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) 00026397 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Mr. Isaac M. NAME Date Received **ELECTRONICALLY FILED** 07/17/2023 NICKNAME LAST **SUFFIX** Castro CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** PO Box 608 MAILING Amount Receipt # **ADDRESS** Change of Address Hamlin, TX 79520 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Joe E. NAME NICKNAME LAST **SUFFIX** Boaz **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; STATE; ZIP CODE CITY; **TREASURER** 13343 FM 2746 **ADDRESS** (Residence or Business) Anson, TX 79501 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (325) 721-4381 **PHONE** REPORT

•		
	CO TO DACE 2	
	GO TO PAGE 2	
orms provided by Texas Ethics Commission	www.ethics.state.tx.us	Versio

30th day before election

8th day before election

THROUGH

χ Primary

General

Runoff

Exceeded modified

Month

ELECTION TYPE

Runoff

Special

Day

06/30/2023

12 OFFICE SOUGHT (if known)

District Attorney District 259

Year

Other

reporting limit

TYPE

PERIOD

10 ELECTION

11 OFFICE

COVERED

January 15

Day

Day

03/05/2024

OFFICE HELD (if any)

ELECTION DATE

01/01/2023

Year

Year

Presiding Judge-Hamlin Municipal Court Jones

July 15

Х

Month

Month

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

FORM C/OH COVER SHEET PG 2

13 C / OH NAME	Castro, Isaac M. (Mr.		14 Filer ID 00026397	(Ethics Commission Fil	lers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without I officeholders are required to report this information	the candidate's or office	eholder's knowledge or	r		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME					
⊔ °	GENERAL						
	COMMITTEE ADDRESS						
	SPECIFIC						
		COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS				
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE			0.00		
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$	0.00		
EXPENDITURE TOTALS	3. TOTAL UNITEM	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES					
	4. TOTAL POLITIC	AL EXPENDITURES		\$	8.00		
CONTRIBUTION BALANCE	5. TOTAL POLITIC. REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE I RIOD	AST DAY OF THE	\$	0.00		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$	0.00		
17 AFFIDAVIT		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.					
		Mr.	Isaac M. Castro				
		Signature o	f Candidate or Officeho	lder	•		
AFFIX NO	TARY STAMP / SEAL ABO	DVE					
Sworn to and subs	cribed before me, by the sa	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	-		

				J V LI C	3 of 5
18 FII	ER NAM	1E	19 Filer ID	(Ethics Co	ommission Filers)
		aac M. (Mr.)	00026397		
		E SUBTOTALS SCHEDULE	_	SUB	TOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	X	SCHEDULE E: LOANS		\$	0.00
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	0.00
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.	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	8.00
10	. 🔲	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$	
11	. <u> </u>	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12	. 🔲	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

L	OANS					SCHEDU	LE E
Т	he Instruction	on Guide explains how	to complete this f	orm.	1	ages Schedule E: /1 Rpt: 4/5	
	ILER NAME Castro, Isaac M.	(Mr.)			3 Filer ID 00026	(Ethics Commission 397	Filers)
4 T	OTAL OF UN	IITEMIZED LOANS			.	\$	0.00
5 D	ate of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount (\$)	
fii	s lender a nancial nstitution?	8 Lender address; (City; State;	Zip Code		10 Interest Rate	
						11 Maturity Date	
12 P	rincipal occupation	on / Job title (See Instructions	s)	13 Employer (See Instruction	ns)		
14 D	escription of Coll None	ateral		15 Check if personal funds v	vere deposite	d into political account (See Instructions)	
	GUARANTOR NFORMATION	17 Name of guarantor				19 Amount Guarante	eed (\$)
	not applicable	18 Guarantor address; (City; State;	Zip Code			
20 P	rincipal occupation	on		21 Employer (See Instruction	ns)		

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 Castro, Isaac M. (Mr.) 00026397 Date Payee name 06/26/2023 Jones County Voter Registrar 6 Amount (\$) Payee address; City; State; Zip Code \$8.00 PO Box 511 100 Courthouse Sq. 1st Floor Reimbursement from political contributions intended Х Anson, TX 79501-0511 **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 Voter Lists **EXPENDITURE** USB Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

The C/OH Instruction (Guide explains how to complete th	his form.	Filer ID (Ethics Commis 00026397	sion Filers)	2 Total pages fil	
3 CANDIDATE /	MS / MRS / MR FIR	RST		MI	OFFICE U	JSE ONLY
OFFICEHOLDER NAME	Mr. Isa	ас М.			Date Received	
					ELECTRONICA	ALLY FILED
	NICKNAME LAS	 ST		SUFFIX	01/16/2024	
		stro		331111		
A CANDIDATE /	ADDDECC / DO DOV. ADT / CIV	UTE # OITV	·.	710 0005	Date Hand-delivered or	r Dato Bostmarkod
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT / SUI	ITE#; CITY	1	ZIP CODE	Date Hand-delivered of	Date Fusililarkeu
MAILING ADDRESS	PO Box 608				Receipt #	Amount
Change of Address	Hamlin, TX 79520					
	, , , , , , , , , , , , , , , , , , , ,				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR FIRS	ST		MI		
TREASURER	Mr. Joe			IVII		
NAME	Wii. 000	, L.				
	NICKNAME LAS	 ST		SUFFIX		
	Boa					
6 CAMPAIGN	STREET ADDRESS (NO PO BOX	(PLEASE);	APT	/ SUITE #; CITY	; STA	TE; ZIP CODE
TREASURER ADDRESS	13343 FM 2746					
(Residence or Business)						
(Residefice of Busiliess)	Anson, TX 79501					
7 CAMPAIGN	AREA CODE PHONE NU	IMPED EV	/TENCION			
7 CAMPAIGN TREASURER		UMBER E	XTENSION			
PHONE	(325) 721-4381					
8 REPORT						
TYPE	X January 15	30th day before e	election	Runoff	15th day after car	
)			appointment (office	
	July 15 81	8th day before el		Exceeded modified reporting limit	Final Report (Atta	ich C/OH-FR)
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	07/01/2023	THE	ROUGH	12/31/202	23	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	X Priı	mary	Runoff	Other	
	03/05/2024	Ge	neral	Special		
		_		_		
11 OFFICE	OFFICE HELD (if any)	1		12 OFFICE SOUGHT	Γ (if known)	
	PRESIDING JUDGE-HAMLIN	MUNICIPAL	COURT	District Attorney	District 259	
	Jones					
		GO TO	D PAGE 2			

FORM C/OH COVER SHEET PG 2

13 C / OH NAME	Castro, Isaac M. (Mr.		14 Filer ID 00026397	(Ethics Commission Filers)				
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without I officeholders are required to report this informatio	the candidate's or office	eholder's knowledge or				
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME						
⊔ °	GENERAL	GENERAL						
	SPECIFIC							
		COMMITTEE CAMPAIGN TREASURER NAME						
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS					
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00				
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$ 0.00				
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00				
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 1,262.26				
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 0.00				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00				
17 AFFIDAVIT		l swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.						
		Mr.	Isaac M. Castro					
		Signature o	f Candidate or Officehol	der				
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	ertify which, witness my hand and seal of office.						
Signature of office	cer administering	Printed name of officer administering	Title of office	r administering oath				

FORM C/OH COVER SHEET PG 3

				3 01 6		
18 FILER NAME Castro, Isaac	(Ethics Comm	ission Filers)				
	O SCHEDULE SUBTOTALS NAME OF SCHEDULE					
1. X S	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0.00		
2. X S	CHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00		
3. X S	CHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00		
4. X S	CHEDULE E: LOANS		\$	0.00		
5. X S	CHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	6	\$	0.00		
6. X S	CHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00		
7. X S	CHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00		
8. X S	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00		
9. X S	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	1,262.26		
10. S	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$			
11. S	CHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$			
	CHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS OF FILER	RETURNED	\$			
			•			

PLEDGED CONTRIBUTIONS				SCHEDULE	В
The Instruction Guide explains how to comple	te this form.	1	Total pages Sche Sch: 1/1 Rpt: 4		
2 FILER NAME Castro, Isaac M. (Mr.)		3		nics Commission Filers)	
4 TOTAL OF UNITEMIZED PLEDGES			\$		0.00
5 Date 6 Full name of pledgorout-of-state PAC (ID#: 7 Pledgor Address; City; State; Zip Code)	8	Amount of pledge (\$)	9 In-kind description (If applicable)	
10 Disciple a vertice / lab title (Contratted in)	laa	<u> </u>		I I side of Texas. Complete Sch	nedule T.
10 Principal occupation / Job title (See Instructions)	11 Employer (See Instru	uctio	ons)		

L	OANS					SCHEDU	LE E
Т	he Instructio	on Guide explains how	v to complete this fo	orm.	1	ages Schedule E: /1 Rpt: 5/6	
	ILER NAME astro, Isaac M.	(Mr.)			3 Filer ID 00026	(Ethics Commission 397	Filers)
4 T	OTAL OF UN	IITEMIZED LOANS			.	\$	0.00
5 Da	ate of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount (\$)	
fir	lender a nancial stitution?	8 Lender address;	City; State;	Zip Code		10 Interest Rate	
						11 Maturity Date	
12 Pi	rincipal occupatio	on / Job title (See Instruction	S)	13 Employer (See Instruction	ns)	•	
14 D	escription of Coll	ateral		15 Check if personal funds	were deposite	d into political account (See Instructions))
	UARANTOR IFORMATION	17 Name of guarantor				19 Amount Guarante	eed (\$)
	not applicable	18 Guarantor address;	City; State;	Zip Code			
20 Pi	rincipal occupation	on		21 Employer (See Instruction	ns)	I	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting 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/Politica Credit Card Payment		mmittee Leg	/Awards/Memorials Expens al Services e Instruction Guide ex	\$		ages/Contract Labor		Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G:	2	FILER NAME					3	Filer ID (Ethics Commission Filers)
	Sch: 1/1 Rpt: 6/6		Castro, Isaac I	M. (Mr.)					00026397
4	Date	5	Payee name						
	11/14/2023		REPUBLICAN	PARTY OF TEXA	AS				
6	Amount (\$)	7	Payee address;	City;	State;	Zip Co	de		
	\$1,250.00		807 Brazos St	reet					
	Reimbursement from		Suite 701						
	X political contributions intended		Austin, TX 787	'01					
8	PURPOSE	(a)	Category (See C	ategories listed at the top o	of this sched	lule)	(b) Description	Ch	neck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Fees				Ī	Ch	neck if Austin, TX, officeholder living expense
	EXPENDITURE						Primary filing fee	Э	
9	Complete ONLY if direct	Car	ndidate/Officehold	der name			Office sought		Office held
	expenditure to benefit C/OH								
	C/O11								
	Date		Payee name						
	11/14/2023		The First Natio	nal Bank of Hamli	in				
	Amount (\$)		Payee address;	City;	State;	Zip Co	de		
	\$5.00		231 S. Central	Avenue					
	Reimbursement from								
	X political contributions intended		Hamlin, TX 79	520					
	PURPOSE		Category (See C	ategories listed at the top o	of this sched	lule)	Description	Ch	neck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Accounting/Ba	nking				Ch	neck if Austin, TX, officeholder living expense
	EX. ENDITORE						Fee for cashiers	che	eck for filing fee
		Car	ndidate/Officeholo	der name			Office sought		Office held
	expenditure to benefit C/OH								
		1							
	Date		Payee name						
	11/30/2023		U.S. Post Office						
	Amount (\$)		Payee address;	City;	State;	Zip Co	de		
	\$7.26		225 S. E. Aver	nue A					
	Reimbursement from political contributions intended		Hamlin, TX 79	520					
	PURPOSE	Г	Category (See C	ategories listed at the top o	of this sched	lule)	Description	Ch	neck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Postage					Ch	neck if Austin, TX, officeholder living expense
	EXPENDITORE						Postage for lette	ers to	public officials
	Complete ONLY if direct expenditure to benefit C/OH	Car	ndidate/Officehold	der name		•	Office sought		Office held
l									

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

The C/OH Instruction (Guide explains how to comp	lete this form.	1 Filer ID (Ethics Commi 00026397		2 Total pages filed: 5	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE USE ON	NLY
OFFICEHOLDER NAME	Mr.	Isaac M.			Date Received	
					ELECTRONICALLY FIL	LED
	NICKNAME	LACT		CULTIV	02/05/2024	
	NICKNAME	LAST Castro		SUFFIX	02/00/2024	
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT	T / SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or Date Postn	narked
MAILING	PO Box 608				Receipt # Amount	
ADDRESS						
Change of Address	Hamlin, TX 79520				Date Processed	
					Date Imaged	
5 CAMPAIGN TREASURER	MS / MRS / MR	FIRST		MI		
NAME	Mr.	Joe E.				
	NICKNAME	LAST		SUFFIX		
		Boaz				
C CAMBAION	OTDEET ADDRESS (NO D	2 POV PI FACE):		T / OLUTE # OLTY	OTATE:	710 0005
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO	J BOX PLEASE);	AP	T / SUITE #; CITY;	STATE;	ZIP CODE
ADDRESS	13343 FM 2746					
(Residence or Business)	A					
	Anson, TX 79501					
7 CAMPAIGN	AREA CODE PHO	NE NUMBER E	EXTENSION			
TREASURER PHONE	(325) 721-4381					
THONE						
8 REPORT TYPE				. –	.	
TTPE	January 15	X 30th day before	election	Runoff	15th day after campaign tre appointment (officeholder of	
	July 15	8th day before	election	Exceeded modified	Final Report (Attach C/OH-I	
		_		reporting limit	_	
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2024	TH	IROUGH	01/25/202	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year 03/05/2024	X Pi	rimary	Runoff	Other	
	03/05/2024	G	Seneral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
	Presiding Judge-Hamlin I	Municipal Court 3	Jones		(Multi-county) District 259	9 Jones
				and Shackelford		
				•		
		GO T	O PAGE 2			

FORM C/OH COVER SHEET PG 2

13 C / OH NAME	Castro, Isaac M. (Mr.	14 Filer ID 00026397	(Ethics Commission Fi	lers)					
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	This box is for notice of political contributions accepted or political expenditures made by political candidate / officeholder. These expenditures may have been made without the candidate's or of consent. Candidates and officeholders are required to report this information only if they receive							
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 THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$	0.00				
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$	0.00				
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$	0.00				
	4. TOTAL POLITIC	AL EXPENDITURES		\$	0.00				
CONTRIBUTION BALANCE	REPORTING PE			\$	0.00				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$	0.00				
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.							
		Mr.	Isaac M. Castro						
		Signature of	Candidate or Officeho	lder					
AFFIX NO	TARY STAMP / SEAL AB	DVE							
Sworn to and subso	cribed before me, by the s	aid	, this the	day					
of	, 20, to co	ertify which, witness my hand and seal of office.							
Signature of office	cer administering	Printed name of officer administering	Title of office	r administering oath	-				

FORM C/OH COVER SHEET PG 3

				3 01 5			
18 FILER NAME Castro, Isaac	: М. (Mr.)	19 Filer ID 00026397	(Ethics Commis	ssion Filers)			
	0 SCHEDULE SUBTOTALS NAME OF SCHEDULE						
1. X S0	CHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0.00			
2. X SC	CHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00			
3. X SC	CHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00			
4. X SC	\$	0.00					
5. X SC	CHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	0.00			
6. X SC	CHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00			
7. X SC	CHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00			
8. X SC	CHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00			
9. X SC	CHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	0.00			
10. S	CHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$				
11. Sc	CHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$				
	CHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I O FILER	RETURNED	\$				

PLE	OGED CONTRIBU	TIONS			SCHEDULE B			
T	he Instruction Guide exp	plains how to compl	ete this form.	1	1 Total pages Schedule B: Sch: 1/1 Rpt: 4/5			
2 FILER NA	AME saac M. (Mr.)			3				
4	OF UNITEMIZED PLEDO	SES			\$ 0.			
5 Date	Date 6 Full name of pledgorout-of-state PAC (ID#:			8	Amount of pledge (\$) 9 In-kind description (If applicable)			
10 Principal	occupation / Job title (See Instru	actions)	11 Employer (Coo In		Check if travel outside of Texas. Complete Schedu			
10 Fillicipal	occupation / Job title (See Instit	ictions)	11 Employer (See Ins	Structi	ons)			

	LOANS						SCH	EDULE E
	The Instruction	on Guide explains how to co	omplete this f	orm.	1		ges Schedule E 1 Rpt: 5/5	:
2	FILER NAME Castro, Isaac M.	(Mr.)			3	Filer ID 000263	(Ethics Comm	ission Filers)
4	TOTAL OF UN	IITEMIZED LOANS					\$	0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:)	9 Loan Amou	int (\$)
6	Is lender a financial institution?	8 Lender address; City;	State;	Zip Code			10 Interest Ra	
							11 Maturity Da	te
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See Ins	structions)			
14	Description of Coll	ateral		15 Check if personal	funds were o	leposited	into political ac (See Instru	
16	GUARANTOR INFORMATION	17 Name of guarantor					19 Amount Gu	aranteed (\$)
	not applicable	18 Guarantor address; City;	State;	Zip Code				
20	Principal occupation	on		21 Employer (See Ins	structions)			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

	Guide explains how to com	ıplete this form.	1 Filer ID (Ethics Commi 00026397		2 Total pages filed: 8					
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST		MI	OFFICE USE ONLY					
NAME	Mr.	Isaac M.			Date Received ELECTRONICALLY FILED					
	NICKNAME	LAST Castro		SUFFIX	02/26/2024					
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; A	PT / SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or Date Postmarked					
MAILING ADDRESS	PO Box 608				Receipt # Amount					
Change of Address	Hamlin, TX 79520				Date Processed					
					Date Imaged					
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	<u>, </u>					
TREASURER NAME	Mr.	Joe E.								
	NICKNAME	LAST		SUFFIX						
		Boaz								
6 CAMPAIGN TREASURER	STREET ADDRESS (NO F	PO BOX PLEASE);	AP	T / SUITE #; CITY;	STATE; ZIP CODE					
ADDRESS										
(Residence or Business)	Anson, TX 79501									
7 CAMPAIGN	AREA CODE PH	ONE NUMBER E	EXTENSION							
TREASURER PHONE	(325) 721-4381									
8 REPORT TYPE	January 15	30th day before	e election	Runoff	15th day after campaign treasurer appointment (officeholder only)					
	July 15	X 8th day before	election	Exceeded modified reporting limit	Final Report (Attach C/OH-FR)					
9 PERIOD	Month Day Yea	ır		Month Day	Year					
COVERED	01/26/2024	TH	HROUGH	02/24/2024	4					
10 ELECTION	ELECTION DATE			ELECTION TYPE						
	Month Day Yea 03/05/2024		Primary	Runoff	Other					
	00/00/202	<u> </u> G	General	Special						
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT						
	Presiding Judge-Hamlir	ı Municipal Court 🤇	Jones	District Attorney (and Shackelford	(Multi-county) District 259 Jones					
	GO TO PAGE 2									

FORM C/OH COVER SHEET PG 2

13 C / OH NAME	Castro, Isaac M. (Mr.	14 Filer ID 00026397	(Ethics Commission Filers)	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political experience. These expenditures may have been made with officeholders are required to report this inform	hout the candidate's or offic	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
	_	COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NA	ME	
		COMMITTEE CAMPAIGN TREASURER AD	DRESS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER ES OF LOANS, OR CONTRIBUTIONS MADE		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LO	DANS)	\$ 3,825.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 7,739.25
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF T RIOD	HE LAST DAY OF THE	\$ 3,050.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOAN TING PERIOD	S AS OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT			enalty of perjury, that the ac des all information required ode.	
			Mr. Isaac M. Castro	_
		Signati	ure of Candidate or Officeho	lder
AFFIX NO	FARY STAMP / SEAL AB	DVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
of	, 20, to co	ertify which, witness my hand and seal of office	2.	
Signature of office	er administering	Printed name of officer administering	Title of office	er administering oath

			CC	JVEK SHE	3 of 8
	ER NAM	AE aac M. (Mr.)	19 Filer ID 00026397	(Ethics Comm	ission Filers)
		E SUBTOTALS SCHEDULE		SUBTOT	AL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	3,050.00
2.	X		\$	775.00	
3.		\$			
4.			\$		
5.		\$			
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.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	7,739.25
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 TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CON	SCHEDULE A1					
	The Instru	ction Guide explains how to c	omplete this fo	rm.	1	Total page Sch: 1/1	es Schedule A1: Rpt: 4/8	
2	FILER NAME Castro, Isaa	с М. (Mr.)			3		(Ethics Commission	on Filers)
4	Date 02/16/2024	Andrews, Sheryl	it-of-state PAC (ID#: p Code		7	Amount o	of Contribution (\$)	\$500.00
8	Principal occu	Merkel, TX 79536 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>				
	Date O2/08/2024 Casey, Rodney (Mr.) Contributor address; City; State; Zip Code Albany, TX 76430						of Contribution (\$)	\$50.00
	Principal occu Rancher	pation / Job title (See Instructions)		Employer (See Instructions Self-employed	5)			
	Date Full name of contributor out-of-state PAC (ID#:) 02/21/2024 Harrison III, W.B. Contributor address; City; State; Zip Code Stamford, TX 79552-7622						f Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions Self-employed	5)			

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 5/8 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Castro, Isaac M. (Mr.) 00026397 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS **6** Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 02/09/2024 Stevens, Mike \$775.00 Data compilation 7 Contributor address; City; State; Zip Code Lubbock, TX 79413 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) Political consultant Self-employed 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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 Fees

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains		kpense /ages/Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G:	2 FILER NAM	Ē			3	Filer ID (Ethics Commission Filers)
	Sch: 1/3 Rpt: 6/8	Castro, Isa	ac M. (Mr.)				00026397
4	Date	5 Payee name	•				
	01/31/2024	Hamlin Hei	ald				
6	Amount (\$)	7 Payee addre	ess; City; State;	Zip Co	de		
	\$70.00	PO Box 48	5				
	Reimbursement from political contributions intended	Hamlin, TX	79520				
8	PURPOSE	(a) Category (s	See Categories listed at the top of this sch	edule)	(b) Description	Cr	neck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Advertising	Expense			Ch	neck if Austin, TX, officeholder living expense
					Political ads		
_	Compulate ONII V if direct	Canadidate/Office	haldar nama		Office country		Office held
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Office	nolder name		Office sought		Office held
	Date	Payee name					
	02/09/2024	Stamford A	merican				
	Amount (\$)	Payee addre	ess; City; State;	Zip Co	de		
	\$350.00	PO Box 87	0				
	Reimbursement from political contributions intended	Stamford, ⁻	ΓX 79553				
	PURPOSE OF	Category (s	See Categories listed at the top of this sch	edule)	Description	=	neck if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising	Expense		L Dell'ideal este	Cr	neck if Austin, TX, officeholder living expense
					Political ads		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	 Candidate/Office	holder name		Office sought		Office held
	Date	Payee name					
	01/29/2024	Stevens, M	like				
	Amount (\$)	Payee addre	ess; City; State;	Zip Co	de		
	\$3,190.00	6923 India	na Ave				
	Reimbursement from political contributions	Box 292					
	intended	Lubbock, T	X 79413				
	PURPOSE OF	Category (s	See Categories listed at the top of this sch	edule)	Description	=	neck if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising	Expense		L	_	neck if Austin, TX, officeholder living expense
					yard signs and 4	1 / 4	Signs
	Complete ONLY if direct expenditure to benefit C/OH	L Candidate/Office	holder name		Office sought		Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Advertising Expense Event Expense

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense F y - Gift/Awards/Memorials Expense F	Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	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 ho	w to complete this form.							
1	Total pages Schedule G:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)						
	Sch: 2/3 Rpt: 7/8	Castro, Isaac M. (Mr.)		00026397						
4	Date	5 Payee name		1						
	01/29/2024	Stevens, Mike	Stevens, Mike							
6	Amount (\$)	7 Payee address; City; State;	Zip Code							
	\$1,800.00	6923 Indiana Ave	,							
	Reimbursement from	Box 292								
	X political contributions intended	Lubbock, TX 79413								
_			(h) December 5	Charle if traval autoide of Tayan Complete Cabadula T						
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedu	ule) (b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
	EXPENDITURE	Printing Expense	Palm card design							
			i and piniung							
9	Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held						
9	expenditure to benefit	Candidate/Officeriolder name	Office sought	Office field						
	C/OH									
	Date	Payee name								
	02/15/2024	Stevens, Mike								
Amount (\$) Payee address; City; State; Zip Code										
	\$1,448.00	\$1.448.00 6923 Indiana Avenue								
	Reimbursement from	Box 292								
	X political contributions intended	Lubbock, TX 79413								
_	PURPOSE	Category (See Categories listed at the top of this schedu	ule) Description	Check if travel outside of Texas. Complete Schedule T.						
	OF	Printing Expense	Description [Check if Austin, TX, officeholder living expense						
	EXPENDITURE	Timing Expense	Post card design	ப n, printing, and postage						
	Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held						
	expenditure to benefit C/OH									
	C/OH									
	Date	Payee name								
	02/05/2024	The Albany News								
	Amount (\$)	1 1	Zip Code							
	\$811.25	PO Box 2139								
	Reimbursement from									
	X political contributions intended	Albany, TX 76430								
	PURPOSE	Category (See Categories listed at the top of this schedu	ule) Description	Check if travel outside of Texas. Complete Schedule T.						
	OF EXPENDITURE	Advertising Expense		Check if Austin, TX, officeholder living expense						
	ZA ZADITORZ		Political ads							
L										
		Candidate/Officeholder name	Office sought	Office held						
	expenditure to benefit C/OH									
\vdash										

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: 3/3 Rpt: 8/8 Castro, Isaac M. (Mr.) 00026397 Date Payee name 01/31/2024 Western Observer 6 Amount (\$) Payee address; City; State; Zip Code \$70.00 1120 West Court Plaza Reimbursement from political contributions intended Х Anson, TX 79501 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** political ads Office held Complete ONLY if direct Candidate/Officeholder name Office sought 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 00026397 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Mr. Isaac M. NAME Date Received **ELECTRONICALLY FILED** 07/15/2024 NICKNAME LAST **SUFFIX** Castro CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** PO Box 608 MAILING Amount Receipt # **ADDRESS** Change of Address Hamlin, TX 79520 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Joe E. NAME NICKNAME LAST **SUFFIX** Boaz STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE; **TREASURER** 13343 FM 2746 **ADDRESS** (Residence or Business) Anson, TX 79501

EXTENSION

THROUGH

Primary

χ General

Runoff

Exceeded modified

Month

ELECTION TYPE

Runoff

Special

Day

06/30/2024

12 OFFICE SOUGHT (if known)

Year

Other

District Attorney (Multi-county) District 259TH

reporting limit

30th day before election

8th day before election

CAMPAIGN

PHONE

REPORT TYPE

PERIOD

10 ELECTION

11 OFFICE

COVERED

TREASURER

AREA CODE

(325) 721-4381

January 15

Day

Day

11/05/2024

OFFICE HELD (if any)

ELECTION DATE

02/25/2024

Year

Year

July 15

Х

Month

Month

None

PHONE NUMBER

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

FORM C/OH COVER SHEET PG 2

13 C / OH NAME	Castro, Isaac M. (Mr.	14 Filer ID 00026397	(Ethics Commis	ssion Filers)	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without a d officeholders are required to report this information	the candidate's or office	eholder's knowle	edge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS		I ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$	0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEM		\$	0.00	
	4. TOTAL POLITIC	AL EXPENDITURES		\$	2,118.00
CONTRIBUTION BALANCE	REPORTING PE			\$	932.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.			
		Mr.	Isaac M. Castro		
		Signature of	Candidate or Officehol	lder	
AFFIX NO	TARY STAMP / SEAL AB	DVE			
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	cer administering	Printed name of officer administering	Title of office	r administering	oath

3372.83.										
18 FILER NAME Castro, Isaac M. (Mr.)		19 Filer ID 00026397	(Ethics Commission Filers)							
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT							
1. SCHEDULE A1: MG	ONETARY POLITICAL CONTRIBUTIONS		\$							
2. SCHEDULE A2: NO	2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS									
3. SCHEDULE B: PLE	EDGED CONTRIBUTIONS		\$							
4. SCHEDULE E: LOA	ANS		\$							
5. X SCHEDULE F1: PC	DLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 2,118.00							
6. SCHEDULE F2: UN	NPAID INCURRED OBLIGATIONS		\$							
7. SCHEDULE F3: PU	JRCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	ONS	\$							
8. SCHEDULE F4: EX	(PENDITURES MADE BY CREDIT CARD		\$							
9. SCHEDULE G: PO	LITICAL EXPENDITURES FROM PERSONAL FUNDS		\$							
10. SCHEDULE H: PA	YMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$							
11. SCHEDULE I: NON	-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$							
12. SCHEDULE K: INTE	EREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	RETURNED	\$							

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made Candidate/Officeholder/Politi Credit Card Payment			mmittee	Food/Beverage Exper Gift/Awards/Memorials Legal Services The Instruction G	s Expense		kpens /ages	e /Contract Labor		Travel in Disti Travel Out of OTHER (ente	Distric	ct tegory not listed above)	
1	Total pages Schedule F1:	2	FILER NAME	Ē					3	Filer ID	((Ethics Commission Filers)	
	Sch: 1/2 Rpt: 4/5		Castro, Isaa	ac M. (Mr.)						0002639	7		
4	Date	5	Payee name										
	03/08/2024		Hamlin Her	ald									
6	Amount (\$)	7	Payee addre	ss; City;	State;	; Zip Co	de						_
	\$280.00		PO Box 48	5									
			Hamlin, TX	79520									
8	PURPOSE	(a)	Category (S	ee Categories listed at	the top of this sch	edule)	(b)	Description					_
	OF EXPENDITURE		Advertising			,		Check if travel	outsi	de of Texas. C	omple	ete Schedule T.	
	EXPENDITORE							Check if Austin			/ing ex	kpense	
								NEWSPAPE	R A	DS			
L	2												
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Off	iceholder name	C	Office sou	ght			Office	held	I	
	· .	_											_
	Date		Payee name										
	04/03/2024		Hamlin Her	ald									
	Amount (\$)		Payee addre	ss; City;	State;	; Zip Co	de						
	\$70.00		PO Box 48	5									
			Hamlin, TX	79520									
	PURPOSE	(a)	Category (S	ee Categories listed at	the top of this sch	edule)	(b)	Description					
	OF EXPENDITURE		Advertising					Check if travel					
	LXI LINDITORL							Check if Austin			/ing ex	kpense	
								NEWSPAPEI	K A	IDS			
_	Computate ONLY if dispost	<u> </u>	San didata /Off			D#:	a. la 4			Office	اء اء اء	1	_
	Complete ONLY if direct expenditure to benefit C/OH		Januluale/Uπ	iceholder name	(Office sou	ynı			Office	neio	I	
	Data	ı											_
	Date		Payee name										
	03/02/2024	_	Stevens, M										
	Amount (\$)		Payee addre		State;	; Zip Co	de						
	\$1,241.00		6923 Indiar	na Avenue									
			Box 292										
L		L	Lubbock, T	X 79413									
	PURPOSE	(a)	Category (S	ee Categories listed at	the top of this sch	edule)	(b)	Description					
	OF EXPENDITURE		Printing Exp	oense				Check if travel					
	-							Check if Austin				^{κρεηςε} Γ, MAIL, POSTAGE.	
								1 OOT CARD	טכ	-5101N, PF	XII N I	I, MAIL, I OSTAGE.	
_	Complete ONLY if direct	Щ	Candidate/Off	ceholder name		Office sou	aht			Office	held	<u> </u>	\dashv
	expenditure to benefit C/O					50 50d(a			311100		-	
													_
E	rms provided by Texas F	thic	e Commissi	on "	www.ethics.s	stata tv	<u> </u>				\ / /	ersion V4 1 0 d378aba	<u> </u>
1			.5 C.O.O.O.O.	V	WWWW HILLIES	יום וביוא וו	-				1/1		** '

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/Political Committee Credit Card Payment							
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 2/2 Rpt: 5/5	Castro, Isaac M. (Mr.) 00026397					
4	Date	5 Payee name					
	04/03/2024	THE STAMFORD STAR					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$225.00	PO BOX 1178					
		STAMFORD, TX 79553					
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
		NEWSPAPER ADS					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI	п					
	Date	Payee name					
	03/21/2024	The First National Bank of Hamlin					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$22.00	231 S. Central Avenue					
		Hamlin, TX 79520					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
		CHECKS					
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OI	H					
	Date	Payee name	_				
	03/08/2024	Western Observer					
Amount (\$) Payee address; City; State; Zip Code							
	\$280.00	1120 West Court Plaza					
		Anson, TX 79501					
	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.					
		Check if Austin, TX, officeholder living expense NEWSPAPER ADS					
	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) 00026397 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Mr. Isaac M. NAME Date Received **ELECTRONICALLY FILED** 01/14/2025 NICKNAME LAST **SUFFIX** Castro CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** PO Box 608 MAILING Amount Receipt # **ADDRESS** Change of Address Hamlin, TX 79520 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Joe E. NAME NICKNAME LAST **SUFFIX** Boaz STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE; **TREASURER** 13343 FM 2746 **ADDRESS** (Residence or Business) Anson, TX 79501

EXTENSION

THROUGH

Primary

χ General

Runoff

Exceeded modified

Month

ELECTION TYPE

Runoff

Special

Day

12/31/2024

12 OFFICE SOUGHT (if known)

Year

Other

District Attorney (Multi-county) District 259

reporting limit

30th day before election

8th day before election

CAMPAIGN

PHONE

REPORT TYPE

PERIOD

10 ELECTION

11 OFFICE

COVERED

TREASURER

AREA CODE

(325) 721-4381

January 15

Day

Day

11/05/2024

OFFICE HELD (if any)

ELECTION DATE

07/01/2024

Year

Year

District Attorney (Multi-county) District 259 Jones

July 15

Month

Month

PHONE NUMBER

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

FORM C/OH COVER SHEET PG 2

13 C / OH NAME	Castro, Isaac M. (Mr.)	14 Filer ID 00026397	(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				
	GENERAL	GENERAL				
		COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS			
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00		
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 0.00		
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$ 0.00		
	4. TOTAL POLITIC	\$ 0.00				
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			\$ 932.00		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP	PAL AMOUNT OF ALL OUTSTANDING LOANS AS RTING PERIOD	OF THE LAST DAY	\$ 0.00		
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.	y of perjury, that the acc Il information required t	companying report is o be reported by me		
		Mr.	Isaac M. Castro			
Signature of Candidate or Officeholder						
AFFIX NO	TARY STAMP / SEAL AB	OVE				
Sworn to and subscribed before me, by the said, this the						
of	, 20, to c	ertify which, witness my hand and seal of office.				
Signature of office	cer administering	Printed name of officer administering	Title of office	r administering oath		

FORM C/OH COVER SHEET PG 3

				3 01 3	
18 FILER NAM	(Ethics Commi	ssion Filers)			
Castro, Isaac M. (Mr.) 00026397					
20 SCHEDULI NAME OF	SUBTOTA	AL AMOUNT			
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	0.00		
2. X	2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS				
3. X	3. X SCHEDULE B: PLEDGED CONTRIBUTIONS				
4. X	4. X SCHEDULE E: LOANS				
5. X	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS				
6. X	6. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS				
7. X	7. X SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS				
8. X	\$	0.00			
9. X	9. X 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 CONTRIBUTI	ONS	\$		
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER					
			1		

PLE	DGED CONTRIBU	TIONS				SCHEDULE B
The Instruction Guide explains how to complete this form. 2 FILER NAME Castro, Isaac M. (Mr.)				1	Total pages Sche Sch: 1/1 Rpt: 4	
				3	Filer ID (Ethics Commission Filers) 00026397	
TOTAL OF UNITEMIZED PLEDGES					\$	0.00
5 Date 6 Full name of pledgorout-of-state PAC (ID#:)	8	Amount of pledge (\$)	9 In-kind description (If applicable)	
	7 Pledgor Address;	City; State; Zip Code			_	
			T.,	<u> [</u>		tside of Texas. Complete Schedule T.
10 Principal	occupation / Job title (See Instru	uctions)	11 Employer (See Insti	ructi	ons)	

	LOANS				SCHEDULE E			
I The Instruction Guide explains how to complete this form					ges Schedule E: 1 Rpt: 5/5			
2	FILER NAME Castro, Isaac M.	(Mr.)		3 Filer ID (Ethics Commission Filers) 00026397				
4	TOTAL OF UN	IITEMIZED LOANS		<u> </u>	\$ 0.00			
5	Date of loan	7 Name of lender out-of-state P	AC (ID#:)	9 Loan Amount (\$)			
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate			
					11 Maturity Date			
12	Principal occupation	on / Job title (See Instructions)	13 Employer (See Instructions	13 Employer (See Instructions)				
14	Description of Coll None	ateral	15 Check if personal funds we	ere deposited	into political account (See Instructions)			
16	GUARANTOR INFORMATION	17 Name of guarantor			19 Amount Guaranteed (\$)			
	not applicable	18 Guarantor address; City; State;	Zip Code					
20	Principal occupation	I on	21 Employer (See Instructions	5)				
_								