

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) <div style="font-size: 2em; color: blue;">N/A</div>	2 Total pages filed: <div style="font-size: 2em; color: blue;">5</div>
3 CANDIDATE / OFFICEHOLDER NAME	<div style="display: flex; justify-content: space-between;"> <div>MS / MRS / MR <div style="color: blue;">Mrs.</div></div> <div>FIRST <div style="color: blue;">Kelsey</div></div> <div>MI <div style="color: blue;">Brianna</div></div> </div> <hr/> <div style="display: flex; justify-content: space-between;"> <div>NICKNAME</div> <div>LAST <div style="color: blue;">Endy</div></div> <div>SUFFIX</div> </div>	<div style="border: 1px solid black; padding: 5px;"> OFFICE USE ONLY <div style="display: flex; justify-content: space-between;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">FILED FOR RECORD TIME:</div> <div style="text-align: center;"> <div style="color: blue; font-weight: bold;">JAN 14 2026</div> </div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">COKI COUNTY & DIST. CLERK CAROLLA ORCUTT</div> </div> <hr/> <div style="display: flex; justify-content: space-between;"> <div>Date Received</div> <div>Date Hand-Delivered or Date Postmarked</div> </div> <hr/> <div style="display: flex; justify-content: space-between;"> <div>Receipts</div> <div>Amount \$</div> </div> <hr/> <div>Date Processed</div> <hr/> <div>Date Imaged</div> </div>	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	<div style="display: flex; justify-content: space-between;"> <div>ADDRESS / PO BOX; <div style="color: blue;">213 W. 12th</div></div> <div>APT / SUITE #; <div style="color: blue;">Robert Lee</div></div> <div>CITY; <div style="color: blue;">TX</div></div> <div>STATE; <div style="color: blue;">TX</div></div> <div>ZIP CODE <div style="color: blue;">76945</div></div> </div>		
5 CANDIDATE / OFFICEHOLDER PHONE	<div style="display: flex; justify-content: space-between;"> <div>AREA CODE <div style="color: blue;">(254)</div></div> <div>PHONE NUMBER <div style="color: blue;">266 9150</div></div> <div>EXTENSION</div> </div>		
6 CAMPAIGN TREASURER NAME	<div style="display: flex; justify-content: space-between;"> <div>MS / MRS / MR <div style="color: blue;">Mr</div></div> <div>FIRST <div style="color: blue;">Kenneth</div></div> <div>MI <div style="color: blue;">Lynn</div></div> </div> <hr/> <div style="display: flex; justify-content: space-between;"> <div>NICKNAME</div> <div>LAST <div style="color: blue;">Endy</div></div> <div>SUFFIX</div> </div>		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	<div style="display: flex; justify-content: space-between;"> <div>STREET ADDRESS (NO PO BOX PLEASE); <div style="color: blue;">213 W. 12th</div></div> <div>APT / SUITE #; <div style="color: blue;">Robert Lee</div></div> <div>CITY; <div style="color: blue;">TX</div></div> <div>STATE; <div style="color: blue;">TX</div></div> <div>ZIP CODE <div style="color: blue;">76945</div></div> </div>		
8 CAMPAIGN TREASURER PHONE	<div style="display: flex; justify-content: space-between;"> <div>AREA CODE <div style="color: blue;">(325)</div></div> <div>PHONE NUMBER <div style="color: blue;">305 3926</div></div> <div>EXTENSION</div> </div>		
9 REPORT TYPE	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input checked="" type="checkbox"/> January 15</div> <div style="width: 50%;"><input type="checkbox"/> 30th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Runoff</div> <div style="width: 50%;"><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</div> <div style="width: 50%;"><input type="checkbox"/> July 15</div> <div style="width: 50%;"><input type="checkbox"/> 8th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Exceeded Modified Reporting Limit</div> <div style="width: 50%;"><input type="checkbox"/> Final Report (Attach C/OH - FR)</div> </div>		
10 PERIOD COVERED	<div style="display: flex; justify-content: space-between;"> <div> Month Day Year <div style="color: blue;">11 / 10 / 2025 </div> </div> <div>THROUGH</div> <div> Month Day Year <div style="color: blue;">1 / 14 / 2026 </div> </div> </div>		
11 ELECTION	<div style="display: flex; justify-content: space-between;"> <div> ELECTION DATE Month Day Year <div style="color: blue;">3 / 3 / 26 </div> </div> <div> ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special </div> </div>		
12 OFFICE	OFFICE HELD (if any) <div style="color: blue;">None</div>	13 OFFICE SOUGHT (if known) <div style="color: blue;">Justice of the Peace</div>	
14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	<div style="border: 1px solid black; padding: 5px;"> <p style="font-size: 0.8em; margin: 0;">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.</p> <div style="display: flex;"> <div style="width: 20%;"> COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC </div> <div style="width: 80%;"> COMMITTEE NAME <hr/> COMMITTEE ADDRESS <hr/> COMMITTEE CAMPAIGN TREASURER NAME <hr/> COMMITTEE CAMPAIGN TREASURER ADDRESS <hr/> </div> </div> </div>		

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME

Kelsey Eudy

16 Filer ID (Ethics Commission Filers)

17 CONTRIBUTION
TOTALS

1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR
CONTRIBUTIONS MADE ELECTRONICALLY)

\$

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

EXPENDITURE
TOTALS

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE,

\$

4. TOTAL POLITICAL EXPENDITURES

\$

991.22

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY
OF REPORTING PERIOD

\$

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

18 SIGNATURE

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

K Eudy

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by *Kelsey Eudy* this the *14th* day of *January*.

20 *21*, to certify which, witness my hand and seal of office.

Carla McGlothlin

Signature of officer administering oath

Carla McGlothlin

Printed name of officer administering oath

Admin Asst

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____,

(street)

(city)

(state)

(zip code)

(country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____.

(month)

(year)

Signature of Candidate/Officeholder (Declarant)

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

19 FILER NAME <i>Kelsey Rudy</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ <i>991.22</i>
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 1	2 FILER NAME Kelsey Eudy	3 Filer ID (Ethics Commission Filers)
4 Date 1/14/26	5 Payee name Kelsey Eudy	
6 Amount (\$) 991.22 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 213 W 12th St Robert Lee TX 76945	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense, Fees	
	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Kelsey Eudy	Office sought Justice of the Peace
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	
	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	
	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



AFFIDAVIT FOR CANDIDATE OR OFFICEHOLDER: ELECTRONIC FILING EXEMPTION

An exemption affidavit must be submitted with each paper report.

Beginning on January 1, 2025, a candidate or officeholder who has accepted more than \$33,910 in political contributions or made more than \$33,910 in political expenditures in any calendar year must file all subsequent reports electronically.

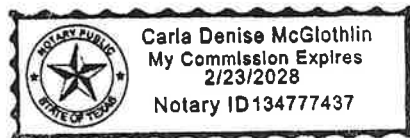
Filer name <u>Kelsey Eudy</u>	Filer ID #
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OFFICE USE ONLY	
Date Received	
Date Hand-delivered or Date Postmarked	
Receipt #	Amount \$
Date Processed	
Date Imaged	

1. I swear or affirm that I have not accepted more than \$33,910 in political contributions or made more than \$33,910 in political expenditures in a calendar year.
2. I further swear or affirm that I do not use computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
3. I further swear or affirm that no person acting as my agent or consultant, and no person with whom I contract, uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
4. I further swear or affirm that I understand that I am required to file my campaign finance reports electronically if I, my agent or consultant, or a person with whom I contract exceeds \$33,910 in political contributions or political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
5. I am filing this affidavit with the Campaign Finance report due on January 15 2026. I understand that this affidavit is required to be filed with each campaign finance report for which I am claiming an exemption from electronic filing.

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

[Signature]
Signature of Filer

Sworn to and subscribed before me by Kelsey Eudy this the 14th day of January, 2026, to certify which, witness my hand and seal of office.

Carla McGlothlin
Signature of officer administering oath

Carla McGlothlin
Printed name of officer administering oath

Admin Asst.
Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____ (street), _____ (city), _____ (state), _____ (zip code), _____ (country).

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

Signature of Filer (Declarant)

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