CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

The C/OH Instruction (Guide explains how to complete	this form.	Filer ID (Ethics Commis 00069797	sion Filers)	2 Total pages fi	led: 5
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR F	IRST		MI	OFFICE I	JSE ONLY
NAME	Mr. E	rnest P.			Date Received	
					ELECTRONICA	ALLY FILED
	NICKNAME L	AST		SUFFIX	01/13/2024	
		homas				
4 CANDIDATE /	ADDRESS / PO BOX; APT / S	LIITE #: CITY	/·	ZIP CODE	Date Hand-delivered o	r Date Postmarked
OFFICEHOLDER	200 Sunset	OII = #, CII	١,	ZIF CODE		
MAILING ADDRESS	200 Suriset				Receipt #	Amount
Change of Address	Llano, TX 78643				Date Processed	
					Date 1 100c35c4	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR FI	RST		MI	<u>.</u>	
TREASURER NAME	Mrs. M	argaret S.				
INAIVIL						
	NICKNAME LA	AST		SUFFIX		
	Th	nomas				
6 CAMPAIGN	STREET ADDRESS (NO PO BO	X PLEASE);	APT	/ SUITE #; CITY;	STA	ATE; ZIP CODE
TREASURER ADDRESS	200 Sunset					
(Residence or Business)						
(Llano, TX 78643					
7 CAMPAIGN	AREA CODE PHONE	NUMBER E	XTENSION			
TREASURER	(409) 673-0434	TOMBER E	XI ENGIOTI			
PHONE	(100) 010 0101					
8 REPORT						
TYPE	X January 15	30th day before	election	Runoff	15th day after ca appointment (offi	
	July 15	8th day before e	lection	Exceeded modified	Final Report (Atta	
				reporting limit		
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	07/01/2023	TH	ROUGH	12/31/202	23	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	XPr	imary	Runoff	Other	
	03/05/2024	Ge	eneral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT		
				District Attorney	District 33rd/424	th
		GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 5

13 C / OH NAME	Thomas, Ernest P. (N	lr.)	14 Filer ID 00069797	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expend These expenditures may have been made witho officeholders are required to report this informa	ut the candidate's or offic	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
⊔ °	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDR	ESS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER TI ES OF LOANS, OR CONTRIBUTIONS MADE E		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOA	NS)	\$ 0.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 5,015.65
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE RIOD	LAST DAY OF THE	\$ 0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AT TING PERIOD	AS OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT		I swear, or affirm, under pen true and correct and include: under Title 15, Election Code	all information required	
		Mı	. Ernest P. Thomas	
		Signature	of Candidate or Officeho	lder
AFFIX NO	TARY STAMP / SEAL ABO	OVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
of	, 20, to ce	ertify which, witness my hand and seal of office.		
Signature of office	cer administering	Printed name of officer administering	Title of office	er administering oath

SUBTOTALS - C/OH

			3 of 5					
	18 FILER NAME 19 Filer ID Thomas, Ernest P. (Mr.) 00069797							
20 SCHEDULE NAME OF S			SUBTOTAL AMOUNT					
1.	1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS							
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$					
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$					
4.	SCHEDULE E: LOANS		\$					
5.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$					
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$					
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$					
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 3,765.65					
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$ 1,250.00					
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$					
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$					
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS IT TO FILER	RETURNED	\$					

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 4/5 Thomas, Ernest P. (Mr.) 00069797 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 12/18/2023 **Designer Graphics** Amount (\$) Payee address; State; Zip Code \$3,413.12 12404 Hwy 155 South Tyler, TX 75703 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Signs 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 12/12/2023 Thomas Graphics Inc. Amount (\$) Payee address; City; State; Zip Code \$352.53 9501 N IH 35 Austin, TX 78753 TYPE OF Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense **Push Cards** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Total pages Schedule G: Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 5/5 Thomas, Ernest P. (Mr.) 00069797 Date Payee name 11/20/2023 Republican Party of Texas 6 Amount (\$) Payee address; City; State; Zip Code \$1,250.00 807 Brazos St. Reimbursement from political contributions intended Х Austin, TX 78701 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. 8 OF Check if Austin, TX, officeholder living expense Fees **EXPENDITURE** Filing Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

The C/OH Instruction (Guide explains how to comp	lete this form.	1 Filer ID (Ethics Commi 00069797		2 Total pages filed: 7	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE USE ONLY	,
OFFICEHOLDER NAME	Mr.	Ernest P.			Date Received	
					ELECTRONICALLY FILED)
	NICKNAME	LAST		SUFFIX	02/05/2024	
	Perry	Thomas				
4 CANDIDATE /	ADDRESS / PO BOX; APT			ZIP CODE	Date Hand-delivered or Date Postmarke	d
OFFICEHOLDER MAILING ADDRESS	200 Sunset				Receipt # Amount	
Change of Address	Llano, TX 78643					
	Elano, 177 70040				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER NAME	Mrs.	Margaret S.				
	NICKNAME	LAST		SUFFIX		
		Thomas				
6 CAMPAIGN	STREET ADDRESS (NO PO	D BOX PLEASE);	AP [.]	T / SUITE #; CITY;	STATE; ZIP	CODE
TREASURER ADDRESS	200 Sunset					
(Residence or Business)	Llano, TX 78643					
7 CAMPAIGN	AREA CODE PHO	NE NUMBER E	EXTENSION			
TREASURER PHONE	(409) 673-0434					
8 REPORT TYPE	January 15	X 30th day before	e election	Runoff	15th day after campaign treasure	er
		_			appointment (officeholder only)	
	July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (Attach C/OH-FR)	
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2024	TH	HROUGH	01/25/202	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	XP	rimary	Runoff	Other	
	03/05/2024	□G	General	Special		
44 055105				Tag office couldn't	((1)	
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT District Attorney	(।r known) (Multi-county) District 33 Llar	no
				Blanco, Burnet, a		,
				•		
		GO T	TO PAGE 2			
		00 1				

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 7

13 C / OH NAME	Thomas, Ernest P. (N	ir.)	14 Filer ID 00069797	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political expend These expenditures may have been made witho officeholders are required to report this informa	ut the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
⊔ °	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME	:	
		COMMITTEE CAMPAIGN TREASURER ADDR	ESS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THES OF LOANS, OR CONTRIBUTIONS MADE E		\$ 0.00
		AL CONTRIBUTIONS L'EDGES, LOANS, OR GUARANTEES OF LOA	NS)	\$ 2,700.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 2,452.84
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE RIOD	LAST DAY OF THE	\$ 2,700.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS A	AS OF THE LAST DAY	\$ 30,100.00
17 AFFIDAVIT		I swear, or affirm, under pen true and correct and includes under Title 15, Election Code	all information required	
		Mı	. Ernest P. Thomas	
		Signature	of Candidate or Officeho	lder
AFFIX NO	TARY STAMP / SEAL ABO	DVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
of	, 20, to ce	rtify which, witness my hand and seal of office.		
Signature of office	cer administering	Printed name of officer administering	Title of office	er administering oath

SUBTOTALS - C/OH

				3 of 7
18 FILER NAM Thomas, E	ME Ernest P. (Mr.)	19 Filer ID 00069797	(Ethics	s Commission Filers)
	E SUBTOTALS SCHEDULE		S	SUBTOTAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	2,700.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4. X	SCHEDULE E: LOANS		\$	30,100.00
5.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$	
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$		
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	102.84
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	2,350.00
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION)NS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 4/7	
2	FILER NAME Thomas, Err	nest P. (Mr.)		3	Filer ID (Ethics Commission 00069797	n Filers)
4	Date 01/11/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$1,000.00
_	Deinainal accu	Austin, TX 78701	O Francisco (Con Instructions			
8	Attorney	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 01/11/2024	Full name of contributor out-of-state PAC (ID#:_ Kiem, Peter Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Dringinal occu	Burnet , TX 78611 pation / Job title (See Instructions)	Employer (See Instructions			
	Attorney	pation / 300 title (See Instructions)	Employer (See manuculons	, 		
	Date 01/12/2024	Full name of contributor			Amount of Contribution (\$)	\$1,000.00
		Marble Falls, TX 78654				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 01/12/2024	Full name of contributor out-of-state PAC (ID#:_ Reinstra, Matt Contributor address; City; State; Zip Code Austin, TX 78709			Amount of Contribution (\$)	\$200.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions)		

	LOANS							SCHEDULE E
	The Instruction	on Guide explains h	ow to co	mplete this f	orm.	1		ges Schedule E: 1 Rpt: 5/7
2	FILER NAME Thomas, Ernest	P. (Mr.)				3	Filer ID 000697	(Ethics Commission Filers)
4	TOTAL OF UN	IITEMIZED LOANS				- 1		\$
5	Date of loan	7 Name of lender		out-of-state PA	C (ID#:)	9 Loan Amount (\$)
6	01/17/2024 Is lender a financial institution?	Commercial Nation 8 Lender address;	al Bank City;	State;	Zip Code			\$30,000.00 10 Interest Rate
	Yes	Brady, TX 76825						11 Maturity Date 01/17/2025
12	Principal occupation	on / Job title (See Instruction	ons)		13 Employer (See Instruction	ons)		
14	Description of Coll X None	ateral			15 Check if personal funds	were	deposited	into political account (See Instructions)
16	GUARANTOR INFORMATION	17 Name of guarantor						19 Amount Guaranteed (\$)
	X not applicable	18 Guarantor address;	City;	State;	Zip Code			
20	Principal occupation	on			21 Employer (See Instruction	ons)		I
	Date of loan	Name of lender		out-of-state PA	C (ID#:)	Loan Amount (\$)
	01/11/2024	Thomas, Ernest						\$100.00
	Is lender a financial institution?	Lender address;	City;	State;	Zip Code			Interest Rate
	No	Llano, TX 78643						Maturity Date
	Principal occupation	I on / Job title (See Instruction	ons)		Employer (See Instruction	ons)		<u> </u>
	Description of Coll X None	ateral			Check if personal funds	were	deposited	into political account (See Instructions)
	GUARANTOR INFORMATION	Name of guarantor						Amount Guaranteed (\$)
	X not applicable	Guarantor address;	City;	State;	Zip Code			
	Principal occupation	on			Employer (See Instruction	ons)		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By	- Gift/Awards	/Memorials Expense Pr	rinting Expense Tr	avel in District avel Out of District
	Candidate/Officeholder/Political	· ·	ces Sa ruction Guide explains how		THER (enter a category not listed above)
1	Total pages Schedule F4:		•		3 Filer ID (Ethics Commission Filers)
	Sch: 1/1 Rpt: 6/7	Thomas, Ernest P.	(Mr.)		00069797
4	CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED	
	ISSUER	Education	First FCU	EXPENDITURES CHARGED TO A CREDIT	\$
				CARD	
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	Paid
		\$102.84	01/21/2024		
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code
		Gorjana		1221 S. Congress Ave.	
		,		Augtin TV 70704	
8	PURPOSE OF	(a) Category		Austin, TX 78704 (b) Description	
ľ	EXPENDITURE	(See Categories listed at the top	of this schedule)		nentioned my campaign name.
	X Political	Advertising Expense			,
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin TX	officeholder living expense
9	Complete ONLY if direct	Candidate/Officeholder		ce sought	Office held
	xpenditure to benefit C/OH				

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Total pages Schedule G: Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 7/7 Thomas, Ernest P. (Mr.) 00069797 Date Payee name 01/18/2024 Scruggs, Kevin 6 Amount (\$) Payee address; City; State; Zip Code 19322 Red Canyon Ln. \$2,350.00 Reimbursement from political contributions intended Х Tomball, TX 77377 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. 8 OF Check if Austin, TX, officeholder living expense Consulting Expense **EXPENDITURE** Political Consulting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

The C/OH Instruction (Guide explains how to co	omplete this form.	1 Filer ID (Ethics Comm 00069797	· ·	2 Total pages filed:	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE USE ONLY	,
OFFICEHOLDER NAME	Mr.	Ernest P.			Date Received	
10000					ELECTRONICALLY FILED)
		······································		OUEEIV	02/26/2024	,
	NICKNAME	LAST		SUFFIX	0212012024	
	Perry	Thomas				
4 CANDIDATE /	ADDRESS / PO BOX;	APT / SUITE #; CIT	ΓY;	ZIP CODE	Date Hand-delivered or Date Postmarke	ed
OFFICEHOLDER MAILING	200 Sunset					
ADDRESS					Receipt # Amount	
Change of Address	Llano, TX 78643					
	,				Date Processed	
					Date Imaged	
					Date illiageu	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER	Mrs.	Margaret S.		141.		
NAME	IVII 3.	Margaret C.				
	NUCKNIA NAE	LACT		CULLIA		
	NICKNAME	LAST Thomas		SUFFIX		
		HUIHas				
2 CANADAIGNI	CTREET ADDRESS (NV	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		T / OLUTE # OLTY		2005
6 CAMPAIGN TREASURER	STREET ADDRESS (NO) PO BOX PLEASE);	AP	T / SUITE #; CITY;	STATE; ZIP	CODE
ADDRESS	200 Sunset					
(Residence or Business)						
	Llano, TX 78643					
7 CAMPAIGN	AREA CODE F	PHONE NUMBER	EXTENSION			
TREASURER	(409) 673-0434	TIONE NOMBER	LATERCION			
PHONE	(403) 073-043-					
8 REPORT	+					
TYPE	January 15	30th day before	e election	Runoff	15th day after campaign treasure	er
					appointment (officeholder only)	
	July 15	X 8th day before	election	Exceeded modified reporting limit	Final Report (Attach C/OH-FR)	
<u> </u>	<u> </u>					
9 PERIOD COVERED	1	ear		Month Day	Year	
COVENED	01/26/2024	11	HROUGH	02/24/2024	4	
10 ELECTION	ELECTION DAT	I —	- •	ELECTION TYPE	□ out.	
	Month Day Y	ear X F	Primary	Runoff	Other	
	03/03/2024		General	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
					(Multi-county) District 33 Lla	no,
				Blanco, Burnet, a	ınd San_saba	
		co.	TO PAGE 2			
		GO	IO PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 9

13 C / OH NAME	Thomas, Ernest P. (N	ir.)	14 Filer ID 00069797	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political expend These expenditures may have been made witho officeholders are required to report this informa	ut the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
⊔ °	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME	<u> </u>	
		COMMITTEE CAMPAIGN TREASURER ADDR	ESS	
				1
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THES OF LOANS, OR CONTRIBUTIONS MADE E		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOA	NS)	\$ 4,300.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 12,267.54
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE RIOD	LAST DAY OF THE	\$ 24,832.46
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS A	AS OF THE LAST DAY	\$ 30,100.00
17 AFFIDAVIT		I swear, or affirm, under pen true and correct and includes under Title 15, Election Code	all information required	
		Mı	. Ernest P. Thomas	
		Signature	of Candidate or Officeho	lder
AFFIX NO	TARY STAMP / SEAL ABO	OVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
of	, 20, to ce	rtify which, witness my hand and seal of office.		
Signature of office	cer administering	Printed name of officer administering	Title of office	r administering oath

SUBTOTALS - C/OH

					3 of 9
l	LER NAN nomas, I	ME Ernest P. (Mr.)	19 Filer ID 00069797	(Ethics Co	ommission Filers)
I	ME OF	SUB ⁻	TOTAL AMOUNT		
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	4,300.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	3	\$	12,267.54
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10	. 🔲	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11	· 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12	. 🔲	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBU		SCHEDULE A1				
	The Instru	ction Guide explains how to complete t	1	Total pages Schedule A1: Sch: 1/2 Rpt: 4/9				
2	FILER NAME Thomas, Err	est P. (Mr.)	1	Filer ID (Ethics Commission 00069797	n Filers)			
4	Date 02/16/2024	Adams, Tommy	out-of-state PAC (ID#:) 7			\$1,000.00		
_		Brownwood, TX 76801	10 - 10 - 10 - 11	<u> </u>				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)				
	Date Full name of contributor out-of-state PAC (ID#:) 01/31/2024 Brown, Trey Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$200.00		
	Deinsinal assu	Burnet, TX 78611	Faralous (Coo Instructions					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	S)				
	Date Full name of contributor out-of-state PAC (ID#:) Cofer, Richard Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$1,000.00		
		Austin, TX 78703						
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)				
	Date Full name of contributor out-of-state PAC (ID#:) 02/01/2024 Dollinger, Kenneth Contributor address; City; State; Zip Code Beaumont, TX 77706			Amount of Contribution (\$)	\$250.00			
	Principal occu	oation / Job title (See Instructions)	Employer (See Instructions	s)				
	Date 01/31/2024	Full name of contributor out-of-state PAC Duggan, Elizabeth Contributor address; City; State; Zip Code Bastrop, TX 78602	C (ID#:)		Amount of Contribution (\$)	\$100.00		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)				

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDU	ILE A1
	The Instru	ction Guide explains how to complete this	1	Total pages Schedule A1: Sch: 2/2 Rpt: 5/9		
2	FILER NAME Thomas, Err		3	Filer ID (Ethics Commiss 00069797	sion Filers)	
4	Date 02/09/2024	5 Full name of contributor out-of-state PAC (IE Nash, Steve 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$500.00
8	Principal occu	Marble Falls, TX 78654 upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 01/31/2024	Full name of contributor out-of-state PAC (IE Puryear, Geoffrey Contributor address; City; State; Zip Code Lubbock, TX 79401			Amount of Contribution (\$)	\$1,000.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> S)		
	Date 01/29/2024	Full name of contributor out-of-state PAC (IE Stewart, Judye Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu	Llano, TX 78643 upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> S)		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
	Sch: 1/4 Rpt: 6/9	Thomas, Ernest P. (Mr.) 00069797	
4	Date	5 Payee name	_
	02/13/2024	Blanco County News	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$575.00	714 4th St.	
		Blanco, TX 78606	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
l	EXPENDITURE	Check if Austin, TX, officeholder living expense	
l		Newspaper Advertisements	
Ļ	0 1: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0:		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
┡	·		_
	Date	Payee name	
L	01/29/2024	Designer Graphics	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,048.11	12404 Hwy 155 S	
l			
		Tyler, TX 75703	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
l		Signs	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
F	Date	Payee name	-
	02/14/2024	Horsehoe Bay Beacon	
⊢	Amount (\$)	Payee address; City; State; Zip Code	_
	\$320.50	6400 W. FM 2147	
		Horseshoe Bay, TX 78657	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF	Advertising Expense Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
l	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Newspaper Advertisement	
L			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experience to beliefit 6/01	·	

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District

Candidate/Officeholder/Political Committee Credit Card Payment		Committee Legal	Services Instruction Guide explain		ages/	Contract Labor		OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 2/4 Rpt: 7/9	Thomas, Ernest	P. (Mr.)					00069797	
4	Date	5 Payee name							
	02/14/2024	Llano News							
6	Amount (\$)	7 Payee address;	•	te; Zip Co	de				
	\$289.00	500 W. Young S	St.						
		Llano, TX 78643	3	<u> </u>					
8	PURPOSE OF		egories listed at the top of this	schedule)	(b)	Description			
	EXPENDITURE	Advertising Exp	ense			<u> </u>		de of Texas. Com officeholder living	
						Newspaper A			Схропос
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeho	lder name	Office sou	ght			Office he	eld
	experientare to benefit Great								
	Date	Payee name							
	02/12/2024	San Saba News	i						
	Amount (\$)	Payee address;	City; Sta	te; Zip Co	de				
	\$230.00	PO Box 815							
		San Saba, TX 7	6877						
	PURPOSE	(a) Category (See Cat	egories listed at the top of this	schedule)	(b)	Description			
	OF EXPENDITURE	Advertising Exp	ense					de of Texas. Com	
						Newspaper A		officeholder living ertisement	expense
						. to tropapo.		010011.011.	
	Complete ONLY if direct	Candidate/Officeho	lder name	Office sou	ght			Office he	eld
	expenditure to benefit C/OI	1							
	Date	Payee name							
	01/26/2024	Suarez, Tom							
	Amount (\$)	Payee address;	City; Sta	te; Zip Cod	de				
	\$400.00	500 East Luce							
		Llano, TX 78643	3						
	PURPOSE	(a) Category (See Cat	egories listed at the top of this	schedule)	(b)	Description			
	OF EXPENDITURE	Advertising Exp	ense			ш		de of Texas. Com	'
	-					Check if Austin, Internet Adve		officeholder living	expense
								-CITICITE	
_	Complete ONLY if direct	Candidate/Officeho	lder name	Office sou	ght			Office he	eld
	expenditure to benefit C/O				•				

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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 Highlander/Burnet Bulletin Amount (\$) \$280.00 The Highlander/Burnet Bulletin The Highlander Cir. State; Zip Code The Advertise City: The Highlander Cir. Marble Falls, TX 78654 The Highlander Cir. Marble Falls, TX 78654 Th
4 Date 02/13/2024 5 Payee name The Highlander/Burnet Bulletin 6 Amount (\$) 7 Payee address; City; State; Zip Code 304A Highlander Cir. Marble Falls, TX 78654 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense Date O2/08/2024 Thomas Graphics Inc. Amount (\$) Payee address; City; State; Zip Code Check if aveat outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder Iving expense Newspaper Advertisement Date O2/08/2024 Thomas Graphics Inc. Purpose OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense Complete ONLY if direct OF Categories listed at the top of this schedule) Advertising Expense Complete ONLY if direct Check if Austin, TX, officeholder Iving expense Maillers Complete ONLY if direct Check if Austin, TX, officeholder Iving expense Maillers Date OPPOSE Categories listed at the top of this schedule) Advertising Expense Complete ONLY if direct Check if Austin, TX, officeholder Iving expense Maillers Date OPPOSE Category (See Categories listed at the top of this schedule) Advertising Expense Date OPPOSE Category (See Categories listed at the top of this schedule) Advertising Expense Date OPPOSE Category (See Categories listed at the top of this schedule) Advertising Expense Date OPPOSE Category (See Categories listed at the top of this schedule) Advertising Expense Date OPPOSE Category (See Categories listed at the top of this schedule) Advertising Expense Date OPPOSE Category (See Categories listed at the top of this schedule) Advertising Expense
The Highlander/Burnet Bulletin 7 Payee address; City; State; Zip Code 304A Highlander Cir. Marble Falls, TX 78654 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder Iving expense Newspaper Advertisement Office sought Office held Date O2/08/2024 Amount (s) Payee name Thomas Graphics Inc. Amount (s) State; Zip Code PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if Austin, TX, officeholder Iving expense Newspaper Advertisement Office held Office held Date OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense Office Sought Office held Office held Office held Office held Date ONLY if direct expenditure to benefit C/OH Date ONLY if direct expenditure to benefit C/OH Date ONLY if direct expenditure to benefit C/OH Date O2/23/2024 Payee name Thomas Graphics Inc.
The Highlander/Burnet Bulletin
\$280.00 304A Highlander Cir. Marble Falls, TX 78654 8 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Comp
Marble Falls, TX 78654 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description
Second content of the content of t
Candidate/Officeholder name Candidate Candidate Candidate Candidate Complete Candidate Candidate Candidate Candidate Candidate Complete Candidate Candida
Advertising Expense Candidate/Officeholder name Office sought Office held Payee name Office State; Zip Code \$4,451.80 Purpose Office Categories listed at the top of this schedule) Office in travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Newspaper Advertisement Office held Office held Office held Date ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office sought Office held
Advertising Expense Check if ravel outside of Texas. Complete Schedule T. Check if Austin, Tx. officeholder living expense Newspaper Advertisement Check if Austin, Tx. officeholder living expense Newspaper Advertisement
Purpose OF Expenditure OF Complete ONLY if direct expenditure to benefit C/OH Payee name Office sought Office held Payee address; City; State; Zip Code 9501 N IH 35 Austin, TX 78753 Purpose OF EXPENDITURE Candidate/Officeholder name Office sought Office held
9 Complete ONLY if direct expenditure to benefit C/OH Date 02/08/2024
Date 02/08/2024 Payee name Thomas Graphics Inc. Amount (\$) Payee address; City; State; Zip Code \$4,451.80 Purpose OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mailers Candidate/Officeholder name Office sought Office held Payee name Thomas Graphics Inc.
Date 02/08/2024 Payee name Thomas Graphics Inc. Amount (\$) Payee address; City; State; Zip Code \$4,451.80 Purpose OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mailers Candidate/Officeholder name Office sought Office held Payee name Thomas Graphics Inc.
Thomas Graphics Inc. Amount (\$) Payee address; City; State; Zip Code \$4,451.80 Payee address; City; State; Zip Code PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mailers Complete ONLY if direct expenditure to benefit C/OH Date 02/23/2024 Payee name Thomas Graphics Inc.
Thomas Graphics Inc. Amount (\$) Payee address; City; State; Zip Code \$4,451.80 Payee address; City; State; Zip Code PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mailers Complete ONLY if direct expenditure to benefit C/OH Date 02/23/2024 Payee name Thomas Graphics Inc.
Amount (\$) \$4,451.80 Payee address; City; State; Zip Code 9501 N IH 35 Austin, TX 78753 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mailers Complete ONLY if direct expenditure to benefit C/OH Date O2/23/2024 Payee name Thomas Graphics Inc.
\$4,451.80 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mailers Complete ONLY if direct expenditure to benefit C/OH Date 02/23/2024 Payee name Thomas Graphics Inc.
Austin, TX 78753 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mailers Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held Payee name Thomas Graphics Inc.
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mailers Complete ONLY if direct expenditure to benefit C/OH Date 02/23/2024 Payee name Thomas Graphics Inc.
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mailers Complete ONLY if direct expenditure to benefit C/OH Date 02/23/2024 Payee name Thomas Graphics Inc.
OF EXPENDITURE Advertising Expense Advertising Expense Complete ONLY if direct expenditure to benefit C/OH Date 02/23/2024 Payee name Thomas Graphics Inc.
EXPENDITURE Advertising Expense Check if Austin, TX, officeholder living expense Mailers Complete ONLY if direct expenditure to benefit C/OH Date 02/23/2024 Payee name Thomas Graphics Inc.
Complete ONLY if direct expenditure to benefit C/OH Date Payee name Thomas Graphics Inc.
Complete ONLY if direct expenditure to benefit C/OH Date Payee name Thomas Graphics Inc. Office sought Office held Office held Office held Office held
Date Payee name 02/23/2024 Phomas Graphics Inc.
Date Payee name 02/23/2024 Phomas Graphics Inc.
02/23/2024 Thomas Graphics Inc.
02/23/2024 Thomas Graphics Inc.
rayee address, Oity, State, 219 Gode
\$4,451.80 9501 N IH 35
V 1, 152.155
Austin, TX 78753
PURPOSE OF Advertising Expense (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE Advertising Expense Check if Austin, TX, officeholder living expense
Mailers
Complete ONLY if direct Candidate/Officeholder name Office sought Office held
Complete ONLY if direct Candidate/Officeholder name Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee 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)

Credit Card Payment	The Instruction Guide explains how to co	nplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 4/4 Rpt: 9/9	Thomas, Ernest P. (Mr.)	00069797
4 Date	5 Payee name	-
02/14/2024	Tractor Supply	
6 Amount (\$) \$71.33	7 Payee address; City; State; Zip Co. 401 E. HWY 71 Llano, TX 78643	de
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sign Equipment
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sout	ght Office held
Date	Payee name	
02/13/2024	Victory Media	
Amount (\$) \$150.00	Payee address; City; State; Zip Co	de
	Marble Falls, TX 78654	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Online Advertisement
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office soud	ght Office held

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

The C/OH Instruction (Guide explains how to complete	this form.	Filer ID (Ethics Commis 00069797	sion Filers)	2 Total pages file	
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FI	IRST		MI	OFFICE U	JSE ONLY
NAME	Mr. E	rnest P.			Date Received ELECTRONICA	ALLY FILED
		AST		SUFFIX	07/12/2024	
	Perry Ti	homas				
4 CANDIDATE /	ADDRESS / PO BOX; APT / SI	UITE#; CITY	' ·	ZIP CODE	Date Hand-delivered or	Date Postmarked
OFFICEHOLDER MAILING ADDRESS	200 Sunset				Receipt #	Amount
Change of Address	Llano, TX 78643					
	Elano, 177 700-5				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR FIF	RST		MI	-	
TREASURER NAME	Mrs. Ma	argaret S.				
	NICKNAME LA	 \ST		SUFFIX		
		nomas		33.1		
C CAMPAICN	CTREET APPRECS (NO DO DO	V DI EACE).	ADT	A CUITE #1 CITY	CTA	TE: 710 CODE
6 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BO 200 Sunset)X PLEASE);	API	/ SUITE #; CITY;	STA	TE; ZIP CODE
(Residence or Business)	Llano, TX 78643					
7 CAMPAIGN	AREA CODE PHONE N	NUMBER E	XTENSION			
TREASURER PHONE	(409) 673-0434					
8 REPORT TYPE	January 15	30th day before	election	Runoff	15th day after can	
		Oth day bafasa a			appointment (offic	
	X July 15	8th day before e		Exceeded modified reporting limit	Final Report (Atta	ch C/OH-FR)
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	02/25/2024	THI	ROUGH	06/30/202	24	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	Pri	mary	Runoff	Other	
	11/05/2024	XGe	eneral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
III OFFICE	OFFICE HELD (if any)				District 33rd/424t	h
				District / titorney	D13(110) 001 (4) 42 40	••
		GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 7

13 C / OH NAME	(Ethics Commission Filers)								
15 NOTICE FROM POLITICAL COMMITTEE(S)	ommittees to support the sholder's knowledge or tice of such expenditures.								
Additional Pages	COMMITTEE TYPE COMMITTEE NAME								
Ш	GENERAL								
	COMMITTEE ADDRESS								
	SPECIFIC								
		COMMITTEE CAMPAIGN TREASURER NAME							
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS						
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00					
	\$ 750.00								
EXPENDITURE TOTALS	\$ 0.00								
	\$ 3,194.50								
CONTRIBUTION BALANCE	NCE REPORTING PERIOD								
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 30,100.00					
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.							
		Mr. E	Ernest P. Thomas						
		Signature of	Candidate or Officehol	der					
AFFIX NO	TARY STAMP / SEAL AB	DVE							
Sworn to and subs	cribed before me, by the s	aid	, this the	day					
		ertify which, witness my hand and seal of office.							
Signature of office	cer administering	Printed name of officer administering	Title of officer	r administering oath					

SUBTOTALS - C/OH

			C	JVLK .	3 of 7
l	ER NAN omas, I	(Ethics C	ommission Filers)		
I	HEDULI ME OF	SUE	BTOTAL AMOUNT		
1.	X	\$	750.00		
2.		\$			
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		\$			
5.	X	\$	2,444.50		
6.		\$			
7.		\$			
8.		\$			
9.	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	750.00
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS IT TO FILER	RETURNED	\$	

	MONETARY POLITICAL CONTRIBUTIONS		SCHEDUL	E A1
	The Instruction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 4/7	
2	FILER NAME Thomas, Ernest P. (Mr.)	3	Filer ID (Ethics Commission 00069797	n Filers)
4	Date 03/08/2024 5 Full name of contributor out-of-state PAC (ID#:) Adams, Tommy 6 Contributor address; City; State; Zip Code) 7	Amount of Contribution (\$)	\$500.00
	Brownwood, TX 76801			
8	Principal occupation / Job title (See Instructions) 4ttorney 9 Employer (See Instructions)	tions)		
	Date Full name of contributor out-of-state PAC (ID#:) 03/27/2024 Domingue, Mark)	Amount of Contribution (\$)	\$250.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78738 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions)	tions)		

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		mmittee	Gift/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.			Travel Out of OTHER (ente	District r a category not	listed above)				
1	Total pages Schedule F1:	2	EII ED NIANAT						3	Filer ID	(Ethics C	ommission Filers)
•	Sch: 1/2 Rpt: 5/7	 		nest P. (Mr.)					٥	0006979	`	omminasion Filetaj
4	Date	5		. ,					_			
•	02/27/2024		Payee name	nty News								
		$ldsymbol{ldsymbol{ldsymbol{eta}}}$	Blanco Cou									
6	Amount (\$) \$575.00	7	Payee addre	ss; City;	State	e; Zip Co	de					
			Blanco, TX	78606								
8	PURPOSE	(a)	Category (Se	ee Categories listed	at the top of this scl	hedule)	(b)	Description				
	OF EXPENDITURE		Advertising	Expense				=			omplete Schedu	lle T.
								Check if Austin		, officeholder liv	ring expense	
								Newspaper A	ΛÜ			
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	ceholder name		Office sou	ght			Office	held	
	Date		Payee name									
	02/28/2024		Horsehoe B	ay Beacon								
	Amount (\$)		Payee addre	ss; City;	State	; Zip Co	de					
	\$320.50		6400 W. FN	1 2147								
	,											
				Bay, TX 7865								
	PURPOSE OF	(a)		ee Categories listed	at the top of this scl	hedule)	(b)	Description				
	EXPENDITURE		Advertising	Expense				=			omplete Schedu	lle T.
								Check if Austin		, onicendaer IIV	my expense	
								Newspaper A	ıu			
\vdash	Complete ONLY if direct	<u> </u>	Candidata/Off:	ooholder ners		Office as:	abt			Office	hold	
	Complete ONLY if direct expenditure to benefit C/O		Januiuale/Oπi	ceholder name		Office sou	ynı			Office	<u></u>	
	Date		Payee name									
	02/28/2024		Llano News									
	Amount (\$)		Payee addre	ss; City;	State	e; Zip Co	de					
	\$289.00		500 W. You			•						
	,======			J								
			Llano, TX 7	8643								
	PURPOSE	(a)		ee Categories listed	at the top of this scl	hedule)	(b)	Description				
	OF EXPENDITURE		Advertising	Expense							omplete Schedu	lle T.
								Check if Austin		, officeholder liv	ring expense	
								Newspaper A	ıu			
	0 1. 5		- p. r			0	_					
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	ceholder name	(Office sou	ght			Office	held	
	experience to beliefft C/Of											
	· · · · ·											

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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)

	Credit Card Payment	The Instru	ction Guide explains how to o	omple	lete this form.
1	Total pages Schedule F1:	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Sch: 2/2 Rpt: 6/7	Thomas, Ernest P. (N	٧r.)		00069797
4	Date	Payee name			
	02/26/2024	San Saba News			
6	Amount (\$) \$230.00	Payee address; City PO Box 815	y; State; Zip C	code	
	4200.00	10 20% 010			
	1	San Saba, TX 76877			
8	PURPOSE	Category (See Categories	listed at the top of this schedule)	(b)) Description
	OF EXPENDITURE	Advertising Expense			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	I				Newspaper Ad
	l				• •
9	Complete ONLY if direct	Candidate/Officeholder n	ame Office so	ought	t Office held
	expenditure to benefit C/OI				
	Date	Payee name			
	02/26/2024	The Highlander/Burn			
	Amount (\$)	Payee address; City		ode	
	\$280.00	304A Highlander Cir.			
	I	*** *** F-#- TV 700			
		Marble Falls, TX 786		1,,	-
	PURPOSE OF		listed at the top of this schedule)	(b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense			Check if Austin, TX, officeholder living expense
	I				Newspaper Ad
				<u> </u>	
	Complete ONLY if direct expenditure to benefit C/Oł	Candidate/Officeholder n	ame Office so	ought	t Office held
L					
	Date 05/20/2024	Payee name Thomas, Ernest			
_	Amount (\$)	Payee address; City	y; State; Zip C	ode.	
	\$750.00	200 Sunset	y, Sidio, Zip C	Juc	
	- 1				
	l	Llano, TX 78643			
	PURPOSE	Category (See Categories	listed at the top of this schedule)	(b)) Description
	OF EXPENDITURE	Loan Repayment/Re	imbursement		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	l				Reimbursement for Political Expenses from Personal
	I				Funds
	Complete ONLY if direct	Candidate/Officeholder n	ame Office so	ught	t Office held
	expenditure to benefit C/OI				

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 7/7 Thomas, Ernest P. (Mr.) 00069797 Date Payee name 05/20/2024 **Education First Credit Union** 6 Amount (\$) Payee address; City; State; Zip Code \$750.00 7025 Eastex Freeway Reimbursement from political contributions intended Х Beaumont, TX 77706 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. 8 OF Check if Austin, TX, officeholder living expense Credit Card Payment **EXPENDITURE** Credit Card Payment Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

FORM C/OH CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 5 00069797 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Mr. Ernest P. NAME Date Received **ELECTRONICALLY FILED** 01/12/2025 NICKNAME LAST **SUFFIX** Perry **Thomas** CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 200 Sunset MAILING Amount Receipt # **ADDRESS** Change of Address Llano, TX 78643 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Margaret S. NAME NICKNAME LAST **SUFFIX Thomas CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE; **TREASURER** 200 Sunset **ADDRESS** (Residence or Business) Llano, TX 78643

EXTENSION

THROUGH

Primary

X General

Runoff

Exceeded modified reporting limit

Month

ELECTION TYPE

Runoff

Special

Day

12/31/2024

12 OFFICE SOUGHT (if known)

Year

Other

District Attorney (Multi-county) District 33rd/424th

30th day before election

8th day before election

CAMPAIGN

PHONE

REPORT TYPE

PERIOD

10 ELECTION

11 OFFICE

COVERED

TREASURER

AREA CODE

(409) 673-0434

January 15

Day

Day

11/05/2024

OFFICE HELD (if any)

None District 33rd/424th

ELECTION DATE

07/01/2024

Year

Year

July 15

Month

Month

PHONE NUMBER

15th day after campaign treasurer appointment (officeholder only)
Final Report (Attach C/OH-FR)

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 5

13 C / OH NAME	Thomas, Ernest P. (Mr.) 14 Filer ID 00069797		(Ethics Commission Filers)		
15 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.				
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
Ш	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00	
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 5,000.00	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00		
	4. TOTAL POLITIC	CAL EXPENDITURES		\$ 19,511.81	
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA ERIOD	AST DAY OF THE	\$ 8,626.15	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS RTING PERIOD	OF THE LAST DAY	\$ 15,588.19	
17 AFFIDAVIT					
		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.			
		Mr. F	Ernest P. Thomas		
			Candidate or Officehold	der	
AFFIX NO	TARY STAMP / SEAL AB	OVE			
Sworn to and subso	cribed before me, by the s	aid	, this the	day	
		ertify which, witness my hand and seal of office.			
Signature of office	er administering	Printed name of officer administering	Title of officer	administering oath	

SUBTOTALS - C/OH

3 of 5						
18 FILER NAME Thomas, Ernest P. (Mr.) 19 Filer ID (Ethics Commission Filers) 00069797						
20 SCHEDULE S NAME OF SC	SUBTOTAL AN	MOUNT				
1. X S	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	5,000.00		
2. S	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$			
3. S	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$			
4. S	SCHEDULE E: LOANS		\$			
5. X S	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	3	\$	19,511.81		
6. S	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$			
7. S	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$			
8. S	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$			
9. S	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$			
10. S	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$			
11. S	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$			
	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$			

ETARY POLITICAL CONTRIBUT	SCHEDULE A1		
ruction Guide explains how to complete thi	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/5		
ME Ernest P. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069797		
Date 08/22/2024 Solution Full name of contributor Out-of-state PAC (ID#:) Minton, Perry Government Contributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$5,000.00	
Austin, TX 78701			
ccupation / Job title (See Instructions)	9 Employer (See Instructions	s)	
	ruction Guide explains how to complete thing ME Ernest P. (Mr.) 5 Full name of contributor out-of-state PAC (IIII) Minton, Perry 6 Contributor address; City; State; Zip Code	5 Full name of contributor out-of-state PAC (ID#:) Minton, Perry 6 Contributor address; City; State; Zip Code Austin, TX 78701	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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)			
	Sch: 1/1 Rpt: 5/5	Thomas, Ernest P. (Mr.) 00069797			
4	Date	5 Payee name			
	08/15/2024	Commercial National Bank			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$12,000.00	105 E. 2nd St.			
		Brady, TX 76825			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense			
		Loan Repayment			
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
9	Complete ONLY if direct expenditure to benefit C/OI	the state of the s			
	Date	Page years			
	11/08/2024	Payee name Commercial National Bank			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$2,511.81	105 E. 2nd St.			
		Brady, TX 76825			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense Repayment of loan.			
		respayment of loan.			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OH				
	Date	Payee name			
	08/26/2024	Thomas, Ernest			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$5,000.00	200 Sunset			
	40,000.00				
		Llano, TX 78643			
	PURPOSE	1			
	OF	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment (b) Description Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Credit Card Payment Check if Austin, TX, officeholder living expense			
		Repayment of Credit Card and repayment of			
		expenses paid with personal funds.			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OH				