

# 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: <b>32</b>		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr. Leland	FIRST Lacy	MI F	OFFICE USE ONLY		
	NICKNAME	LAST	SUFFIX	Date Received  <b>JAN 22 2026</b>		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #: CITY; STATE; ZIP CODE 516 W Twohig Ave., San Angelo, TX 76903					
<input type="checkbox"/> Change of Address						
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (325 )	PHONE NUMBER 224-4663	EXTENSION	Date Hand-delivered or Date Postmarked		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs. Martha Visney	FIRST	MI	Receipt #   Amount \$		
	NICKNAME	LAST	SUFFIX	Date Processed		
				Date Imaged		
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 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 07/28	Day /2025	Year	Month 12/31	Day /2025	Year
11 ELECTION	ELECTION DATE Month Day Year 03/03/2026	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) n/a	13 OFFICE SOUGHT (if known) County Court at Law #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.					
<input type="checkbox"/> Additional Pages		COMMITTEE TYPE				
		GENERAL				
		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  \$19,751.00	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 400.00	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 19,351	
EXPENDITURE TOTALS  \$14,207.13	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0	
	4. TOTAL POLITICAL EXPENDITURES	\$ 14,207.13	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 8,662.56	
	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0	
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

**(2) Unsworn Declaration**

My name is Leland F. Lacy, and my date of birth is 9/02/1980.  
My address is 516 W. TWDhig Ave San Angelo TX 76903 USA.  
(street) (city) (state) (zip code) (country)

Executed in Tom Green County, State of Texas, on the 21st day of January, 2026.  
(month) (year)

\_\_\_\_\_  
Signature of Candidate/Officeholder (Declarant)

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

<b>19</b> FILER NAME Leland Lacy	<b>20</b> Filer ID (Ethics Commission Filers)
<b>21</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 19,251	
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ 500	
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS \$	
4. <input type="checkbox"/> SCHEDULE E: LOANS \$	
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS \$ 14,207.13	
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 \$	

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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

<p><b>The Instruction Guide explains how to complete this form.</b></p>		<p><b>1</b> Total pages Schedule A2: <b>1</b></p>
<p><b>2</b> FILER NAME <b>Leland F. Lacy</b></p>		<p><b>3</b> Filer ID (Ethics Commission Filers)</p>
<p><b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>		<p><b>\$ 500.00</b></p>
<p><b>5</b> Date <b>8/19/2025</b></p>	<p><b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>David Nowlin</b>)</p> <p><b>7</b> Contributor address; City; State; Zip Code <b>Spillway Dr., San Angelo, TX 76904</b></p>	<p><b>8</b> Amount of Contribution \$ <b>500.00</b></p> <p><b>9</b> In-kind contribution description <b>steel sign frames</b></p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p><b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)</p>		<p><b>11</b> Employer (FOR NON-JUDICIAL)(See Instructions)</p>
<p><b>12</b> Contributor's principal occupation (FOR JUDICIAL) <b>construction</b></p>		<p><b>13</b> Contributor's job title (FOR JUDICIAL)(See Instructions)</p>
<p><b>14</b> Contributor's employer/law firm (FOR JUDICIAL) <b>self</b></p>		<p><b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>
<p><b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>		
<p>Date .....</p> <p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: .....</p> <p>Contributor address; City; State; Zip Code .....</p>		<p>Amount of Contribution \$ .....</p> <p>In-kind contribution description .....</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)</p>		<p>Employer (FOR NON-JUDICIAL)(See Instructions)</p>
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL)(See Instructions)</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><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

# 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	3 Filer ID (Ethics Commission Filers)	
8	Leland F. Lacy		
4 Date 8/19/2025	5 Payee name David Nowlin		
6 Amount (\$) 3,000.00	7 Payee address; 7531 Spillway Rd., San Angelo, TX 76904	City; State; Zip Code	
<input type="checkbox"/> Check if individual's residence address.			
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule)  advertising expense	(b) Description  steel frames for signs	
	(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 F. Lacy	Office sought County Court at Law #1	Office held
Date 8/20/2025	Payee name Vistaprint		
Amount (\$) 744.14	Payee address; 275 Wyman Street, Waltham, MA 02451	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  stationery	
	<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 8/22/2025	Payee name USPS		
Amount (\$) 124.80	Payee address; 1 N Abe St., San Angelo, TX 76902	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  postage	
	<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 F. Lacy	Office sought County Court at Law #1	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 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:  8	2 FILER NAME Leland F. Lacy	3 Filer ID (Ethics Commission Filers)	
4 Date 8/27/2025	5 Payee name Cactus Hotel		
6 Amount (\$) 250.00	7 Payee address; 36 E. Twohig Ave, San Angelo, TX 76902  <input type="checkbox"/> Check if individual's residence address.	City; State; Zip Code	
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Event expense	(b) Description  room rental fee	
	(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 F. Lacy	Office sought County Court at Law #1	Office held
Date 8/31/2025	Payee name Walmart		
Amount (\$) 3.00	Payee address; S. Bryant St., San Angelo, TX 76901  <input type="checkbox"/> Check if individual's residence address.	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  food/beverage expense	Description  food/bev for event	
	<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 8/31/2025	Payee name Kim Kolls		
Amount (\$) 510.00	Payee address; 3106 Grandview, San Angelo, TX 76904  <input type="checkbox"/> Check if individual's residence address.	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  advertising expense	Description  t-shirts	
	<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 F. Lacy	Office sought County Court at Law #1	Office held

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# 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	3 Filer ID (Ethics Commission Filers)
8	Leland F. Lacy	
4 Date	5 Payee name	
9/30/2025	Papel	
6 Amount (\$)	7 Payee address;	City; State; Zip Code
717.16	2413 Sherwood Way, San Angelo, TX 76901	
<input type="checkbox"/> Check if individual's residence address.		
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Printing expense	invitations for fundraiser
(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	Office sought
	Leland F. Lacy	Office held
County Court at Law #1		
Date	Payee name	
10/16/2025	McLaughlin Advertising	
Amount (\$)	Payee address;	City; State; Zip Code
2530.75	115 S Park St., San Angelo, TX 76901	
<input type="checkbox"/> Check if individual's residence address.		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	advertising expense	magnets, buttons, name tags, push cards
<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	
10/29/2025	Cactus Hotel	
Amount (\$)	Payee address;	City; State; Zip Code
125.00	36 E. Twohig Ave., San Angelo, TX 76902	
<input type="checkbox"/> Check if individual's residence address.		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	food/beverage expense	alcohol consultant fee for event
<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
	Leland F. Lacy	Office held
		County Court at Law #1

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  
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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
8	Leland F. Lacy	
4 Date 10/29/2025	5 Payee name Walmart	
6 Amount (\$) 82.25	7 Payee address; S. Bryant Street, San Angelo, TX 76901 <input type="checkbox"/> Check if individual's residence address.	City; State; Zip Code
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule)  food/beverage expense	(b) Description  food for fundraiser
	(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 F. Lacy	Office sought County Court at Law #1 Office held
Date 10/30/2025	Payee name Market Street	
Amount (\$) 111.03	Payee address; College Hills Blvd, San Angelo, TX 76904 <input type="checkbox"/> Check if individual's residence address.	City; State; Zip Code
  <b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  food/beverage expense	Description  food for fundraiser
	<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 10/30/2025	Payee name Amazon	
Amount (\$) 27.56	Payee address; 410 Terry Ave. N. Seattle, WA 98109 <input type="checkbox"/> Check if individual's residence address.	City; State; Zip Code
  <b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  event expense	Description  cups and napkins for fundraiser
	<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 F. Lacy	Office sought Office held County Court at Law #1
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# 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: <b>8</b>	2 FILER NAME <b>Leland F. Lacy</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>11/5/2025</b>	5 Payee name <b>USPS</b>	
6 Amount (\$) <b>31.20</b>	7 Payee address; <b>S. Abe St, San Angelo, TX 76902</b>	City; State; Zip Code
<input type="checkbox"/> Check if individual's residence address.		
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule)  <b>Other</b>	(b) Description  <b>postage</b>
	(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 <b>Leland F. Lacy</b>	Office sought <b>County Court a</b>
Date <b>11/3/2025</b>	Payee name  <b>Market Street</b>	
Amount (\$) <b>27.01</b>	Payee address;  <b>College Hills Blvd, San Angelo, TX 76904</b>	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)  <b>event expense</b>	Description  <b>plates for fundraiser</b>
	<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 <b>11/5/2025</b>	Payee name  <b>SAM's Club</b>	
Amount (\$) <b>138.88</b>	Payee address;  <b>Sherwood Way, San Angelo, TX 76904</b>	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)  <b>food/beverage expense</b>	Description  <b>cups and napkins for fundraiser</b>
	<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 <b>Leland F. Lacy</b>	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 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: <b>8</b>	2 FILER NAME Leland F. Lacy	3 Filer ID (Ethics Commission Filers)	
4 Date 11/6/2025	5 Payee name Olga Sosa		
6 Amount (\$) 60.00	7 Payee address; San Angelo, TX <input type="checkbox"/> Check if individual's residence address.	City; State; Zip Code	
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule)  Salaries/wages/contract labor	(b) Description  wages for working fundraiser	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	<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 F. Lacy	Office sought County Court at Law #1	Office held
Date 11/6/2025	Payee name Market Street		
Amount (\$) 118.88	Payee address; College Hills Blvd, San Angelo, TX 76904 <input type="checkbox"/> Check if individual's residence address.	City; State; Zip Code	
  <b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  food/beverage expense	Description  food for fundraiser	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	<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 11/10/2025	Payee name Republican Party of Tom Green County		
Amount (\$) 1,500.00	Payee address; S. Johnson St., San Angelo, TX 76904 <input type="checkbox"/> Check if individual's residence address.	City; State; Zip Code	
  <b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  fees	Description  Filing fee to run for office	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	<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 F. Lacy	Office sought County Court at Law #1	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 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	3 Filer ID (Ethics Commission Filers)
8	Leland F. Lacy	
4 Date 11/21/2025	5 Payee name Tom Green County Elections Office	
6 Amount (\$) 4.88	7 Payee address; Beauregard Ave., San Angelo, TX  <input type="checkbox"/> Check if individual's residence address.	City; State; Zip Code
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule)  Fees	(b) Description  voter data in Excel format
	(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 F. Lacy	Office sought County Court at Law #1 Office held
Date 12/1/2025	Payee name Q's Printing and Design	
Amount (\$) 132.61	Payee address; 20 Howard Street, Suite 8 San Angelo, TX 76901  <input type="checkbox"/> Check if individual's residence address.	City; State; Zip Code
 <b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  printing expense	Description  map of Tom Green County
	<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 12/10/2025	Payee name Fast Signs	
Amount (\$) 35.48	Payee address; 720 Knickerbocker Rd., San Angelo, TX 76903  <input type="checkbox"/> Check if individual's residence address.	City; State; Zip Code
 <b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Advertising fees	Description  car magnets
	<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 F. Lacy	Office sought Office held County Court at Law #1

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	3 Filer ID (Ethics Commission Filers)	
8	Leland F. Lacy		
4 Date 12/17/20;	5 Payee name USPS		
6 Amount (\$) 31.20	7 Payee address; 1 N. Abe Street, San Angelo, TX 76902 <input type="checkbox"/> Check if individual's residence address.	City; State; Zip Code	
8  <b>PURPOSE OF EXPENDITURE</b>	(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 F. Lacy	Office sought County Court at Law #1	Office held
Date 10/1/2025	Payee name USPS		
Amount (\$) 136.50	Payee address; 1 N. Abe Street, San Angelo, TX 76902 <input type="checkbox"/> Check if individual's residence address.	City;	State; Zip Code
 <b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  other	Description  postage	
	<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 11/21/2025	Payee name McLaughlin Advertising		
Amount (\$) 3,764.80	Payee address; 115 S Park Street, San Angelo, TX 76901 <input type="checkbox"/> Check if individual's residence address.	City;	State; Zip Code
 <b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Advertising expense	Description  yard signs	
	<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
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>			

**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: <i>22 19</i></p>
<p>2 FILER NAME Leland F. Lacy</p>		<p>3 Filer ID (Ethics Commission Filers)</p>
<p>4 Date 9/2/2025</p>	<p>5 Full name of contributor Jon Bailey</p> <p>6 Contributor address; 1609 Stonetrail Dr., San Angelo, TX 76904</p>	<p>7 Amount of contribution (\$) 1,000.00</p>
<p>8 Contributor's principal occupation attorney</p>		<p>9 Contributor's job title attorney/owner</p>
<p>10 Contributor's employer/law firm Bailey Law Firm</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 12/29/25</p>	<p>Full name of contributor Scott Allison</p> <p>Contributor address; 1151 Knickerbocker Rd. San Angelo, TX 76904</p>	<p>Amount of contribution (\$) 1,000.00</p>
<p>Contributor's principal occupation Real estate</p>		<p>Contributor's job title Broker/owner</p>
<p>Contributor's employer/law firm SCOTT ALLISON Real Estate</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 11/7/2025</p>	<p>Full name of contributor Patricia Self</p> <p>Contributor address; 206 Clover Dr. San Angelo, TX 76903</p>	<p>Amount of contribution (\$) 200.00</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.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: <i>22 19</i>	
2 FILER NAME Leland F. Lacy		3 Filer ID (Ethics Commission Filers)	
4 Date 9/2/2025	5 Full name of contributor Joe William Ross ..... 6 Contributor address; City; State; Zip Code P.O. Box 5376 San Angelo, TX 76902	7 Amount of contribution (\$) 250.00	
8 Contributor's principal occupation attorney		9 Contributor's job title attorney/owner	
10 Contributor's employer/law firm Joe Will Ross, Attorney at law		11 Law firm of contributor's spouse (if any)	
12 If contributor is a child, law firm of parent(s) (if any)			
Date 9/2/2025		Full name of contributor Richard McCall ..... Contributor address; City; State; Zip Code 3801 Woodhill Circle, Waco, TX 76710	Amount of contribution (\$) 500.00
Contributor's principal occupation retired		Contributor's job title n/a	
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 9/2/2025		Full name of contributor Teri Jackson ..... Contributor address; City; State; Zip Code 1515 Grierson St., San Angelo, TX 76901	Amount of contribution (\$) 100.00
Contributor's principal occupation real estate Broker		Contributor's job title Broker/owner	
Contributor's employer/law firm Teri Jackson, Realtors		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

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<p>The Instruction Guide explains how to complete this form.</p>		<p><b>1</b> Total pages Schedule A(J)1: <i>22 19</i></p>												
<p><b>2</b> FILER NAME Leland F. Lacy</p>		<p><b>3</b> Filer ID (Ethics Commission Filers)</p>												
<p><b>4</b> Date 9/2/2025</p>	<p><b>5</b> Full name of contributor Beth Uherik</p> <p><b>6</b> Contributor address; 3330 Canyon Creek Dr, San Angelo, TX 76904</p>	<p><b>7</b> Amount of contribution (\$) 250.00</p>												
<p><b>8</b> Contributor's principal occupation retired</p>		<p><b>9</b> Contributor's job title n/a</p>												
<p><b>10</b> Contributor's employer/law firm</p>		<p><b>11</b> Law firm of contributor's spouse (if any)</p>												
<p><b>12</b> If contributor is a child, law firm of parent(s) (if any)</p>														
<table border="1"> <tr> <td> <p>Date 9/2/2025</p> </td> <td> <p>Full name of contributor Paul Miller</p> <p>Contributor address; 121 CR 2433, Pittsburg, TX 75686</p> </td> <td> <p>Amount of contribution (\$) 100.00</p> </td> </tr> <tr> <td colspan="2"> <p>Contributor's principal occupation retired</p> </td> <td> <p>Contributor's job title n/a</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 9/2/2025</p>	<p>Full name of contributor Paul Miller</p> <p>Contributor address; 121 CR 2433, Pittsburg, TX 75686</p>	<p>Amount of contribution (\$) 100.00</p>	<p>Contributor's principal occupation retired</p>		<p>Contributor's job title n/a</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 9/2/2025</p>	<p>Full name of contributor Paul Miller</p> <p>Contributor address; 121 CR 2433, Pittsburg, TX 75686</p>	<p>Amount of contribution (\$) 100.00</p>												
<p>Contributor's principal occupation retired</p>		<p>Contributor's job title n/a</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>														
<table border="1"> <tr> <td> <p>Date 9/2/2025</p> </td> <td> <p>Full name of contributor Glenda Bacon</p> <p>Contributor address; City; State; Zip Code</p> </td> <td> <p>Amount of contribution (\$) 100.00</p> </td> </tr> <tr> <td colspan="2"> <p>Contributor's principal occupation retired</p> </td> <td> <p>Contributor's job title n/a</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 9/2/2025</p>	<p>Full name of contributor Glenda Bacon</p> <p>Contributor address; City; State; Zip Code</p>	<p>Amount of contribution (\$) 100.00</p>	<p>Contributor's principal occupation retired</p>		<p>Contributor's job title n/a</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 9/2/2025</p>	<p>Full name of contributor Glenda Bacon</p> <p>Contributor address; City; State; Zip Code</p>	<p>Amount of contribution (\$) 100.00</p>												
<p>Contributor's principal occupation retired</p>		<p>Contributor's job title n/a</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><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>  <b>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</b></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: <i>2219</i>															
2 FILER NAME Leland F. Lacy		3 Filer ID (Ethics Commission Filers)															
4 Date 9/4/2025	5 Full name of contributor Blake Lacy	6 Contributor address; City; State; Zip Code 3932 Arroyo del Sol, Schertz, TX 78154															
		7 Amount of contribution (\$) 500.00															
8 Contributor's principal occupation Banker		9 Contributor's job title Vice President															
10 Contributor's employer/law firm Masson Joseph, LLC		11 Law firm of contributor's spouse (if any)															
12 If contributor is a child, law firm of parent(s) (if any)																	
<table border="1"> <tr> <td>Date 9/4/2025</td> <td>Full name of contributor Jeff Chandler</td> <td>Amount of contribution (\$) 1000.00</td> </tr> <tr> <td colspan="2">Contributor address; City; State; Zip Code P.O. Box 5091, San Angelo, TX 76902</td> <td></td> </tr> <tr> <td colspan="2">Contributor's principal occupation attorney</td> <td>Contributor's job title Attorney/owner</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm J Chandler Law</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 9/4/2025	Full name of contributor Jeff Chandler	Amount of contribution (\$) 1000.00	Contributor address; City; State; Zip Code P.O. Box 5091, San Angelo, TX 76902			Contributor's principal occupation attorney		Contributor's job title Attorney/owner	Contributor's employer/law firm J Chandler Law		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 9/4/2025	Full name of contributor Jeff Chandler	Amount of contribution (\$) 1000.00															
Contributor address; City; State; Zip Code P.O. Box 5091, San Angelo, TX 76902																	
Contributor's principal occupation attorney		Contributor's job title Attorney/owner															
Contributor's employer/law firm J Chandler Law		Law firm of contributor's spouse (if any)															
If contributor is a child, law firm of parent(s) (if any)																	
<table border="1"> <tr> <td>Date 9/12/2025</td> <td>Full name of contributor Martha Visney</td> <td>Amount of contribution (\$) 350.00</td> </tr> <tr> <td colspan="2">Contributor address; City; State; Zip Code 126 Crestwood Dr, San Angelo, TX 76901</td> <td></td> </tr> <tr> <td colspan="2">Contributor's principal occupation <i>retired</i></td> <td>Contributor's job title</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 9/12/2025	Full name of contributor Martha Visney	Amount of contribution (\$) 350.00	Contributor address; City; State; Zip Code 126 Crestwood Dr, San Angelo, TX 76901			Contributor's principal occupation <i>retired</i>		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 9/12/2025	Full name of contributor Martha Visney	Amount of contribution (\$) 350.00															
Contributor address; City; State; Zip Code 126 Crestwood Dr, San Angelo, TX 76901																	
Contributor's principal occupation <i>retired</i>		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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: <i>22 19</i>
2 FILER NAME Leland F. Lacy		3 Filer ID (Ethics Commission Filers)
4 Date 9/12/2025	5 Full name of contributor Jim Kramer	6 Contributor address; City; State; Zip Code 122 Binham Heights, San Antonio, TX 78249
7 Amount of contribution (\$) 100.00		
8 Contributor's principal occupation retired		9 Contributor's job title
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 9/15/25		Full name of contributor Max Puello
		Contributor address; City; State; Zip Code 3017 Knickerbocker Rd, San Angelo, TX 76904
		Amount of contribution (\$) 100.00
Contributor's principal occupation Realtor		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 9/15/2025		Full name of contributor Tammy Koonce
		Contributor address; City; State; Zip Code 3317 Valleyview Dr, San Angelo, TX 76904
		Amount of contribution (\$) 100.00
Contributor's principal occupation Realtor		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)		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> <b>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</b>		

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: <i>22 19</i>
2 FILER NAME Leland F. Lacy		3 Filer ID (Ethics Commission Filers)
4 Date 9/16/2025	5 Full name of contributor Kay Keen	6 Contributor address; City; State; Zip Code 2047 Putter Dr., San Angelo, TX 76904
7 Amount of contribution (\$) 100.00		
8 Contributor's principal occupation Realtor		9 Contributor's job title Realtor
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/1/25		Full name of contributor John Conn
Contributor address; San Angelo, TX 76904		□ out-of-state PAC ID#: Amount of contribution (\$) 250.00
Contributor's principal occupation Entrepeneur		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)		
Date 10/1/25		Full name of contributor Lauren Mavromaras
Contributor address; 2198 Copper Rock Rd, San Angelo, TX 76904		□ out-of-state PAC ID#: Amount of contribution (\$) 250.00
Contributor's principal occupation Real estate appraiser		Contributor's job title Appraiser
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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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: <i>22 19</i>
2 FILER NAME Leland F. Lacy		3 Filer ID (Ethics Commission Filers)
4 Date 10/12/25	5 Full name of contributor Nevie Lacy	6 Contributor address; City; State; Zip Code 6337 Pueblo Pass, San Angelo, TX 76901
7 Amount of contribution (\$) 500.00		7 Amount of contribution (\$) 500.00
8 Contributor's principal occupation Retired		9 Contributor's job title
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 10/10/25		Full name of contributor □ out-of-state PAC ID#: _____ Paul Parker
Contributor address; City; State; Zip Code 2319 W Avenue K, San Angelo, TX 76901		Amount of contribution (\$) 500.00
Contributor's principal occupation Attorney		Contributor's job title Attorney/owner
Contributor's employer/law firm Paul Parker, Attorney at law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/9/25		Full name of contributor □ out-of-state PAC ID#: _____ Valerie Priess
Contributor address; City; State; Zip Code 808 Humble Rd, San Angelo, TX 76903		Amount of contribution (\$) 250.00
Contributor's principal occupation Mortgage Broker		Contributor's job title Broker
Contributor's employer/law firm Mortgage Financial Services		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

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<p><b>The Instruction Guide explains how to complete this form.</b></p>		<p><b>1</b> Total pages Schedule A(J)1: <i>22 19</i></p>												
<p><b>2</b> FILER NAME Leland F. Lacy</p>		<p><b>3</b> Filer ID (Ethics Commission Filers)</p>												
<p><b>4</b> Date 10/17/25</p>	<p><b>5</b> Full name of contributor Alvin Hale</p>	<p><b>6</b> Contributor address; City; State; Zip Code 114 Loch Lomond Rd, San Angelo, TX 76901</p> <p><b>7</b> Amount of contribution (\$) 100.00</p>												
<p><b>8</b> Contributor's principal occupation Retired</p>		<p><b>9</b> Contributor's job title</p>												
<p><b>10</b> Contributor's employer/law firm</p>		<p><b>11</b> Law firm of contributor's spouse (if any)</p>												
<p><b>12</b> If contributor is a child, law firm of parent(s) (if any)</p>														
<table border="1"> <tr> <td> <p>Date 10/20/25</p> </td> <td> <p>Full name of contributor Bill Helwig</p> </td> <td> <p><input type="checkbox"/> out-of-state PAC ID#: _____)</p> <p>Contributor address; City; State; Zip Code 1200 Mustang Drive, Denver City, TX 79323</p> <p>Amount of contribution (\$) 100.00</p> </td> </tr> <tr> <td colspan="2"> <p>Contributor's principal occupation Attorney</p> </td> <td> <p>Contributor's job title Attorney/Prosecutor</p> </td> </tr> <tr> <td colspan="2"> <p>Contributor's employer/law firm Tom Green County</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 10/20/25</p>	<p>Full name of contributor Bill Helwig</p>	<p><input type="checkbox"/> out-of-state PAC ID#: _____)</p> <p>Contributor address; City; State; Zip Code 1200 Mustang Drive, Denver City, TX 79323</p> <p>Amount of contribution (\$) 100.00</p>	<p>Contributor's principal occupation Attorney</p>		<p>Contributor's job title Attorney/Prosecutor</p>	<p>Contributor's employer/law firm Tom Green County</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 10/20/25</p>	<p>Full name of contributor Bill Helwig</p>	<p><input type="checkbox"/> out-of-state PAC ID#: _____)</p> <p>Contributor address; City; State; Zip Code 1200 Mustang Drive, Denver City, TX 79323</p> <p>Amount of contribution (\$) 100.00</p>												
<p>Contributor's principal occupation Attorney</p>		<p>Contributor's job title Attorney/Prosecutor</p>												
<p>Contributor's employer/law firm Tom Green County</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 10/23/25</p> </td> <td> <p>Full name of contributor David Lupton</p> </td> <td> <p><input type="checkbox"/> out-of-state PAC ID#: _____)</p> <p>Contributor address; City; State; Zip Code 2106 Club Lake Ct, San Angelo, TX 76904</p> <p>Amount of contribution (\$) 250.00</p> </td> </tr> <tr> <td colspan="2"> <p>Contributor's principal occupation Owner</p> </td> <td> <p>Contributor's job title President</p> </td> </tr> <tr> <td colspan="2"> <p>Contributor's employer/law firm Angelo Glass</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 10/23/25</p>	<p>Full name of contributor David Lupton</p>	<p><input type="checkbox"/> out-of-state PAC ID#: _____)</p> <p>Contributor address; City; State; Zip Code 2106 Club Lake Ct, San Angelo, TX 76904</p> <p>Amount of contribution (\$) 250.00</p>	<p>Contributor's principal occupation Owner</p>		<p>Contributor's job title President</p>	<p>Contributor's employer/law firm Angelo Glass</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 10/23/25</p>	<p>Full name of contributor David Lupton</p>	<p><input type="checkbox"/> out-of-state PAC ID#: _____)</p> <p>Contributor address; City; State; Zip Code 2106 Club Lake Ct, San Angelo, TX 76904</p> <p>Amount of contribution (\$) 250.00</p>												
<p>Contributor's principal occupation Owner</p>		<p>Contributor's job title President</p>												
<p>Contributor's employer/law firm Angelo Glass</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><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>														

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

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<p>The Instruction Guide explains how to complete this form.</p>			<p>1 Total pages Schedule A(J)1: <i>22 19</i></p>																				
<p>2 FILER NAME Leland F. Lacy</p>			<p>3 Filer ID (Ethics Commission Filers)</p>																				
<p>4 Date 10/24/25</p>	<p>5 Full name of contributor Mike Eckert</p>	<p><input type="checkbox"/> out-of-state PAC ID#:</p>	<p>7 Amount of contribution (\$) 50.00</p>																				
<p>6 Contributor address; City; State; Zip Code 3318 Clearview Dr, San Angelo, TX 76904</p>																							
<p>8 Contributor's principal occupation Builder</p>			<p>9 Contributor's job title Owner</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>																							
<table border="1"> <tr> <td> <p>Date 10/28/25</p> </td> <td> <p>Full name of contributor Drew Wallace</p> </td> <td> <p><input type="checkbox"/> out-of-state PAC ID#:</p> </td> <td> <p>Amount of contribution (\$) 250.00</p> </td> </tr> <tr> <td colspan="3"> <p>Contributor address; City; State; Zip Code 1582 S Concho Dr., San Angelo, TX 76904</p> </td> <td></td> </tr> <tr> <td colspan="3"> <p>Contributor's principal occupation Chiropractor</p> </td> <td> <p>Contributor's job title Owner/Chiropractor</p> </td> </tr> <tr> <td colspan="3"> <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="4"> <p>If contributor is a child, law firm of parent(s) (if any)</p> </td> </tr> </table>				<p>Date 10/28/25</p>	<p>Full name of contributor Drew Wallace</p>	<p><input type="checkbox"/> out-of-state PAC ID#:</p>	<p>Amount of contribution (\$) 250.00</p>	<p>Contributor address; City; State; Zip Code 1582 S Concho Dr., San Angelo, TX 76904</p>				<p>Contributor's principal occupation Chiropractor</p>			<p>Contributor's job title Owner/Chiropractor</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 10/28/25</p>	<p>Full name of contributor Drew Wallace</p>	<p><input type="checkbox"/> out-of-state PAC ID#:</p>	<p>Amount of contribution (\$) 250.00</p>																				
<p>Contributor address; City; State; Zip Code 1582 S Concho Dr., San Angelo, TX 76904</p>																							
<p>Contributor's principal occupation Chiropractor</p>			<p>Contributor's job title Owner/Chiropractor</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>																							
<table border="1"> <tr> <td> <p>Date 10/28/25</p> </td> <td> <p>Full name of contributor Joy Allen</p> </td> <td> <p><input type="checkbox"/> out-of-state PAC ID#:</p> </td> <td> <p>Amount of contribution (\$) 100.00</p> </td> </tr> <tr> <td colspan="3"> <p>Contributor address; City; State; Zip Code 3108 Tanglewood Dr, San Angelo, TX 76904</p> </td> <td></td> </tr> <tr> <td colspan="3"> <p>Contributor's principal occupation retired</p> </td> <td> <p>Contributor's job title</p> </td> </tr> <tr> <td colspan="3"> <p>Contributor's employer/law firm</p> </td> <td> <p>Law firm of contributor's spouse (if any)</p> </td> </tr> <tr> <td colspan="4"> <p>If contributor is a child, law firm of parent(s) (if any)</p> </td> </tr> </table>				<p>Date 10/28/25</p>	<p>Full name of contributor Joy Allen</p>	<p><input type="checkbox"/> out-of-state PAC ID#:</p>	<p>Amount of contribution (\$) 100.00</p>	<p>Contributor address; City; State; Zip Code 3108 Tanglewood Dr, 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 10/28/25</p>	<p>Full name of contributor Joy Allen</p>	<p><input type="checkbox"/> out-of-state PAC ID#:</p>	<p>Amount of contribution (\$) 100.00</p>																				
<p>Contributor address; City; State; Zip Code 3108 Tanglewood Dr, 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>																							

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J) 1: <i>22 19</i>
2 FILER NAME Leland F. Lacy		3 Filer ID (Ethics Commission Filers)
4 Date 11/6/25	5 Full name of contributor Richard McCall ..... 6 Contributor address; City; State; Zip Code 3801 Woodhill Cir, Waco, TX 76710	7 Amount of contribution (\$) 500.00
8 Contributor's principal occupation retired		9 Contributor's job title
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 11/6/25 Full name of contributor Walter McCullough ..... Contributor address; City; State; Zip Code P.O. Box 709, Mertzon, TX 76941		Amount of contribution (\$) 100.00
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)		
Date 11/6/2025 Full name of contributor Ginger Moore ..... Contributor address; City; State; Zip Code 7198 Ruby Lee Ln, San Angelo, TX 76901		Amount of contribution (\$) 50.00
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)		

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# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

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2 FILER NAME Leland F. Lacy		3 Filer ID (Ethics Commission Filers)	
4 Date 11/6/25	5 Full name of contributor Jill Giddens	6 Contributor address; City; State; Zip Code 1926 Shady Point Circle Dr, San Angelo, TX 76904	7 Amount of contribution (\$) 50.00
8 Contributor's principal occupation Attorney		9 Contributor's job title Assistant County Attorney	
10 Contributor's employer/law firm Tom Green County		11 Law firm of contributor's spouse (if any)	
12 If contributor is a child, law firm of parent(s) (if any)			
Date 11/6/25		Full name of contributor Dick Robertson	Amount of contribution (\$) 200.00
Contributor address; City; State; Zip Code 2302 Live Oak St, 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)			
Date 11/6/2025		Full name of contributor Hector Leos	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 1731 Overhill Dr, San Angelo, TX 76904		Contributor's job title	
Contributor's principal occupation business owner/importer		Contributor's job title Owner	
Contributor's employer/law firm Leos Imports		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

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2 FILER NAME Leland F. Lacy		3 Filer ID (Ethics Commission Filers)												
4 Date 11/6/25	5 Full name of contributor Linda Binns ..... 6 Contributor address; City; State; Zip Code 3617 Old Post Ct, San Angelo, TX 76904	7 Amount of contribution (\$) 100.00												
8 Contributor's principal occupation retired		9 Contributor's job title												
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)														
<table border="1"> <tr> <td>Date 11/6/25</td> <td>Full name of contributor John Trevino ..... Contributor address; City; State; Zip Code 809 Knickerbocker Rd Ste C, San Angelo, TX 76901</td> <td>Amount of contribution (\$) 100.00</td> </tr> <tr> <td colspan="2">Contributor's principal occupation Insurance sales</td> <td>Contributor's job title owner</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm Premier Insurance</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 11/6/25	Full name of contributor John Trevino ..... Contributor address; City; State; Zip Code 809 Knickerbocker Rd Ste C, San Angelo, TX 76901	Amount of contribution (\$) 100.00	Contributor's principal occupation Insurance sales		Contributor's job title owner	Contributor's employer/law firm Premier Insurance		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 11/6/25	Full name of contributor John Trevino ..... Contributor address; City; State; Zip Code 809 Knickerbocker Rd Ste C, San Angelo, TX 76901	Amount of contribution (\$) 100.00												
Contributor's principal occupation Insurance sales		Contributor's job title owner												
Contributor's employer/law firm Premier Insurance		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 11/6/2025</td> <td>Full name of contributor Todd Kolls ..... Contributor address; City; State; Zip Code 1613 Stonetrail Dr, San Angelo, TX 76904</td> <td>Amount of contribution (\$) 250.00</td> </tr> <tr> <td colspan="2">Contributor's principal occupation real estate agent/Jeweler</td> <td>Contributor's job title agent/owner</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm self</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 11/6/2025	Full name of contributor Todd Kolls ..... Contributor address; City; State; Zip Code 1613 Stonetrail Dr, San Angelo, TX 76904	Amount of contribution (\$) 250.00	Contributor's principal occupation real estate agent/Jeweler		Contributor's job title agent/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)		
Date 11/6/2025	Full name of contributor Todd Kolls ..... Contributor address; City; State; Zip Code 1613 Stonetrail Dr, San Angelo, TX 76904	Amount of contribution (\$) 250.00												
Contributor's principal occupation real estate agent/Jeweler		Contributor's job title agent/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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# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

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2 FILER NAME Leland F. Lacy		3 Filer ID (Ethics Commission Filers)												
4 Date 11/6/25	5 Full name of contributor Caden Tucker ..... 6 Contributor address; City; State; Zip Code 2202 Live Oak St., San Angelo, TX 76901	7 Amount of contribution (\$) 100.00												
8 Contributor's principal occupation Realtor		9 Contributor's job title Realtor												
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any)												
12 If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 11/6/25</td> <td>Full name of contributor Erin Odell ..... Contributor address; City; State; Zip Code 2049 Rocky Point Tr, San Angelo, TX 76903</td> <td>Amount of contribution (\$) 100.00</td> </tr> <tr> <td colspan="2">Contributor's principal occupation business owner</td> <td>Contributor's job title owner</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm self</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 11/6/25	Full name of contributor Erin Odell ..... Contributor address; City; State; Zip Code 2049 Rocky Point Tr, San Angelo, TX 76903	Amount of contribution (\$) 100.00	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)		
Date 11/6/25	Full name of contributor Erin Odell ..... Contributor address; City; State; Zip Code 2049 Rocky Point Tr, San Angelo, TX 76903	Amount of contribution (\$) 100.00												
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)														
<table border="1"> <tr> <td>Date 11/5/2025</td> <td>Full name of contributor David White ..... Contributor address; City; State; Zip Code P.O. Box 62026, San Angelo, TX 76906</td> <td>Amount of contribution (\$) 250.00</td> </tr> <tr> <td colspan="2">Contributor's principal occupation Engineering</td> <td>Contributor's job title Engineer</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm <i>Goodyear</i></td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 11/5/2025	Full name of contributor David White ..... Contributor address; City; State; Zip Code P.O. Box 62026, San Angelo, TX 76906	Amount of contribution (\$) 250.00	Contributor's principal occupation Engineering		Contributor's job title Engineer	Contributor's employer/law firm <i>Goodyear</i>		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 11/5/2025	Full name of contributor David White ..... Contributor address; City; State; Zip Code P.O. Box 62026, San Angelo, TX 76906	Amount of contribution (\$) 250.00												
Contributor's principal occupation Engineering		Contributor's job title Engineer												
Contributor's employer/law firm <i>Goodyear</i>		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														

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# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

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2 FILER NAME Leland F. Lacy		3 Filer ID (Ethics Commission Filers)
4 Date 11/19/25	5 Full name of contributor Tiffany Prince ..... 6 Contributor address; City; State; Zip Code 5720 King Forest, McKinney, TX 75071	7 Amount of contribution (\$) 1000.00
8 Contributor's principal occupation Real Estate consulting		9 Contributor's job title Executive Vice President
10 Contributor's employer/law firm Jones Lang LaSalle		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/21/25 ..... Full name of contributor Lance Lacy ..... Contributor address; City; State; Zip Code 5118 Knickerbocker Rd, San Angelo, TX 76904		Amount of contribution (\$) 500.00
Contributor's principal occupation Real Estate		Contributor's job title owner/Broker
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 11/21/2025 ..... Full name of contributor Mike Halfmann ..... Contributor address; City; State; Zip Code 1002 CR 234, Rowena, TX 76875		Amount of contribution (\$) 50.00
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)		

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# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

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2 FILER NAME Leland F. Lacy		3 Filer ID (Ethics Commission Filers)
4 Date 11/28/25	5 Full name of contributor Tommy Jackson	6 Contributor address; City; State; Zip Code 133 W Concho Ave., Ste 103, San Angelo, TX 76903
7 Amount of contribution (\$) 500.00		7 Amount of contribution (\$) 500.00
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Law Office of Tommy Jackson		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/1/25		Full name of contributor Brett Schniers
Contributor address; City; State; Zip Code P.O. Box 360, Wall, TX 76957		Amount of contribution (\$) 250.00
Contributor's principal occupation Farming		Contributor's job title farmer
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 12/1/2025		Full name of contributor Daniel Chapman
Contributor address; City; State; Zip Code <i>3515 Hill Cir. Colorado Springs, CO 80904</i>		Amount of contribution (\$) 200.00
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)		

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# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

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2 FILER NAME Leland F. Lacy		3 Filer ID (Ethics Commission Filers)
4 Date 12/3/25	5 Full name of contributor Jerry Sefcik ..... 6 Contributor address; City; State; Zip Code 402 W Highland Blvd, San Angelo, TX 76903	7 Amount of contribution (\$) 100.00
8 Contributor's principal occupation Real Estate		9 Contributor's job title Broker/owner
10 Contributor's employer/law firm Sefcik-Jennings Investments		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/16/25 ..... Full name of contributor Laura Lacy ..... Contributor address; City; State; Zip Code 516 W Twohig Ave, San Angelo, TX 76903		Amount of contribution (\$) 1.00
Contributor's principal occupation Real Estate		Contributor's job title Broker/appraiser
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 12/5/2025 ..... Full name of contributor Larry Patterson ..... Contributor address; City; State; Zip Code 5170 Ironwood Ct., San Angelo, TX 76904		Amount of contribution (\$) 250.00
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)		

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2 FILER NAME Leland F. Lacy		3 Filer ID (Ethics Commission Filers)
4 Date 12/10/25	5 Full name of contributor Devin Koehler ..... 6 Contributor address; City; State; Zip Code 2058 Rocky Point Trl, San Angelo, TX 76905	7 Amount of contribution (\$) 100.00
8 Contributor's principal occupation Executive		9 Contributor's job title Scouting Executive
10 Contributor's employer/law firm Scouting US		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/11/25 Full name of contributor Austin Mathis ..... Contributor address; City; State; Zip Code P.O. Box 3836, San Angelo, TX 76902		Amount of contribution (\$) 1,000.00
Contributor's principal occupation Attorney		Contributor's job title Attorney/owner
Contributor's employer/law firm Mathis Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/16/2025 Full name of contributor Wilson Woods ..... Contributor address; City; State; Zip Code 3912 Thistle Lane, Fort Worth, TX 76109		Amount of contribution (\$) 500.00
Contributor's principal occupation Attorney		Contributor's job title In house Counsel
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)		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> <b>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</b>		

# 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>22 19</i>												
2 FILER NAME Leland F. Lacy		3 Filer ID (Ethics Commission Filers)												
4 Date 12/15/25	5 Full name of contributor George McCrea ..... 6 Contributor address; City; State; Zip Code 2639 Vista del Arroyo, San Angelo, TX 76904	7 Amount of contribution (\$) 500.00												
8 Contributor's principal occupation retired attorney		9 Contributor's job title												
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any)												
12 If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 12/20/25</td> <td>Full name of contributor Mike Baird ..... Contributor address; City; State; Zip Code 13 E Harris Ave., San Angelo, TX 76903</td> <td>Amount of contribution (\$) 500.00</td> </tr> <tr> <td colspan="2">Contributor's principal occupation Attorney</td> <td>Contributor's job title Attorney/owner</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm Michael Baird Law Firm</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 12/20/25	Full name of contributor Mike Baird ..... Contributor address; City; State; Zip Code 13 E Harris Ave., San Angelo, TX 76903	Amount of contribution (\$) 500.00	Contributor's principal occupation Attorney		Contributor's job title Attorney/owner	Contributor's employer/law firm Michael Baird Law Firm		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 12/20/25	Full name of contributor Mike Baird ..... Contributor address; City; State; Zip Code 13 E Harris Ave., San Angelo, TX 76903	Amount of contribution (\$) 500.00												
Contributor's principal occupation Attorney		Contributor's job title Attorney/owner												
Contributor's employer/law firm Michael Baird Law Firm		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 12/22/2025</td> <td>Full name of contributor Sylvia Barrera ..... Contributor address; City; State; Zip Code 255 Loch Ness Rd., San Angelo, TX 76903</td> <td>Amount of contribution (\$) 150.00</td> </tr> <tr> <td colspan="2">Contributor's principal occupation office manager</td> <td>Contributor's job title office Manager</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm Dr. Day's office</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 12/22/2025	Full name of contributor Sylvia Barrera ..... Contributor address; City; State; Zip Code 255 Loch Ness Rd., San Angelo, TX 76903	Amount of contribution (\$) 150.00	Contributor's principal occupation office manager		Contributor's job title office Manager	Contributor's employer/law firm Dr. Day's office		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 12/22/2025	Full name of contributor Sylvia Barrera ..... Contributor address; City; State; Zip Code 255 Loch Ness Rd., San Angelo, TX 76903	Amount of contribution (\$) 150.00												
Contributor's principal occupation office manager		Contributor's job title office Manager												
Contributor's employer/law firm Dr. Day's office		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														
<p style="text-align: center;"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>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: <i>22 19</i>
2 FILER NAME Leland F. Lacy		3 Filer ID (Ethics Commission Filers)
4 Date 12/22/25	5 Full name of contributor Christine Brininstool ..... 6 Contributor address; City; State; Zip Code 1523 Butler Dr, San Angelo, TX 76904	7 Amount of contribution (\$) 1000.00
8 Contributor's principal occupation business owner		9 Contributor's job title
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/27/25 ..... Full name of contributor Colby Lacy ..... Contributor address; City; State; Zip Code P.O. Box 2 Water Valley, TX 76958		Amount of contribution (\$) 200.00
Contributor's principal occupation business owner		Contributor's job title President/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)		
Date 12/29/2025 ..... Full name of contributor Luke Uherik ..... Contributor address; City; State; Zip Code 1322 Mackenzie St., San Angelo, TX 76903		Amount of contribution (\$) 200.00
Contributor's principal occupation Banking		Contributor's job title Vice President
Contributor's employer/law firm First Financial Bank		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> <b>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</b>		



## 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 due on January 15, 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**

\_\_\_\_\_  
Signature of Filer

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 Leland Lacy, and my date of birth is 09/02/1980.  
My address is 516 W Twohig Avenue (street) San Angelo (city) TX (state) 76903 (zip code) USA (country).  
Executed in Tom Green County, State of Texas, on the 21st day of January, 2026.  
(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**