

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: 12		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <i>Mr.</i> FIRST <i>Walter</i> MI NICKNAME LAST <i>Bryant</i> SUFFIX	OFFICE USE ONLY Date Received Rec. 7/15/26			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2022 Lillie St. San Angelo, Tx 76903				
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (325) 234-1425				
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <i>Ms.</i> FIRST <i>Norma</i> MI NICKNAME LAST <i>Flores</i> SUFFIX	Date Hand-delivered or Date Postmarked JUL 15 2026 9:40			
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 905 E. 42nd St. San Angelo, Tx 76903				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (325) 812-2733				
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 <i>1 / 15 / 26</i> THROUGH Month Day Year <i>7 / 15 / 26</i>				
11 ELECTION	ELECTION DATE Month Day Year <i>11 / 3 / 26</i>	ELECTION TYPE ☐ Primary ☐ Runoff ☐ Other Description ☒ General ☐ Special			
12 OFFICE	OFFICE HELD (if any) 13 OFFICE SOUGHT (if known) Justice of the Peace Precinct 1				
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. <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 20%; padding: 5px; vertical-align: top;"> ☐ Additional Pages ☐ GENERAL ☐ SPECIFIC </td> <td style="padding: 5px;"> COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS </td> </tr> </table>			☐ Additional Pages ☐ GENERAL ☐ SPECIFIC	COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS
☐ Additional Pages ☐ GENERAL ☐ SPECIFIC	COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS				

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#2

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:

1 of 9

2 FILER NAME

Walter L Bryant

3 Filer ID (Ethics Commission Filers)

4 Date

April-8
2026

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Janet Annabelle Jones

7 Amount of contribution (\$)

CK \$50

6 Contributor address;

City;

State;

Zip Code

3854 Parkwood San Angelo Tx 76904

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

April-8
2026

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Linda Shoemaker

Amount of contribution (\$)

CK \$25

Contributor address;

City;

State;

Zip Code

P.O BOX 62892 San Angelo Tx 76906

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

April-8
2026

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Leslie Huling

Amount of contribution (\$)

\$25
Cash.

Contributor address;

City;

State;

Zip Code

73 E 8th st San Angelo Tx 76902

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

April-8
2026

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Margaret Fernandez

Amount of contribution (\$)

\$15
cash.

Contributor address;

City;

State;

Zip Code

73 E 8th st. San Angelo Tx 76902

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.

#3

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 of 9

2 FILER NAME

Walter L Bryant

3 Filer ID (Ethics Commission Filers)

4 Date

May-4, 26

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Linda Shoemaker

7 Amount of contribution (\$)

\$25 CK.# 12469

6 Contributor address;

City;

State;

Zip Code

PO Box 62892 San Angelo Tx 76903

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

May-4, 26

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Janet Annabelle Jones

Amount of contribution (\$)

\$25

Contributor address;

City;

State;

Zip Code

3854 Parkwood San Angelo Tx 76904

CK# 06079

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

May-4, 26

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Michael Newlin

Amount of contribution (\$)

\$100

Contributor address;

City;

State;

Zip Code

5212 Westway Dr San Angelo Tx 76904

CK# 9371

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

May-4, 26

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Terri Boabery

Amount of contribution (\$)

\$20

Contributor address;

City;

State;

Zip Code

cell # 512-627-8574

Cash.

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.

#4

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:

3 of 9

2 FILER NAME

Walter L Bryant

3 Filer ID (Ethics Commission Filers)

4 Date

May-4-26

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Perry Flippin

7 Amount of contribution (\$)

\$20

Cash

6 Contributor address;

City;

State;

Zip Code

325-212-2272

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

May-4-26

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Thomas Bankston

Amount of contribution (\$)

\$20

Cash

Contributor address;

City;

State;

Zip Code

325-245-3336

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

May-4-26

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Terry & Gayle Holcome

Amount of contribution (\$)

\$25

Cash

Contributor address;

City;

State;

Zip Code

720-724-3119

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

May-4-26

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Suzanne Daniel

Amount of contribution (\$)

\$20

Contributor address;

City;

State;

Zip Code

325-658-5304

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.

#5

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: 4 of 9
2 FILER NAME Walter L. Bryant		3 Filer ID (Ethics Commission Filers)
4 Date May-4-20	5 Full name of contributor ? ☐ out-of-state PAC (ID#: _____) 6 Contributor address; City; State; Zip Code	7 Amount of contribution (\$) \$20 Cash.
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date June-1-20	Full name of contributor ☐ out-of-state PAC (ID#: _____) Evelyn Smith Contributor address; City; State; Zip Code Phone # 325-340-3298	Amount of contribution (\$) \$20 Cash.
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date June-1-20	Full name of contributor ☐ out-of-state PAC (ID#: _____) Terri B Contributor address; City; State; Zip Code Phone # (512) 627-8574	Amount of contribution (\$) \$20 Cash.
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date June-1-20	Full name of contributor ☐ out-of-state PAC (ID#: _____) Sally L Scott Contributor address; City; State; Zip Code 903 N Main St-unit 62 San Angelo Tx 76903 CK # 1038	Amount of contribution (\$) \$50
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.		

#6

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: 5 of 9
2 FILER NAME Walter L Bryant		3 Filer ID (Ethics Commission Filers)
4 Date May-27-2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Norma Flores. 6 Contributor address; City; State; Zip Code 905 E 42nd St San Angelo Tx 76903.	7 Amount of contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date June-4-2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Jon Mark Hogg Contributor address; City; State; Zip Code 1 E. Twonig Ave San Angelo Tx 76903	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date July-4-26	Full name of contributor ☐ out-of-state PAC (ID#: _____) Jon Mark Hogg Contributor address; City; State; Zip Code 311 S. Jefferson San Angelo Tx 76901	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date July-7-26	Full name of contributor ☐ out-of-state PAC (ID#: _____) Britta Todd Contributor address; City; State; Zip Code 4996 Silver Creek Pass San Angelo Tx 76904	Amount of contribution (\$) \$100.00
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.		

#7

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: 6 of 9
2 FILER NAME Walter L Bryant		3 Filer ID (Ethics Commission Filers)
4 Date 07-07-26	5 Full name of contributor ☐ out-of-state PAC (ID#: Patricia White	7 Amount of contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code 1602 Catalina San Angelo Tx 76901		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07-07-26	Full name of contributor ☐ out-of-state PAC (ID#: Michael Castillo	Amount of contribution (\$) \$5.00
Contributor address; City; State; Zip Code 3513 Toyah St. San Angelo Tx 76904		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07-07-26	Full name of contributor ☐ out-of-state PAC (ID#: Thomas Rojas	Amount of contribution (\$) \$10.00
Contributor address; City; State; Zip Code 1405 Wiley St. San Angelo Tx 76905		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07-07-26	Full name of contributor ☐ out-of-state PAC (ID#: David Christopher Cardenas Jr.	Amount of contribution (\$) \$20.00
Contributor address; City; State; Zip Code 209 W 11th San Angelo Tx 76903		
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.		

#8

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: 7-0A9
2 FILER NAME Walter L. Bryant		3 Filer ID (Ethics Commission Filers)
4 Date 7-8-26	5 Full name of contributor Silvia Pate ☐ out-of-state PAC (ID#)	7 Amount of contribution (\$) \$100 ⁰⁰
6 Contributor address; City; State; Zip Code 106 Greenwood Cary, NC 27511 San Angelo TX NF		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 7-8-26	Full name of contributor Analisa McCain ☐ out-of-state PAC (ID#)	Amount of contribution (\$) \$250 ⁰⁰
Contributor address; City; State; Zip Code 1209 Douglas Ave Midland TX 79701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 7-8-26	Full name of contributor Anche Bryant ☐ out-of-state PAC (ID#)	Amount of contribution (\$) \$10 ⁰⁰
Contributor address; City; State; Zip Code 15502 TC Lester Blvd Houston TX 77068		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 7-8-26	Full name of contributor Henry Shin ☐ out-of-state PAC (ID#)	Amount of contribution (\$) \$100 ⁰⁰
Contributor address; City; State; Zip Code 3434 Twin Mountain Dr. San Angelo TX 76904		
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.		

#9

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: 8 of 9
2 FILER NAME Walter L Bryant		3 Filer ID (Ethics Commission Filers)
4 Date 7-8-26	5 Full name of contributor ☐ out-of-state PAC (ID#: Stella Lasswell 6 Contributor address; City; State; Zip Code 1909 Douglas Dr. San Angelo Tx 76904	7 Amount of contribution (\$) \$15⁰⁰
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 7-9-26	Full name of contributor ☐ out-of-state PAC (ID#: Benjamin Viges 78731 Contributor address; City; State; Zip Code 7121 Hart Ln Apt. 2095 Austin Tx	Amount of contribution (\$) \$100⁰⁰
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 7-10-26	Full name of contributor ☐ out-of-state PAC (ID#: Christopher Smith 75052 Contributor address; City; State; Zip Code 1313 Highpoint Cir. Grand Prairie Tx	Amount of contribution (\$) \$250⁰⁰
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 7-11-26	Full name of contributor ☐ out-of-state PAC (ID#: Suzanna Savoie Contributor address; City; State; Zip Code 2708 Oates Dr. Dallas, Tx 75228	Amount of contribution (\$) \$100⁰⁰
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.		

#10

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: 9 of 9
2 FILER NAME Walter L. Bryant		3 Filer ID (Ethics Commission Filers)
4 Date 7-11-26	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Clarence Smith 6 Contributor address; City; State; Zip Code 75052 3950 Dechman Dr #4044 Grand Prairie Tx	7 Amount of contribution (\$) \$30⁰⁰
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 7-14-26	Full name of contributor ☐ out-of-state PAC (ID#: _____) Amanda Grunich Contributor address; City; State; Zip Code 2715 West Harris Ave. San Angelo, Tx 76901	Amount of contribution (\$) \$120⁰⁰
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
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.

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
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>1</u>		2 FILER NAME <u>Walter L Bryant</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>June-05-2026</u>		5 Payee name <u>OTCHEAP-CUSTOM-PRINTS</u>			
6 Amount (\$) <u>\$75⁴¹</u>		7 Payee address; City; State; Zip Code <u>Austin, Tx 78758</u> ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Advertising Expense</u>		(b) Description <u>Car Magnets.</u>		
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
		Candidate / Officeholder name <u>Walter Bryant</u>		Office sought <u>Justice of the Peace.</u>	Office held
Date <u>June-22-2026</u>		Payee name <u>office Depot #589</u>			
Amount (\$) <u>\$82²⁷</u>		Payee address; City; State; Zip Code <u>San Angelo Tx 76904</u> ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Printing Expense</u>		Description <u>Flyers.</u>		
	☐ 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 <u>Walter Bryant</u>		Office sought <u>Justice of the Peace</u>	Office held
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
	☐ 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

SUBTOTALS - SC C/OH

FORM SC C/OH
COVER SHEET PG 3

19. CANDIDATE NAME <i>Walter Bryant</i>		20. Filer ID (Ethics Commission Filers)
21. SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1690 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	\$ 157.68
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	\$