CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to con	nplete this form.	1 Filer ID (Ethics Commo		2 Total pages file	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE U	ISF ONLY
OFFICEHOLDER NAME	Mr.	Dewey R.			Date Received ELECTRONICA	
					J	LLIFILED
	NICKNAME	LAST		SUFFIX 	02/05/2024	
		Collier		II		
4 CANDIDATE /	ADDRESS / PO BOX; A	PT / SUITE #; CIT	<u>Γ</u> Υ;	ZIP CODE	Date Hand-delivered or	Date Postmarked
OFFICEHOLDER MAILING ADDRESS	3584 FM 71 West				Receipt #	Amount
Change of Address	Talco, TX 75487				Date Processed	
					Date Imaged	
					·	
5 CAMPAIGN	MS / MRS / MR	FIRST	·	MI		
TREASURER NAME	Mrs.	Morgan E.				
	NICKNAME	LAST		SUFFIX	•••••	
		Collier		-		
6 CAMPAIGN	OTDEET ADDRESS (NO	DO BOY DI EACE).		T / CLUTE #· CITV·	CTA ⁷	TE: 710 CODE
6 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO 3584 FM 71 West	PO BOX PLEASE),	Ar	T / SUITE #; CITY;	STA ⁻	TE; ZIP CODE
(Residence or Business)	Talco, TX 75487					
7 CAMPAIGN TREASURER PHONE	AREA CODE PH (254) 258-7418	HONE NUMBER I	EXTENSION			
8 REPORT TYPE	January 15	X 30th day before	e election	Runoff	15th day after cam appointment (office	
	July 15	8th day before	election	Exceeded modified reporting limit	Final Report (Attac	ch C/OH-FR)
9 PERIOD	Month Day Yea	ar		Month Day	Year	
COVERED	01/01/2024	TH	HROUGH	01/25/202	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Yea	ar X F	Primary	Runoff	Other	
	03/05/2024		General	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT		
				State Representa	ative District 5	
	-1			_1		
		GO 1	TO PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 9

13 C / OH NAME	(Ethics Commission Filers)						
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without officeholders are required to report this informatio	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 ADDRES	SS				
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00			
	2. TOTAL POLITIC (OTHER THAN F	S)	\$ 550.00				
EXPENDITURE TOTALS	3. TOTAL UNITEM		\$ 0.00				
	4. TOTAL POLITIC	4. TOTAL POLITICAL EXPENDITURES					
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 28,248.74			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 47,570.00			
17 AFFIDAVIT		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.					
		Mr. C	Dewey R. Collier II				
		Signature of	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	rtify 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

FORM C/OH COVER SHEET PG 3

		3 of 9						
	Dewey R. (Mr.)	19 Filer ID 00085780	(Ethics Comm	ission Filers)				
20 SCHEDUL NAME OF	SUBTOT	AL AMOUNT						
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS							
2.	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 CONTRIBUTION	S	\$	1,951.37				
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 TO FILER	RETURNED	\$					

	MONET	ARY POLITICAL CONTRIBUTI		SCHEDULE A				
	The Instru	ction Guide explains how to complete this	1	Total pages Schedule A1: Sch: 1/1 Rpt: 4/9				
2	FILER NAME Collier II, De	ewey R. (Mr.)		3	Filer ID (Ethics Commission 00085780	n Filers)		
4	Date 01/11/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00		
_		Mineola, TX 75773		Ĺ				
8	Retired	ipation / Job title (See Instructions)	9 Employer (See Instructions Retired	s)				
	Date 01/04/2024	Full name of contributor out-of-state PAC (ID# Kruger, Lisa Contributor address; City; State; Zip Code Point, TX 75472	#:)		Amount of Contribution (\$)	\$500.00		
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor 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: 1/5 Rpt: 5/9	Collier II, Dewey R. (Mr.) 00085780
4	Date	5 Payee name
	01/11/2024	Anedot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2.30	1920 McKinney Ave
		7th Floor
		Dallas, TX 75201
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Credit Card Processing Fee
		Credit Card Processing Fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/04/2024	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.30	1920 McKinney Ave
		7th Floor
		Dallas, TX 75201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Credit Card Processing Fee
		Credit Card Processing Fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	01/22/2024	Blazin' Pizza Company
	Amount (\$)	Payee address; City; State; Zip Code
	\$114.25	386 E Lennon Dr
		Emory, TX 75440
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Campaign Meeting with Rains County Support Team
		Campaigh Meeting With Rains County Support Team
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

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

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	l 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: 2/5 Rpt: 6/9	Collier II, Dewey R. (Mr.) 00085780
4	Date	5 Payee name
	01/18/2024	Brookshires Gas
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$44.95	521 S Main St
		Lindale, TX 75771
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Gas for in district travel, blockwalking
		Gas for in district travel, blockwarking
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OI	
H	Date	Payee name
	01/08/2024	BuildASign.com
		-
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,224.96	11525A Stonehollow Dr. Suite 100
		Austin, TX 78758
	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
		Highway Signs
	Operation ONLY if allowed	Our didn't lotter had a marrie of the country of th
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/03/2024	Ecanvasser
	Amount (\$)	Payee address; City; State; Zip Code
	\$199.00	Suite 10568, 26/27 Upper Pembroke Street
		Dublin X361 Ireland
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	LAI LINDITORE	Check if Austin, TX, officeholder living expense
		Blockwalking app
	Operation ONE V. C. F.	Our Highest (Office health a group of the control o
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
		•

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee I	Legal Services	·		/ages	/Contract Labor		OTHER (enter a	strict a category not listed abov	ve)
		_		The Instruction G	uide explains h	ow to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commissio	n Filers)
	Sch: 3/5 Rpt: 7/9		Collier II, De	wey R. (Mr.)						00085780		
4	Date	5	Payee name									
	01/03/2024		Ecanvasser									
6	Amount (\$)	7	Payee addres	s; City;	State;	Zip Co	de					
	\$1.79		Suite 10568	, 26/27 Upper F	Pembroke St	reet						
			Dublin X361	L Ireland								
8	PURPOSE	(a)	Category (Se	e Categories listed at t	he ton of this sche	dule)	(b)	Description				
	OF		Advertising I						outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		J	•				Check if Austin,	, TX,	officeholder living	g expense	
								Blockwalking	ар	p		
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offic	eholder name	O	ffice sou	ght			Office h	eld	
	experiorarie to berieff C/Or	1										
	Date		Payee name									
	01/25/2024		Lowes									
	Amount (\$)		Payee addres	s; City;	State;	Zip Co	de					
	\$104.13		1220 Lakew	ood Dr								
			Mount Pleas	ant, TX 75455								
	PURPOSE	(a)	Category (Se	e Categories listed at t	he top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Advertising I					=			plete Schedule T.	
								_	, TX,	officeholder living	g expense	
								Sign Stakes				
	Complete ONLY if direct	<u> </u>	Candidate/Offic	oholdor namo	0:	ffice sou	aht			Office h	old	
	Complete ONLY if direct expenditure to benefit C/OH		Januluale/Onic	enoluei name	O	ilice sou	ynı			Office fi	eiu	
	Date		Payee name									
	01/18/2024		Lowes									
	Amount (\$)		Payee addres	-	State;	Zip Co	de					
	\$14.59		1220 Lakew	ood Dr								
			Mount Pleas	ant, TX 75455		_						
	PURPOSE	(a)	Category (Se	e Categories listed at t	he top of this sche	dule)	(b)	Description				
	OF EXPENDITURE		Advertising I	Expense							plete Schedule T.	
								Sign Stakes	, TX,	officeholder living	g expense	
								Jigii Jiakes				
_	Complete ONLY if direct	Ц,	Candidate/Offic	eholder name	Ο:	ffice sou	aht			Office h	eld.	
	expenditure to benefit C/O		Januiuale/OIII	cholact Haille	O	mee sou	giil			Onice III	Cid	
_												

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 complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/5 Rpt: 8/9	Collier II, Dewey R. (Mr.) 00085780
4	Date	5 Payee name
	01/17/2024	Lowes
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$137.73	1220 Lakewood Dr
		Mount Pleasant, TX 75455
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.
		Check if Austin, TX, officeholder living expense Sign Stakes
		Sign Stakes
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Davis same
	01/10/2024	Payee name Stanlos
		Staples
	Amount (\$)	Payee address; City; State; Zip Code
	\$24.36	2306 S Jefferson Ave
		Mount Pleasant, TX 75455
	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
		printing flyers
		p.m.m.g.nyoro
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	01/02/2024	Staples
	Amount (\$)	Payee address; City; State; Zip Code
	\$13.25	2306 S Jefferson Ave
	Ψ13.23	2000 3 delicison Ave
		Mount Discount TV 75 455
		Mount Pleasant, TX 75455
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expanse (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		printing flyers
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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 Candidate/Officeholder/Politica Credit Card Payment	, ₋ I Coi	mmittee	Food/Beverage Expe Gift/Awards/Memoria Legal Services The Instruction (ls Expense		se s/Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	trict category not listed above)	
1	Total pages Schedule F1:	2	FILER NAM	1E				3	Filer ID	(Ethics Commission Filers)	┪
	Sch: 5/5 Rpt: 9/9			Dewey R. (Mr.)					00085780		
4	Date	5	Payee nam								Ⅎ
	01/11/2024		Tractor Su								
6	Amount (\$)	7	Payee addr		State:	; Zip Code					Ⅎ
	\$49.76		-	fferson Ave		, ,					
				asant, TX 75455							
8	PURPOSE OF	(a)		See Categories listed at	the top of this sch	edule) (b)	Description				
	EXPENDITURE		Advertisin	g Expense			_		ide of Texas. Comp , officeholder living		
							Sign Stakes		, onicendider living	скрепас	
							J				
9	Complete ONLY if direct expenditure to benefit C/Ol		Candidate/O	fficeholder name	C	Office sought			Office he	eld	_