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: MR | FIRST: MATTHEW | MI: L
NICKNAME: LANE | LAST: CARTER | SUFFIX:

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
117 NORTH MILTON
SAN ANGELO, TX 76901

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (325) | PHONE NUMBER: 656-0625 | EXTENSION:

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: MRS | FIRST: MEAGAN | MI: J
NICKNAME: | LAST: HUNNICUTT | SUFFIX:

7 CAMPAIGN TREASURER ADDRESS
(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
4401 PINON RIDGE DRIVE
SAN ANGELO, TX 76904

8 CAMPAIGN TREASURER PHONE

AREA CODE: (325) | PHONE NUMBER: 374-1359 | EXTENSION:

OFFICE USE ONLY

Date Received: 7/28/26

Date Hand-delivered or Date Postmarked

Receipt # | Amount $

Date Processed

Date Imaged

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: 1 / 16 / 26 THROUGH 7 / 15 / 26

11 ELECTION

ELECTION DATE: Month / Day / Year: 11 / 3 / 26

ELECTION TYPE:
- ■ General
- Primary
- Runoff
- Special
- Other Description: _____

12 OFFICE

OFFICE HELD (if any): TOM GREEN COUNTY JUDGE

13 OFFICE SOUGHT (if known): TOM GREEN COUNTY JUDGE

14 NOTICE FROM POLITICAL COMMITTEE(S)
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.**

COMMITTEE TYPE	
	COMMITTEE NAME
GENERAL	COMMITTEE ADDRESS
SPECIFIC	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	**16** Filer ID (Ethics Commission Filers)
Matthew Lane Carter	

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)	$ 0.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	$
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 0.00
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 1236.95
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0.00

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

SANDRA KENNEY
Notary Public, State of Texas
Notary ID# 714631-3
My Commission Expires
NOVEMBER 16, 2028

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Matthew Lane Carter this the 15 day of July, 20 26, to certify which, witness my hand and seal of office.

Signature of officer administering oath | SANDRA KENNEY | Notary

Printed name of officer administering oath | Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

Signature of Candidate/Officeholder (Declarant)