



# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

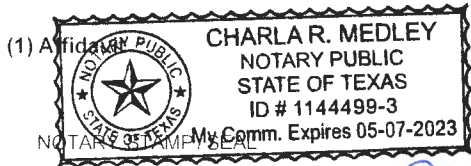
FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME Daniel, Thomas		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 650.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 12,301.96
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

*[Handwritten Signature]*  
Signature of Candidate or Officeholder

Please complete either option below:



(1) Affidavit Sworn to and subscribed before me by Charla R. Medley this the 22<sup>nd</sup> day of February.

2022 to certify which, witness my hand and seal of office.  
Charla R. Medley Signature of officer administering oath  
Charla R. Medley Printed name of officer administering oath  
Admin Svc Mgr Title of officer administering oath

OR

(2) Unsworn Declaration

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_  
 My address is \_\_\_\_\_  
 (street) (city) (state) (zip code) (country)  
 Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
 (month) (year)  
 \_\_\_\_\_  
 Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME <b>Daniel, Thomas</b>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	■ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 650.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **2**

2 FILER NAME  
Daniel, Thomas

3 Filer ID (Ethics Commission Filers)

4 Date  
01/24/2022

5 Full name of contributor out-of-state PAC ID# \_\_\_\_\_  
Jim Berkshire

7 Amount of contribution (\$)

6 Contributor address: City: State: Zip Code  
5214 N. Bentwood San Angelo, Tx 76904

**100.00**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
01/24/2022

Full name of contributor out-of-state PAC ID# \_\_\_\_\_  
Phil Fox

Amount of contribution (\$)

Contributor address: City: State: Zip Code  
10804 W. Widrose Ave. Las Vegas, NV 89144

**100.00**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
01/24/2022

Full name of contributor out-of-state PAC ID# \_\_\_\_\_  
Addie Goodwin

Amount of contribution (\$)

Contributor address: City: State: Zip Code  
613 Sherwood Way San Angelo, Tx 76901

**100.00**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
01/25/2022

Full name of contributor out-of-state PAC ID# \_\_\_\_\_  
Elton Muerer

Amount of contribution (\$)

Contributor address: City: State: Zip Code  
4717 S. Jackson St. #144 San Angelo, Tx 76903

**200.00**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Daniel, Thomas

3 Filer ID (Ethics Commission Filers)

4 Date

01/27/2022

5 Full name of contributor

Dr. Jack Lewright

out-of-state PAC ID#

7 Amount of contribution (\$)

100.00

6 Contributor address;

City:

State:

Zip Code

2520 Southland San Angelo, Tx 76904

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

02/02/2022

Full name of contributor

Gene Gully

out-of-state PAC ID#

Amount of contribution (\$)

50.00

Contributor address;

City:

State:

Zip Code

PO Box 360 Eola, Tx 76937

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/11/2022

Full name of contributor

Lisa Foster

out-of-state PAC ID#

Amount of contribution (\$)

100.00

Contributor address;

City:

State:

Zip Code

2922 Red Bluff Circle San Angelo, Tx 76904

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/11/2022

Full name of contributor

Henry Dusek

out-of-state PAC ID#

Amount of contribution (\$)

100.00

Contributor address;

City:

State:

Zip Code

2478 Fairview School Road San Angelo, Tx 76904

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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