FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00063426 15 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Mr. John C. NAME Date Received **ELECTRONICALLY FILED** 02/05/2024 NICKNAME LAST **SUFFIX** Maher Jr. CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; ZIP CODE Date Hand-delivered or Date Postmarked **OFFICEHOLDER** P.O. BOX 884 MAILING Receipt # Amount **ADDRESS** Change of Address Wharton, TX 77488 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Heather L. NAME NICKNAME LAST **SUFFIX** Maher STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE; **TREASURER** 1607 Crestmont **ADDRESS** (Residence or Business) Wharton, TX 77488 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (979) 531-9215 **PHONE** REPORT TYPE 30th day before election Runoff 15th day after campaign treasurer January 15 X appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 01/01/2024 01/25/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year χ Primary Runoff Other 03/05/2024 General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge Place W and M District 23

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 15

13 C / OH NAME	Maher Jr., John C. (N	Λг.)	14 Filer ID (I 00063426	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditures may have been made without to officeholders are required to report this information	he candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS(OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00
		TICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 11,000.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 23,872.48
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA	AST DAY OF THE	\$ 4,627.52
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 52,800.00
17 AFFIDAVIT				
		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.		
		Mr. J	ohn C. Maher Jr.	
		Signature of	Candidate or Officehold	der
AFFIX NO	TARY STAMP / SEAL AB	OVE		
		aid	, this the	day
of	, 20, to c	ertify which, witness my hand and seal of office.		
Signature of office	cer administering oath	Printed name of officer administering oath	Title of officer	administering oath

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

			VER SI	HEET PG 3 3 of 15
18 FILER NAME Maher Jr., John	19 Filer ID 00063426	(Ethics Con	nmission Filers)	
20 SCHEDULE SUB NAME OF SCHEI			SUBT	OTAL AMOUNT
1. X SCH	HEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	11,000.00
2. SCH	HEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3. SCH	HEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4. X SCH	HEDULE E(J): LOANS (JUDICIAL)		\$	22,500.00
5. X SCH	HEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	í	\$	23,872.48
6. SCH	HEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7. SCH	HEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIO	INS	\$	
8. SCH	HEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9. SCH	HEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10. SCH	HEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS C)F C/OH	\$	
11. SCH	HEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	INS	\$	
	HEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS R FILER	!ETURNED	\$	

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A(J)1: Sch: 1/1 Rpt: 4/15
2	FILER NAME Maher Jr., Jo	ohn C. (Mr.)			3	Filer ID (Ethics Commission Filers) 00063426
4	Date 01/01/2024	Full name of contributor Casillas, Charles (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#:_ ate; Zip Code	#:)		Amount of Contribution (\$) \$1,000.00
		Wichata Falls, TX 76308				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title Officer		
10		employer/law firm		11 Law firm of contributor's sp	יוח	se (if any)
		s Police Department			, ,	(i. di.))
12	If contributor is	s a child, law firm of parent(s) (if a	ny)	L		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)
	01/06/2024	The Ammons Law Firm LL Contributor address; City; Sta			•	\$5,000.00
L	Contributor's [Houston, TX 77006 Principal Occupation		Contributor's Job Title		
	Continuator 5 i	-ппсіраї Оссираціон		Continuator 5 30b Title		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if a	ny)	<u> </u>		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)
	01/02/2024	Wadler Perches Kerlick Contributor address; City; Sta	ate; Zip Code			\$5,000.00
L	Contributor's [Wharton, TX 77488 Principal Occupation		Contributor's Job Title		
	Continuators	-ппстраг Оссираноп		Continuator's 300 Title		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if a	ny)			

LC	DANS (J	UDICIAL)			SCHEDULE E(J)	
The	e Instructio	n Guide explains how to complete this f	orm.	l	ges Schedule E(J): 2 Rpt: 5/15	
	ER NAME her Jr., John	C. (Mr.)		3 Filer ID 000634	(Ethics Commission Filers)	
⁴ TO	TAL OF UN	ITEMIZED LOANS		I	\$	
	e of loan 02/2024	7 Name of lender out-of-state PA Maher Jr., John (Mr.)	C (ID#:)	9 Loan Amount (\$) \$2,500.00	
fina	ender a ncial itution?	8 Lender address; City; State;	Zip Code		10 Interest Rate	
No		Wharton, TX 77488			11 Maturity Date	
12 Len	der's Principal	Occupation	13 Lender's Job Title			
14 Len	der's Employer	/Law Firm	15 Law Firm of lender's spous	se (if any)		
16 If le	nder is child, la	w firm of parent(s) (if any)	L			
_	scription of Coll	ateral	18 Check if personal funds were deposited into political account (See Instructions)			
	ARANTOR ORMATION	20 Name of guarantor	22 Amount Guaranteed (\$			
×	not applicable	21 Guarantor address; City; State;	Zip Code			
23 Gua	arantor's Princip	oal Occupation	24 Guarantor's Job Title			
25 Gua	arantor's Emplo	yer/Law Firm	26 Law Firm of guarantor's spouse (if any)			
27 If gu	uarantor is child	d, law firm of parent(s) (if any)				

	LOANS (J	UDICIAL)			SCHEDULE E(J)	
	The Instruction	n Guide explains how to complete this f	orm.		ges Schedule E(J): 2 Rpt: 6/15	
2	FILER NAME Maher Jr., John	C. (Mr.)		3 Filer ID 000634	(Ethics Commission Filers)	
4	TOTAL OF UN	ITEMIZED LOANS			\$	
5	Date of loan 01/18/2024	7 Name of lender out-of-state PA Maher Jr., John (Mr.)	C (ID#:)	9 Loan Amount (\$) \$20,000.00	
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate	
	No	Wharton, TX 77488			11 Maturity Date	
12	Lender's Principal	Occupation	13 Lender's Job Title			
14	Lender's Employer	/Law Firm	15 Law Firm of lender's spous	e (if any)		
16	If lender is child, la	w firm of parent(s) (if any)	<u>L</u>			
17	Description of Coll X None	ateral	18 Check if personal funds were deposited into political account (See Instructions)			
19	GUARANTOR INFORMATION	20 Name of guarantor			22 Amount Guaranteed (\$)	
	X not applicable	21 Guarantor address; City; State;	Zip Code			
23	Guarantor's Princip	pal Occupation	24 Guarantor's Job Title			
25	Guarantor's Emplo	yer/Law Firm	26 Law Firm of guarantor's spouse (if any)			
27	If guarantor is child	d, law firm of parent(s) (if any)				

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

Candidate/Officeholder/Political Committee Credit Card Payment	Legal Services The Instruction Guide explains			
1 Total pages Schedule F1: 2 FILEF	RNAME		3 Filer ID (Ethics Commission Filers)	
·	er Jr., John C. (Mr.)		00063426	
4 Date 5 Payer				
01/03/2024 Avan	ts, Sidney (Ms.)			
6 Amount (\$) 7 Payee	e address; City; State;	Zip Code		
\$600.00 3204	10th Street			
	City, TX 77414			
	Ory (See Categories listed at the top of this sch		Louiside of Tours Countries Coleadyle T	
EXPENDITURE Salar	ries/Wages/Contract Labor	 	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense	
		Contract Lab		
9 Complete ONLY if direct Candid expenditure to benefit C/OH	ate/Officeholder name C	Office sought	Office held	
Date Payee	e name			
01/09/2024 Avan	ts, Sidney (Ms.)			
Amount (\$) Payee	e address; City; State;	Zip Code		
\$500.00 3204	10th Street			
Bay (City, TX 77414			
I OE I	Ory (See Categories listed at the top of this sch			
EXPENDITURE Salar	ies/Wages/Contract Labor		l outside of Texas. Complete Schedule T. n, TX, officeholder living expense	
		Contract Lab		
Complete ONLY if direct Candid expenditure to benefit C/OH	ate/Officeholder name C	Office sought	Office held	
Date Paves	e name			
' '''	ta, Rhea (Ms.)			
	e address; City; State;	Zip Code		
	N. Richmond Road	2.6 2000		
\$ 120.00 1021	Til Monitoria Moda			
Whai	ton, TX 77488			
I OF 1	Ory (See Categories listed at the top of this sch			
EXPENDITURE Salar	ies/Wages/Contract Labor	_ _	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense	
		Contract Lab		
		Contract East	,,,,	
Complete ONLY if direct Candid	ate/Officeholder name C		Office held	
expenditure to benefit C/OH	ato, o moonoider name	moo oougm	Office field	

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

	Candidate/Officeholder/Politica Credit Card Payment			es/0	Contract Labor OTHER (enter a category not listed above)	
		_	The Instruction Guide explains how to comp	let		
1	Total pages Schedule F1:	2			3 Filer ID (Ethics Commission F	ilers)
	Sch: 2/9 Rpt: 8/15		Maher Jr., John C. (Mr.)		00063426	
4	Date	5	Payee name			
	01/15/2024		Boling Community Center			
6	Amount (\$)	7	Payee address; City; State; Zip Code			
	\$100.00		9839 Allen Rd			
			Boling, TX 77420			
8	PURPOSE	(2)	<u> </u>		Description	
O	OF	الما	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By	י יי 1	Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE		Candidate/Officeholder/Political Committee	İ	Check if Austin, TX, officeholder living expense	
				Ī	Donation	
9	Complete ONLY if direct		Candidate/Officeholder name Office sought	t	Office held	
	expenditure to benefit C/OI	Н				
	Date	Г	Payee name			
	01/10/2024		Boling Fire Department			
	Amount (\$)	┢	Payee address; City; State; Zip Code	!		
	\$25.00		6840 FM 442			
	,					
			Boling, TX 77420			
	PURPOSE	(0)	<u> </u>	١.,	Description	
	OF	(a)	, -	ו ני 1	Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Committee	ļ	Check if Austin, TX, officeholder living expense	
				Ī	Dontation	
	Complete ONLY if direct		Candidate/Officeholder name Office sought	t	Office held	
	expenditure to benefit C/OI	Н				
	Date		Payee name			
	01/25/2024		Boling High School Activity Fund			
	Amount (\$)	\vdash	Payee address; City; State; Zip Code	!		
	\$300.00		407 Atlantic Ave			
			Boling, TX 77420			
	PURPOSE	(2)	<u> </u>	۱ ۱	Description	
	OF	(a)	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By	י יי ד	Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE		Candidate/Officeholder/Political Committee	İ	Check if Austin, TX, officeholder living expense	
				Ī	 Donation	
	Complete ONLY if direct		Candidate/Officeholder name Office sought	t	Office held	
	expenditure to benefit C/OI	Н				

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica Credit Card Payment		nmittee	Legal Services The Instruction (·		/ages	s/Contract Labor		OTHER (enter a	category not listed above)	
		_		The Instruction (Julue explain	is now to co	mpie	ete tilis ioilii.	_			
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filer	s)
	Sch: 3/9 Rpt: 9/15		Maher Jr., J	ohn C. (Mr.)						00063426		
4	Date	5	Payee name									
	01/08/2024		Chilek, Colb	y (Mr.)								
6	Amount (\$)	7	Payee addres	ss; City;	Stat	te; Zip Co	de					
ľ	\$785.00	ı	8478 FM 10		O tot	.о,р оо						
	Ψ100.00		0110111120	00112								
			D.F. TV	7.400								
			Boling, TX 7	7420		-						
8	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this s	chedule)	(b)	Description				
	OF EXPENDITURE		Salaries/Wa	ges/Contract I	₋abor						plete Schedule T.	
								Contract Laboration		officeholder living	g expense	
								Contract Labo	Οi			
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Office	ceholder name		Office sou	ght			Office h	eld	
	experience to benefit of or											
	Date		Payee name									
	01/18/2024		Chilek, Colb	y (Mr.)								
	Amount (\$)		Payee addres	ss; City;	Stat	te; Zip Co	de					
	\$1,178.00		8478 FM 10	96 RD								
	, ,											
			Poling TV 7	7420								
		⊢	Boling, TX 7									
	PURPOSE OF			e Categories listed at		chedule)	(b)	Description				
	EXPENDITURE		Salaries/Wa	ges/Contract l	₋abor			=		de of Texas. Com officeholder living	plete Schedule T.	
								Contract Laboration		omeenolder living	у схропас	
								0011110101 20101	•			
_	Complete ONLY if direct		`andidate/Offic	ceholder name		Office sou	aht			Office h	ald.	
	expenditure to benefit C/OI		zanuluate/Onic	cholder flame		Office 30u	giit			Office fi	Siu	
		_										
	Date	ı	Payee name									
	01/15/2024		Chilek, Colb	y (Mr.)								
	Amount (\$)		Payee address	ss; City;	Stat	te; Zip Co	de					
	\$675.00		8478 FM 10	96 RD								
			Boling, TX 7	7420								
	PURPOSE						(h)	Description				
	OF			e Categories listed at ges/Contract I		chedule)	(5)	Description Check if travel of	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		Salalies/ Wa	ges/Contract i	-abui					officeholder living		
								Contract Laborate	or			
	Complete ONLY if direct		Candidate/Offic	ceholder name		Office sou	ght			Office h	eld	
	expenditure to benefit C/OI						J -					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
se Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	ll 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: 4/9 Rpt: 10/15	Maher Jr., John C. (Mr.) 00063426
4	Date	5 Payee name
	01/02/2024	Dibrill & Associates
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,300.00	4203 Glade Shadow Ct
		Katy, TX 77494
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Consult Fee
		33.134.1.33
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/18/2024	Dibrill & Associates
	Amount (\$)	Payee address; City; State; Zip Code
	\$7,000.00	4203 Glade Shadow Ct
		Katy, TX 77494
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Consult Fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	01/18/2024	Lepoard Project Graduation
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	8980 TX 35 N
		Van Vleck , TX 77482
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

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

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to comple	· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 5/9 Rpt: 11/15	Maher Jr., John C. (Mr.)	00063426
4	Date	5 Payee name	•
	01/10/2024	Maher Jr., John (Mr.)	
6	Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 1607 Crestmont	
_		Wharton, TX 77488	
8	PURPOSE OF EXPENDITURE	Loan Repayment/Reimbursement	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Repayment of Loan
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	01/12/2024	Miller, Preston (Mr.)	
	Amount (\$) \$775.00	Payee address; City; State; Zip Code 820 Speed Street	
		Wharton, TX 77488	
	PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 01/18/2024	Payee name Pamela Printing	
	Amount (\$) \$2,493.00	Payee address; City; State; Zip Code 550 Julie Rivers Drive Suite 3100 Sugar Land, TX 77478	
	PURPOSE OF EXPENDITURE	Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Advertising Expense
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

ertising Expense Event Expense Loan Repayment/Reimbu

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

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 o	complete t	his form.	
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)
Sch: 6/9 Rpt: 12/15	Maher Jr., John C. (Mr.)		00063426	
4 Date	5 Payee name		I	
01/01/2024	Ros, Grayson (Mr.)			
6 Amount (\$)	7 Payee address; City; State; Zip C	Code		
\$600.00	86 CR 114			
	Van Vleck, TX 77482			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) De	scription	
OF	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Comp	lete Schedule T.
EXPENDITURE			Check if Austin, TX, officeholder living	expense
		Co	ontract Labor	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so	ought	Office hel	d
Date	Payee name			
01/25/2024	Ros, Grayson (Mr.)			
Amount (\$)	Payee address; City; State; Zip C	Code		
\$640.00	86 CR 114			
	Van Vleck, TX 77482			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)		scription	
OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Comp Check if Austin, TX, officeholder living	
			ontract Labor	expense
Complete ONLY if direct	Candidate/Officeholder name Office so	<u> </u>	Office hel	d
expenditure to benefit C/O		· ·		
Date	Payee name			
01/12/2024	Somer, Bryce (Mr.)			
Amount (\$)	Payee address; City; State; Zip C	Code		
\$600.00	2216 CR 201			
, , , , , ,				
	East Bernard, TX 77435			
PURPOSE		(h) De	scription	
OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Check if travel outside of Texas. Comp	lete Schedule T.
EXPENDITURE	Calaires, Wages, Contract Laser		Check if Austin, TX, officeholder living	expense
		Co	ontract Labor	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so	ought	Office hel	d
3.1poa.ta. 5 to 50110111 0/0				

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

	Contributing Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/9 Rpt: 13/15	Maher Jr., John C. (Mr.) 00063426
4	Date	5 Payee name
	01/19/2024	Stains, Keith (Mr.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	1516 FM 1299 RD
		Wharton, TX 77488
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	LXI LINDITORE	Candidate/Officeholder/Political Committee
		Donation
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/08/2024	Tractor Supply
	Amount (\$)	Payee address; City; State; Zip Code
	\$787.48	115 East Boling Highway
		Wharton, TX 77488
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Transportation Equipment & Related Fxpense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Expense
		Саррисс
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· ·
_	Data	Davis same
	Date 01/04/2024	Payee name Wharton County Republican Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$325.00	PO Box 412
		Wharton, TX 77488
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Donation
_	Complete ONLY 'C. "	Condidate/Officeholder name
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

ement Solicitation/Fundraising Expense
ense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment								
_		,							
1	Total pages Schedule F1:								
	Sch: 8/9 Rpt: 14/15	Maher Jr., John C. (Mr.) 00063426							
4	Date	5 Payee name							
	01/03/2024	Wharton FFA Fair Fund							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$324.00	PO Box 1064							
		Wharton, TX 77488							
_	DUDDOOF	1							
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
		Candidate/Officeholder/Political Committee							
		Bondaon							
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office hold							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
	Date	Payee name							
	01/25/2024	Wharton High School Project Graduation							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$325.00 1 Tiger Avenue								
		Wharton, TX 77488							
	DUDDOCE	1							
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Contributions/Donations Made By							
EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder (Political Committee) Check if Austin, TX, officeholder living expense							
		Donation							
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OI								
	Date	Payee name							
	01/18/2024	Wharton Pilots Club							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$500.00	1924 N. Fulton St							
		Wharton, TX 77488							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF	Contributions/Donations Made By Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.							
	EXPENDITURE	Candidate/Officeholder/Political Committee							
		Donation							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OI	1							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica			mmittee	Fees Food/Beverage Expense Gift/Awards/Memorials Expen Legal Services	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 e	xplains h	now to comp	plete this form.			
1	Total pages Schedule F1:	2	FILER NAM	E				3	Filer ID	(Ethics Commission Filers)
	Sch: 9/9 Rpt: 15/15		Maher Jr.,	John C. (Mr.)					00063426	
4	Date	5	Payee name	2						
	01/04/2024			Jason (Mr.)						
-	Amount (\$)	7	Payee addre		State:	Zip Code				
ľ	\$420.00	ľ		r Trail Drive	Sidie,	Zip Coue	-			
	Ψ420.00		700 Carley	Trail Drive						
			Wharton, T	TX 77488						
8	PURPOSE	(a)	Category (S	See Categories listed at the top	of this sche	edule) (k) Description			
	OF EXPENDITURE			ages/Contract Labor						nplete Schedule T.
									K, officeholder livin	g expense
							Contract La	iodi		
L										
9	Complete ONLY if direct expenditure to benefit C/OI	, (Candidate/Of	ficeholder name	0	ffice sough	nt		Office h	eld