

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers)		2 Total pages filed:	20	OFFICE USE ONLY		
3 CANDIDATE / OFFICEHOLDER NAME		MS / MRS / MR Mr. Leland	FIRST MI F.	Date Received		
		NICKNAME Lacy	LAST SUFFIX			
4 ORIGINAL REPORT TYPE		<input type="checkbox"/> January 15 <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election	<input type="checkbox"/> Runoff <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> 15th day after treasurer appointment (officeholder only)	<input type="checkbox"/> Final report Other (specify) _____	Date Hand-delivered or Date Postmarked	
5 ORIGINAL PERIOD COVERED		Month Day Year 01 / 01 / 2026	Month Day Year 02 / 01 / 2026	Receipt #	Amount \$	
6 EXPLANATION OF CORRECTION		<p>The loan was incorrectly reported as a contribution. Also, an in-kind donation was inadvertently omitted.</p>				
7 SIGNATURE I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.						
<p>Check ONLY if applicable:</p> <p><input type="checkbox"/> Semiannual reports: I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.</p> <p><input checked="" type="checkbox"/> Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.</p>						
Signature of Candidate/Officeholder						
Please complete either option below:						
<p>(1) Affidavit</p> <p>NOTARY STAMP / SEAL</p> <p>Sworn to and subscribed before me by _____ this the _____ day of _____, 20 _____, to certify which, witness my hand and seal of office.</p>						
Signature of officer administering oath		Printed name of officer administering oath		Title of officer administering oath		
OR						
<p>(2) Unsworn Declaration</p> <p>My name is <u>Leland Lacy</u>, and my date of birth is <u>09/02/1980</u> My address is <u>516 W Twohig Ave</u>, <u>San Angelo</u>, <u>TX</u>, <u>76903</u>, <u>USA</u> (street) (city) (state) (zip code) (country) Executed in <u>Tom Green</u> County, State of <u>Texas</u>, on the <u>3</u> day of <u>February</u>, <u>20 26</u>. <u>LL</u> Signature of Candidate/Officeholder (Declarant)</p>						
Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections						

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.			1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 20		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr	FIRST Leland	MI F	OFFICE USE ONLY Data Received		
	NICKNAME	LAST Lacy	SUFFIX			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE 516 W Twohig Ave., San Angelo, TX 76903			Date Hand-delivered or Date Postmarked		
<input type="checkbox"/> Change of Address						
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (325)	PHONE NUMBER 224-4663	EXTENSION	Receipt #		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs.	FIRST Martha	MI	Amount \$		
	NICKNAME	LAST Visney	SUFFIX	Date Processed		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: 126 Crestwood Dr., San Angelo, TX 76903			STATE: ZIP CODE		
8 CAMPAIGN TREASURER PHONE	AREA CODE (325)	PHONE NUMBER 374-7422	EXTENSION			
9 REPORT TYPE	<input type="checkbox"/> January 15	<input checked="" 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 01	Day 01	Year / 2026	Month 02	Day 01	Year / 2026
11 ELECTION	ELECTION DATE Month 03 Day 03 Year / 2026	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) County Court at Law #1 Judge		
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.					
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME				
		COMMITTEE ADDRESS				
		COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRESS				

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 2

15 JC/OH NAME	Leland Lacy		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS \$8,840	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$315	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$8,525	
EXPENDITURE TOTALS \$6,235.77	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$13.40	
	4. TOTAL POLITICAL EXPENDITURES	\$6,222.37	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$16,623.13	
	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$5,100	
OUTSTANDING LOAN TOTALS			

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/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

[Redacted]

(2) Unsworn Declaration

My name is Leland Lacy, and my date of birth is 09/02/1980.

My address is 516 W Twohig Ave, San Angelo, TX, 76903, USA.

(street) (city) (state) (zip code) (country)

Executed in Tom Green County, State of Texas, on the 3rd day of February, 20 26.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - JC/OH**FORM JC/OH
COVER SHEET PG 3**

19 FILER NAME	<i>Leland Lacy</i>	20 Filer ID (Ethics Commission Filers)
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21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 8,615.00
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 475.00
3. <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 1,000
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 5,100.00
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 6,235.77
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 (JUDICIAL)

SCHEDULE A(J)1

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 A(J)1: 9
2 FILER NAME Leland Lacy		3 Filer ID (Ethics Commission Filers)
4 Date 1/3/2026	5 Full name of contributor Gaye Pelzel	6 Contributor address: 2202 CR 347, Miles, TX 76861
	<input type="checkbox"/> out-of-state PAC ID#: _____	7 Amount of contribution (\$) 1,000.00
8 Contributor's principal occupation retired		9 Contributor's job title n/a
10 Contributor's employer/law firm n/a		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 1/4/2026		Full name of contributor Mark Brown
		Contributor address: 121 S. Irving St, San Angelo, TX 76903
		Amount of contribution (\$) 500.00
Contributor's principal occupation attorney		Contributor's job title attorney
Contributor's employer/law firm Mark Brown, Attorney at Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 1/5/26		Full name of contributor Wilson Kent Lacy
		Contributor address: 6337 Pueblo Pass, San Angelo, TX 76903
		Amount of contribution (\$) 500.00
Contributor's principal occupation retired		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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 (JUDICIAL)

SCHEDULE A(J)1

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 A(J)1: 9
2 FILER NAME Leland Lacy		3 Filer ID (Ethics Commission Filers)
4 Date 1/5/2026	5 Full name of contributor Sandy Rothband	6 Contributor address: City; State; Zip Code 4202 Laurel Oak Dr, San Angelo, TX 76904
7 Amount of contribution (\$) 200.00		

8 Contributor's principal occupation attorney	9 Contributor's job title Assistant County Attorney
10 Contributor's employer/law firm Tom Green County Attorney's office	11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)		
--	--	--

Date 1/7/2026	Full name of contributor Estelle Eckert	□ out-of-state PAC ID#: _____	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 3318 Clearview Dr, San Angelo, TX 76904			

Contributor's principal occupation retired	Contributor's job title
Contributor's employer/law firm	Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)		
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Date 1/8/26	Full name of contributor Clint Reichenau	□ out-of-state PAC ID#: _____	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code P.O. Box 287, Wall, TX 76957			

Contributor's principal occupation business owner	Contributor's job title Owner
Contributor's employer/law firm self	Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)		
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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 (JUDICIAL)

SCHEDULE A(J)1

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 A(J)1: <i>9</i>	
2 FILER NAME Leland Lacy		3 Filer ID (Ethics Commission Filers)	
4 Date 1/9/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Edward Olson	7 Amount of contribution (\$) 100.00	
6 Contributor address; 5734 Columbine Ln, San Angelo, TX 76904		9 Contributor's job title	
8 Contributor's principal occupation reitred		10 Contributor's employer/law firm	11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)			
Date 1/9/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Genny Davis	Amount of contribution (\$) 500.00	
Contributor address; 2030 Canyon Tr, McGregor, TX 76657		Contributor's job title Realtor	
Contributor's principal occupation Real estate agent		Contributor's job title Realtor	
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 1/9/26	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Yukio Kuniyuki	Amount of contribution (\$) 150.00	
Contributor address; 2902 Alta Vista Ln, San Angelo, TX 76903		Contributor's job title Executive Director	
Contributor's principal occupation non-profit administration		Contributor's job title Executive Director	
Contributor's employer/law firm San Angelo Performing Arts Center		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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
(JUDICIAL)**

SCHEDULE A(J)1

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

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule A(J)1: <u>9</u></p>
<p>2 FILER NAME Leland Lacy</p>		<p>3 Filer ID (Ethics Commission Filers)</p>
<p>4 Date 1/12/2026</p>	<p>5 Full name of contributor Janet Ridgway</p> <p>6 Contributor address: P.O. Box 61758, San Angelo, TX 76905</p>	<p>7 Amount of contribution (\$) 500.00</p>
<p>8 Contributor's principal occupation Real estate agent</p>		<p>9 Contributor's job title Realtor</p>
<p>10 Contributor's employer/law firm self</p>		<p>11 Law firm of contributor's spouse (if any)</p>
<p>12 If contributor is a child, law firm of parent(s) (if any)</p>		
<p>Date 1/12/2026</p>	<p>Full name of contributor Rosalinda Carrizales</p> <p>Contributor address: 4072 Townview Ln, San Angelo, TX 76901</p>	<p>Amount of contribution (\$) 500.00</p>
<p>Contributor's principal occupation physician</p>		<p>Contributor's job title OB/GYN</p>
<p>Contributor's employer/law firm Shannon</p>		<p>Law firm of contributor's spouse (if any)</p>
<p>If contributor is a child, law firm of parent(s) (if any)</p>		
<p>Date 1/19/26</p>	<p>Full name of contributor Danny Sherbon</p> <p>Contributor address: 2825 W Twohig Avenue, San Angelo, TX 76901</p>	<p>Amount of contribution (\$) 100.00</p>
<p>Contributor's principal occupation refined</p>		<p>Contributor's job title</p>
<p>Contributor's employer/law firm</p>		<p>Law firm of contributor's spouse (if any)</p>
<p>If contributor is a child, law firm of parent(s) (if any)</p>		

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 (JUDICIAL)

SCHEDULE A(J)1

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 A(J)1: 9	
2 FILER NAME Leland Lacy		3 Filer ID (Ethics Commission Filers)	
4 Date 1/16/2026	5 Full name of contributor Gabriel Hughes	6 Contributor address: City; State; Zip Code 1521 Shafter Street, San Angelo, TX 76901	7 Amount of contribution (\$) 500.00
8 Contributor's principal occupation attorney		9 Contributor's job title in-house Counsel	
10 Contributor's employer/law firm Principle LED		11 Law firm of contributor's spouse (if any)	
12 If contributor is a child, law firm of parent(s) (if any)			
Date 1/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Linda Carpenter		Amount of contribution (\$) 100.00
Contributor address: City; State; Zip Code 5245 Westway Drive, San Angelo, TX 76904			
Contributor's principal occupation retired		Contributor's job title	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 1/22/26	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Amberly Wimberly		Amount of contribution (\$) 500.00
Contributor address: City; State; Zip Code 210 S Washington St, San Angelo, TX 76901			
Contributor's principal occupation artist/quilting		Contributor's job title Owner	
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
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 (JUDICIAL)

SCHEDULE A(J)1

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

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule A(J)1: 9</p>
<p>2 FILER NAME Leland Lacy</p>		<p>3 Filer ID (Ethics Commission Filers)</p>
<p>4 Date 1/22/2026</p>	<p>5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Tim Turner</p>	<p>7 Amount of contribution (\$) 200.00</p>
<p>6 Contributor address: City: State: Zip Code P.O. Box 2182, San Angelo, TX 76902</p>		
<p>8 Contributor's principal occupation ranching</p>		<p>9 Contributor's job title Rancher</p>
<p>10 Contributor's employer/law firm self</p>		<p>11 Law firm of contributor's spouse (if any)</p>
<p>12 If contributor is a child, law firm of parent(s) (if any)</p>		
<p>Date 1/22/2026</p>		<p>Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Brian Raymond</p>
<p>Contributor address; City; State; Zip Code 2514 W Avenue J, San Angelo, TX 76901</p>		<p>Amount of contribution (\$) 500.00</p>
<p>Contributor's principal occupation attorney</p>		<p>Contributor's job title attorney</p>
<p>Contributor's employer/law firm Brian Raymond, Attorney at Law</p>		<p>Law firm of contributor's spouse (if any)</p>
<p>If contributor is a child, law firm of parent(s) (if any)</p>		
<p>Date 1/22/26</p>		<p>Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Wilson Kent Lacy (Leland's father)</p>
<p>Contributor address; City; State; Zip Code 6337 Pueblo Pass, San Angelo, TX 76901</p>		<p>Amount of contribution (\$) 1000.00</p>
<p>Contributor's principal occupation retired</p>		<p>Contributor's job title</p>
<p>Contributor's employer/law firm</p>		<p>Law firm of contributor's spouse (if any)</p>
<p>If contributor is a child, law firm of parent(s) (if any)</p>		

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 (JUDICIAL)

SCHEDULE A(J)1

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

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule A(J)1: <u>9</u></p>															
<p>2 FILER NAME Leland Lacy</p>		<p>3 Filer ID (Ethics Commission Filers)</p>															
<p>4 Date 1/23/2026</p>	<p>5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Jennifer Lee Shamburger</p>	<p>7 Amount of contribution (\$) 250.00</p>															
<p>6 Contributor address: 9325 Mercer Drive, Dallas, TX 75228</p>																	
<p>8 Contributor's principal occupation attorney</p>		<p>9 Contributor's job title Attorney/partner</p>															
<p>10 Contributor's employer/law firm Fee, Smith and Sharp LLP</p>		<p>11 Law firm of contributor's spouse (if any) n/a</p>															
<p>12 If contributor is a child, law firm of parent(s) (if any)</p>																	
<table border="1"> <tr> <td> <p>Date 1/23/2026</p> </td> <td> <p>Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Jonathan Dodson</p> </td> <td> <p>Amount of contribution (\$) 100.00</p> </td> </tr> <tr> <td colspan="2"> <p>Contributor address: 17 S Chadbourne St, Ste 205, San Angelo, TX 76901</p> </td> <td></td> </tr> <tr> <td colspan="2"> <p>Contributor's principal occupation attorney</p> </td> <td> <p>Contributor's job title attorney</p> </td> </tr> <tr> <td colspan="2"> <p>Contributor's employer/law firm Concho Valley Law. PC</p> </td> <td> <p>Law firm of contributor's spouse (if any)</p> </td> </tr> <tr> <td colspan="3"> <p>If contributor is a child, law firm of parent(s) (if any)</p> </td> </tr> </table>			<p>Date 1/23/2026</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Jonathan Dodson</p>	<p>Amount of contribution (\$) 100.00</p>	<p>Contributor address: 17 S Chadbourne St, Ste 205, San Angelo, TX 76901</p>			<p>Contributor's principal occupation attorney</p>		<p>Contributor's job title attorney</p>	<p>Contributor's employer/law firm Concho Valley Law. PC</p>		<p>Law firm of contributor's spouse (if any)</p>	<p>If contributor is a child, law firm of parent(s) (if any)</p>		
<p>Date 1/23/2026</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Jonathan Dodson</p>	<p>Amount of contribution (\$) 100.00</p>															
<p>Contributor address: 17 S Chadbourne St, Ste 205, San Angelo, TX 76901</p>																	
<p>Contributor's principal occupation attorney</p>		<p>Contributor's job title attorney</p>															
<p>Contributor's employer/law firm Concho Valley Law. PC</p>		<p>Law firm of contributor's spouse (if any)</p>															
<p>If contributor is a child, law firm of parent(s) (if any)</p>																	
<table border="1"> <tr> <td> <p>Date 1/28/26</p> </td> <td> <p>Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Eddie Howard</p> </td> <td> <p>Amount of contribution (\$) 100.00</p> </td> </tr> <tr> <td colspan="2"> <p>Contributor address: 3818 Deerfield Rd, San Angelo, TX 76904</p> </td> <td></td> </tr> <tr> <td colspan="2"> <p>Contributor's principal occupation retired</p> </td> <td> <p>Contributor's job title</p> </td> </tr> <tr> <td colspan="2"> <p>Contributor's employer/law firm</p> </td> <td> <p>Law firm of contributor's spouse (if any)</p> </td> </tr> <tr> <td colspan="3"> <p>If contributor is a child, law firm of parent(s) (if any)</p> </td> </tr> </table>			<p>Date 1/28/26</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Eddie Howard</p>	<p>Amount of contribution (\$) 100.00</p>	<p>Contributor address: 3818 Deerfield Rd, San Angelo, TX 76904</p>			<p>Contributor's principal occupation retired</p>		<p>Contributor's job title</p>	<p>Contributor's employer/law firm</p>		<p>Law firm of contributor's spouse (if any)</p>	<p>If contributor is a child, law firm of parent(s) (if any)</p>		
<p>Date 1/28/26</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Eddie Howard</p>	<p>Amount of contribution (\$) 100.00</p>															
<p>Contributor address: 3818 Deerfield Rd, San Angelo, TX 76904</p>																	
<p>Contributor's principal occupation retired</p>		<p>Contributor's job title</p>															
<p>Contributor's employer/law firm</p>		<p>Law firm of contributor's spouse (if any)</p>															
<p>If contributor is a child, law firm of parent(s) (if any)</p>																	
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>																	

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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 A(J)1: <u>9</u>	
2 FILER NAME Leland Lacy		3 Filer ID (Ethics Commission Filers)	
4 Date 1/29/2026	5 Full name of contributor Tara Holmes	6 Contributor address; City; State; Zip Code 5334 Green Oaks Dr, Christoval, TX 76935	7 Amount of contribution (\$) 200.00
8 Contributor's principal occupation attorney		9 Contributor's job title Attorney/partner	
10 Contributor's employer/law firm Perdue Brandon Fielder Collins & Mott LLP		11 Law firm of contributor's spouse (if any) n/a	
12 If contributor is a child, law firm of parent(s) (if any)			
Date 1/29/2026		Full name of contributor Robert Lacy	7 Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code P.O. Box 201, Carlsbad, TX 76934		Contributor's job title rancher	
Contributor's principal occupation ranching		Contributor's job title rancher	
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 1/29/26		Full name of contributor Dudra Butler	7 Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 1901 Cordell Dr, San Angelo, TX 76901		Contributor's job title	
Contributor's principal occupation retired		Contributor's job title	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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 (JUDICIAL)

SCHEDULE A(J)1

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

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule A(J)1: <u>9</u></p>															
<p>2 FILER NAME Leland Lacy</p>		<p>3 Filer ID (Ethics Commission Filers)</p>															
<p>4 Date 1/30/2026</p>	<p>5 Full name of contributor Stanley Mayfield</p>	<p>7 Amount of contribution (\$) 100.00</p>															
	<p>6 Contributor address: 2564 Lindenwood Dr, San Angelo, TX 76904</p>																
<p>8 Contributor's principal occupation business owner</p>		<p>9 Contributor's job title Owner</p>															
<p>10 Contributor's employer/law firm Mayfield Paper</p>		<p>11 Law firm of contributor's spouse (if any) n/a</p>															
<p>12 If contributor is a child, law firm of parent(s) (if any)</p>																	
<table border="1"> <tr> <td> <p>Date 1/31/2026</p> </td> <td> <p>Full name of contributor Stephanie May</p> </td> <td> <p>Amount of contribution (\$) 250.00</p> </td> </tr> <tr> <td></td> <td> <p>Contributor address: 303 W Harris Ave. Suite 3, San Angelo, TX 76903</p> </td> <td></td> </tr> <tr> <td colspan="2"> <p>Contributor's principal occupation attorney</p> </td> <td> <p>Contributor's job title attorney</p> </td> </tr> <tr> <td colspan="2"> <p>Contributor's employer/law firm Stephanie May, Attorney at Law</p> </td> <td> <p>Law firm of contributor's spouse (if any)</p> </td> </tr> <tr> <td colspan="3"> <p>If contributor is a child, law firm of parent(s) (if any)</p> </td> </tr> </table>			<p>Date 1/31/2026</p>	<p>Full name of contributor Stephanie May</p>	<p>Amount of contribution (\$) 250.00</p>		<p>Contributor address: 303 W Harris Ave. Suite 3, San Angelo, TX 76903</p>		<p>Contributor's principal occupation attorney</p>		<p>Contributor's job title attorney</p>	<p>Contributor's employer/law firm Stephanie May, Attorney at Law</p>		<p>Law firm of contributor's spouse (if any)</p>	<p>If contributor is a child, law firm of parent(s) (if any)</p>		
<p>Date 1/31/2026</p>	<p>Full name of contributor Stephanie May</p>	<p>Amount of contribution (\$) 250.00</p>															
	<p>Contributor address: 303 W Harris Ave. Suite 3, San Angelo, TX 76903</p>																
<p>Contributor's principal occupation attorney</p>		<p>Contributor's job title attorney</p>															
<p>Contributor's employer/law firm Stephanie May, Attorney at Law</p>		<p>Law firm of contributor's spouse (if any)</p>															
<p>If contributor is a child, law firm of parent(s) (if any)</p>																	
<table border="1"> <tr> <td> <p>Date 1/31/26</p> </td> <td> <p>Full name of contributor Harvey McCall</p> </td> <td> <p>Amount of contribution (\$) 100.00</p> </td> </tr> <tr> <td></td> <td> <p>Contributor address: 9916 Vistadale Dr, Dallas, TX 75238</p> </td> <td></td> </tr> <tr> <td colspan="2"> <p>Contributor's principal occupation IT</p> </td> <td> <p>Contributor's job title Project Manager</p> </td> </tr> <tr> <td colspan="2"> <p>Contributor's employer/law firm self</p> </td> <td> <p>Law firm of contributor's spouse (if any)</p> </td> </tr> <tr> <td colspan="3"> <p>If contributor is a child, law firm of parent(s) (if any)</p> </td> </tr> </table>			<p>Date 1/31/26</p>	<p>Full name of contributor Harvey McCall</p>	<p>Amount of contribution (\$) 100.00</p>		<p>Contributor address: 9916 Vistadale Dr, Dallas, TX 75238</p>		<p>Contributor's principal occupation IT</p>		<p>Contributor's job title Project Manager</p>	<p>Contributor's employer/law firm self</p>		<p>Law firm of contributor's spouse (if any)</p>	<p>If contributor is a child, law firm of parent(s) (if any)</p>		
<p>Date 1/31/26</p>	<p>Full name of contributor Harvey McCall</p>	<p>Amount of contribution (\$) 100.00</p>															
	<p>Contributor address: 9916 Vistadale Dr, Dallas, TX 75238</p>																
<p>Contributor's principal occupation IT</p>		<p>Contributor's job title Project Manager</p>															
<p>Contributor's employer/law firm self</p>		<p>Law firm of contributor's spouse (if any)</p>															
<p>If contributor is a child, law firm of parent(s) (if any)</p>																	
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>																	

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule A2: 1</p>
<p>2 FILER NAME Leland Lacy</p>		<p>3 Filer ID (Ethics Commission Filers)</p>
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>		<p>\$ 0</p>
<p>5 Date 1/01/26</p>	<p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Scherz Photography</p>	<p>8 Amount of Contribution \$ 250.00</p>
	<p>7 Contributor address; City; State; Zip Code 319 W Avenue C, San Angelo, TX 76902</p>	<p>9 In-kind contribution description photography</p>
<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>		
<p>10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)</p>		<p>11 Employer (FOR NON-JUDICIAL)(See Instructions)</p>
<p>12 Contributor's principal occupation (FOR JUDICIAL) photographer</p>		<p>13 Contributor's job title (FOR JUDICIAL)(See Instructions) photographer/owner</p>
<p>14 Contributor's employer/law firm (FOR JUDICIAL) self</p>		<p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>
<p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>		
<p>Date 1/28/26</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Christi Yancey</p>	<p>Amount of Contribution \$ 225.00</p>
	<p>Contributor address; City; State; Zip Code 5121 Beverly Dr, San Angelo, TX 76904</p>	<p>In-kind contribution description venue rental</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) florist/venue owner</p>		<p>Employer (FOR NON-JUDICIAL)(See Instructions)</p>
<p>Contributor's principal occupation (FOR JUDICIAL) business owner - Friendly Flower Shop/The Cottage</p>		<p>Contributor's job title (FOR JUDICIAL)(See Instructions) owner</p>
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

PLEDGED CONTRIBUTIONS (JUDICIAL)

SCHEDULE B(J)

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

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule B(J): <u>1</u></p>	
<p>2 FILER NAME Leland Lacy</p>		<p>3 Filer ID (Ethics Commission Filers)</p>	
<p>4 TOTAL OF UNITEMIZED PLEDGES</p>		<p>\$ <u>0</u></p>	
<p>5 Date 1/1/26</p>	<p>6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: Rick de Hoyos</p>	<p>8 Amount of Pledge \$ 500.00</p>	<p>9 In-kind contribution description</p>
	<p>7 Pledgor address: City; State; Zip Code 502 S Irving St, San Angelo, TX 76902</p>		
<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>			
<p>10 Pledgor's principal occupation attorney</p>		<p>11 Pledgor's job title attorney</p>	
<p>12 Pledgor's employer/law firm Law Offices of Rick de Hoyos</p>		<p>13 Law firm of pledgor's spouse (if any)</p>	
<p>14 If pledgor is a child, law firm of parent(s) (if any)</p>			
<p>Date 1/1/26</p>	<p>Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: Javier Cruz Jr.</p>	<p>Amount of Pledge \$ 500.00</p>	<p>In-kind contribution description</p>
	<p>Pledgor address: City; State; Zip Code 502 S Irving St, San Angelo, TX 76902</p>		
<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>			
<p>Pledgor's principal occupation attorney</p>		<p>Pledgor's job title attorney</p>	
<p>Pledgor's employer/law firm <i>Law Offices of Rick de Hoyos</i></p>		<p>Law firm of pledgor's spouse (if any)</p>	
<p>If pledgor is a child, law firm of parent(s) (if any)</p>			
<p>Date</p>	<p>Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: </p>	<p>Amount of Pledge \$</p>	<p>In-kind contribution description</p>
	<p>Pledgor address: City; State; Zip Code</p>		
<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>			
<p>Pledgor's principal occupation</p>		<p>Pledgor's job title</p>	
<p>Pledgor's employer/law firm</p>		<p>Law firm of pledgor's spouse (if any)</p>	
<p>If pledgor is a child, law firm of parent(s) (if any)</p>			
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p>			
<p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

LOANS (JUDICIAL)**SCHEDULE E(J)**

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

<p>The Instruction Guide explains how to complete this form.</p>		1 Total pages Schedule E(J): 1
2 FILER NAME Leland Lacy		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ <i>(Signature)</i>
5 Date of loan 02/01/2026	7 Name of lender Leland Lacy	9 Loan Amount (\$) 5,100.00
6 Is lender a financial institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	8 Lender address; City; State; Zip Code 516 W Twohig Ave., San Angelo, TX 76902	10 Interest rate 0%
		11 Maturity date 12/31/2026
12 Lender's Principal Occupation attorney		13 Lender's Job Title Assistant County Attorney
14 Lender's Employer/Law Firm Tom Green County		15 Law Firm of lender's spouse (if any) n/a
16 If lender is a child, law firm of parent(s) (if any)		
17 Description of Collateral <input checked="" type="checkbox"/> none		18 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
19 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	20 Name of guarantor	22 Amount Guaranteed (\$)
	21 Guarantor address; City; State; Zip Code	
23 Guarantor's Principal Occupation		24 Guarantor's Job Title
25 Guarantor's Employer/Law Firm		26 Law Firm of guarantor's spouse (if any)
27 If guarantor is a child, law firm of parent(s) (if any)		
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 Leland Lacy	3 Filer ID (Ethics Commission Filers)
4 Date 1/30/2026	5 Payee name McLaughlin Advertising	
6 Amount (\$) 4,277.38	7 Payee address; 115 S Park St, San Angelo, TX 76901	City; State; Zip Code
<input type="checkbox"/> Check if individual's residence address.		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) advertising	(b) Description yard signs and pushcards
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Leland Lacy	Office sought County Court at Law Judge Office held n/a
Date 1/29/26	Payee name Papel Custom Design	
Amount (\$) 38.24	Payee address; 20 Howard Street, San Angelo, TX 76901	City; State; Zip Code
<input type="checkbox"/> Check if individual's residence address.		
P PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) printing expense	Description invitations
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Leland Lacy	Office sought County Court at Law Judge Office held n/a
Date 1/14/26	Payee name Papel Custom Design	
Amount (\$) 57.37	Payee address; 20 Howard Street, Suite 2, San Angelo, TX 76901	City; State; Zip Code
<input type="checkbox"/> Check if individual's residence address.		
P PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) printing expense	Description invitations
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Leland Lacy	Office sought County Court at Law Judge Office held n/a

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: 3	2 FILER NAME Leland Lacy	3 Filer ID (Ethics Commission Filers)
4 Date 1/30/2026	5 Payee name United States Postal Service	
6 Amount (\$) 78.00	7 Payee address; 1 N Abe Street, San Angelo, TX 76902	City: _____ State: _____ Zip Code _____
<input type="checkbox"/> Check if individual's residence address.		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) other	(b) Description postage
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Leland Lacy	Office sought County Court at Law Judge Office held n/a
Date 1/9/26	Payee name Papel Custom Design	
Amount (\$) 16.24	Payee address; 20 Howard Street, Suite 2, San Angelo, TX 76901	City: _____ State: _____ Zip Code _____
<input type="checkbox"/> Check if individual's residence address.		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing expense	Description invitations
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Leland Lacy	Office sought County Court at Law Judge Office held n/a
Date 1/29/26	Payee name Lowe's	
Amount (\$) 24.98	Payee address; 5301 Sherwood Way, San Angelo, TX 76904	City: _____ State: _____ Zip Code _____
<input type="checkbox"/> Check if individual's residence address.		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description solar light for sign
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Leland Lacy	Office sought County Court at Law Judge Office held n/a
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 Leland Lacy	3 Filer ID (Ethics Commission Filers)	
4 Date 1/16/2026	5 Payee name McLaughlin Advertising		
6 Amount (\$) 1733.42	7 Payee address; 115 S Park St San Angelo, TX 76901	City; State; Zip Code	
<input type="checkbox"/> Check if individual's residence address.			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) advertising expense	(b) Description push cards	
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Leland Lacy	Office sought County Court at Law Judge Office held n/a	
Date	Payee name		
Amount (\$)	Payee address;	City; State; Zip Code	
<input type="checkbox"/> Check if individual's residence address.			
 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
Amount (\$)	Payee address;	City; State; Zip Code	
<input type="checkbox"/> Check if individual's residence address.			
 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Leland Lacy	Office sought County Court at Law Judge	Office held n/a
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			



AFFIDAVIT FOR CANDIDATE OR OFFICEHOLDER: ELECTRONIC FILING EXEMPTION

An exemption affidavit must be submitted with each paper report.

Beginning on January 1, 2026, a candidate or officeholder who has accepted more than \$34,890 in political contributions or made more than \$34,890 in political expenditures in any calendar year must file all subsequent reports electronically.

Filer name	Leland Lacy	Filer ID #
------------	-------------	------------

OFFICE USE ONLY	
Date Received	
Date Hand-delivered or Date Postmarked	
Receipt #	Amount \$
Date Processed	
Date Imaged	

1. I swear or affirm that I have not accepted more than \$34,890 in political contributions or made more than \$34,890 in political expenditures in a calendar year.
2. I further swear or affirm that I do not use computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
3. I further swear or affirm that no person acting as my agent or consultant, and no person with whom I contract, uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
4. I further swear or affirm that I understand that I am required to file my campaign finance reports electronically if I, my agent or consultant, or a person with whom I contract exceeds \$34,890 in political contributions or political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
5. I am filing this affidavit with the Campaign Finance report report due on February 2, 2026. I understand that this affidavit is required to be filed with each campaign finance report for which I am claiming an exemption from electronic filing.

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Signature of Filer

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 Leland Lacy, and my date of birth is 09/02/1980.

My address is 516 W Twohig Ave, San Angelo, TX, 76903, USA.
(street) (city) (state) (zip code) (country)

Executed in Tom Green County, State of Texas, on the 2nd day of February, 20 26.
(month) (year)

Signature of Filer (Declarant)

**FILERS WHO ARE EXEMPT FROM THE ELECTRONIC FILING REQUIREMENT
ARE STILL REQUIRED TO FILE CAMPAIGN FINANCE REPORTS ON PAPER**