (See Instructions)		Empl	loyer (See Instructi	ons)		
	Date 12/29/2023	Full name of contributor				Amount of contribution (\$)250.00		
		Contributor address; P.O. Box 672	City; Vernon	State; TX	Zip Code 76385			
F	Principal occup	ation / Job title (See Instructions)		Empl	oyer (See Instruction	ons)		
	Date 12/29/2023	Full name of contributor Ron Bunch – Bunch Tax Service	out-of-state PAC	(ID#:		Amount of contribution (\$)35,00		
		Contributor address; 2224 Pease St	City; Vernon	State; TX	Zip Code 76384			
F	rincipal occupa	ation / Job title (See Instructions)		Emplo	oyer (See Instruction	ons)		
		ATTACH ADDITIO						

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Revised 1/1/2024

## MONETARY POLITICAL CONTRIBUTIONS

#### SCHEDULE A1

Date 12/29/2023    South Full name of contributor   Out-of-state PAC (ID#   )   7 Amount of contribution (\$)250.	Th	e Instruction Guide explains how	to complete th	is form.	1 Total pages Schedule A1:
12/29/2023  In a Monica Tyre  6 Contributor address; 4706 Cottonwood LN  Principal occupation / Job title (See Instructions)  Date Full name of contributor Contributor address; 12/29/2023  Date Principal occupation / Job title (See Instructions)  Date Full name of contributor Contributor address; City: State; City: State; City: State; City: State: City: Contributor address: City: State: Contributor Contribution  Amount of contribution (\$)200.00  Contributor address: City: Contributor Contributo	FILER NAME				3 Filer ID (Ethics Commission Filers)
Contributor address;   City;   State;   Zip Code   TX   76384		Lynn & Monica Tyra			
Date   Full name of contributor   cut-of-state   PAC (ID#   Amount of contribution (\$)250.    12/29/2023   loe D. Word   Contributor address;   City:   State:   Zip Code   TX 76384		6 Contributor address;	City;	State; Zip Code	
12/29/2023   Ibe D Word   Contributor address;   City;   State;   Zip Code   TX   78384	Principal occ	upation / Job title (See Instructions)		9 Employer (See Ins	tructions)
Contributor address; City; State; Zip Code TX 76384  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Amount of contribution (\$)500.0  Goodrum Wrecker Service LLC  Contributor address; City; State; Zip Code P.O. Box 1604  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Amount of contribution (\$)500.0  Employer (See Instructions)  Amount of contribution (\$)200.0  Contributor address; City; State; Zip Code 1/9/2023  Full name of contributor  Legado Farms Inc  Contributor address; City; State; Zip Code 1/9/2023  Contributor address; City: State; Zip Code TX 76384		Joe D. Word			Amount of contribution (\$)250.00
Date 1/9/2023  Full name of contributor out-of-state PAC (ID#:		Contributor address;	City;	State; Zip Code	
Goodrum Wrecker Service LLC  Contributor address; City; State; Zip Code P.O. Box 1604 Vernon TX 76384  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Full name of contributor oul-of-state PAC (ID#	Principal occu	pation / Job title (See Instructions)		Employer (See Inst	tructions)
Contributor address; City; State: Zip Code P.O. Box 1604 Vernon TX 76384  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Amount of contribution (\$)200.0  Legado Farms Inc.  Contributor address; City: State; Zip Code 2412 Crescent Dr. Vernon TX 76384		Goodrum Wrecker Service LLC			Amount of contribution (\$)500.00
Date 1/9/2023 Full name of contributor oul-of-state PAC (ID#		Contributor address;	City;	State; Zip Code	
Legado Farms Inc.  Contributor address; City; State; Zip Code 2412 Crescent Dr. Vernon TX 76384  Amount of contribution (\$)200.0	Principal occup	pation / Job title (See Instructions)		Employer (See Insti	ructions)
2412 Crescent Dr. Vernon TX 76384			out-of-state PAC	; (ID#:	_> Amount of contribution (\$)200.00
Principal occupation / Joh Hills /See Instructions)			10 to		
Employer (See Instructions)	Principal occup	ation / Job title (See Instructions)		Employer (See Instr	uctions)

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Revised 1/1/2024

### POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

F1 SCHEDULE

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

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Food/Beverage
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Legal Services Credit Card Payment

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel Out Of District
Other (enter a category not listed above)

Credit Cald Payment	The Instruction Guide explains how to complete this form.					
1 Total pages Schedule Ft:	1		3 Filer ID (Ethics Commission Filers)			
	Brian Fritze					
4 Date 12/30/2023	5 Payee πame Vista Print					
6 Amount (\$)110.88	7 Payee address; Vistaprint.com	City;	State; Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description Flyers				
	(c) Check if travel outside of Texas. Complete Schedule T,	Check if Austir	in, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name	Office sought	Office held			
Date	Рауее пате					
12/7/2023	Ace of Vernon					
Amount (\$)70.00	Payee address; 2806 Wibarger St	City; Vernon	State; Zip Code TX 76384			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description Yard Sign Supplies				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held			
Date 12/29/2023	Payee name Vista Print					
Amount (\$)81.44	Payee address; Vistaprint.com	City;	State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Business Cards				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin,	, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	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 CA	TEGORIES	FOR BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Polit Credit Card Payment		Office Ov Polling Ex Printing E Salaries/	xpense Wages/Contract Labor	Travel In District Travel Out Of Distri	pment & Related Expense
I	1 Total asses Cabadata 50	1	INITIAL TOWN CO C	complete this form:	0	
Į	1 Total pages Schedule F1:	2 FILER NAME Brian Fritze			3 Filer ID (Ethics	Commission Filers)
	4 Date 12/29/2023	5 Payee name Just Yard Signs			-	
	6 Amount (\$)677.23	7 Payee address; Justyardsigns.com		City;	State;	Zip Code
	8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Description Yard Signs		
		(C) Check if travel outside of Texas. Comple	ete Schedule T.	Check if Austin	TX, officeholder living	expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name H		Office sought		Office held
	Date	Payee name				
	12/20/2023	Just Yard Signs				
	Amount (\$)1332.80	Payee address; Justyardsigns.com		City;	State;	Zip Code
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of th	is schedule)	Description		
		Check if travel outside of Texas. Comple	te Schedule T.	Check if Austin,	TX, officeholder living	expense
	Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name		Office sought		Office held
	Date	Payee name	Ţ.			
	12/20/2023	Ace of Vernon				
	Amount (\$)329,00	Payee address; 2806 Wilbarger St.		City; Vernon	State; TX	Zip Code 76384
		Category (See Categories listed at the top of this	s schedule)	Description		
	DUBBOSE	Other	ľ	Supplies for Yard Sign	าร	

Candidate / Officeholder name

PURPOSE OF EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

Check if travel outside of Texas. Complete Schedule T.

Office sought

Check if Austin, TX, officeholder living expense

Office held