CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to co	mplete this form.	1 Filer ID (Ethics Commi 00085727		2 Total pages file 25			
3 CANDIDATE /	MS / MRS / MR	FIRST	-	MI	OFFICE U	ISE ONI Y		
OFFICEHOLDER	Mrs.	Janis A.						
NAME					Date Received			
					ELECTRONICA	LLY FILED		
	NICKNAME	LAST		SUFFIX	02/26/2024			
		Holt						
4 CANDIDATE /	ADDRESS / PO BOX;	APT / SUITE #; CI	τγ·	ZIP CODE	Date Hand-delivered or	Date Postmarked		
OFFICEHOLDER	P.O. Box 1311		,					
MAILING	F.O. DOX 1311				Receipt #	Amount		
ADDRESS								
Change of Address	Silsbee, TX 77656				Date Processed			
					Date Imaged			
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	-			
TREASURER	Mr.	Kent						
NAME								
	NICKNAME	LAST		SUFFIX				
		Batman		301117				
		Daiman						
0					07.0			
6 CAMPAIGN TREASURER	STREET ADDRESS (NC	PO BOX PLEASE);	AP	T / SUITE #; CITY;	STA	TE; ZIP CODE		
ADDRESS	4246 Clearlake Rd.							
(Residence or Business)								
(Residence of Dusiness)	Kountze, TX 77625							
7 CAMPAIGN	AREA CODE P	HONE NUMBER	EXTENSION					
TREASURER PHONE	(409) 782-5918							
THOME								
8 REPORT								
TYPE	January 15	30th day befor	e election	Runoff	15th day after car			
	D 14.15		alastian 🗖	European and an and it is at	appointment (office			
	July 15	X 8th day before	election	Exceeded modified reporting limit	Final Report (Attac	ch C/OH-FR)		
9 PERIOD COVERED	-	ear		Month Day	Year			
OOVERED	01/26/2024	1	HROUGH	02/24/2024	4			
10 ELECTION	ELECTION DAT		- · · · · · ·					
	,	ear XF	Primary	Runoff	Other			
	03/05/2024		General	Special				
				_				
11 OFFICE	OFFICE HELD (if any)	1		12 OFFICE SOUGHT	(if known)			
				State Representa				
	GO TO PAGE 2							
Forms provided by Te	exas Ethics Commission	www.e	thics.state.tx.u	S	Versio	on V3.5.1.9000c471		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 25

13 C / OH NAME	Holt, Janis A. (Mrs.)		14 Filer ID (1 00085727	Ethics Commission Filers)					
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without I officeholders are required to report this information	the candidate's or office	holder's knowledge or					
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME							
	GENERAL								
		COMMITTEE ADDRESS	OMMITTEE 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)	\$ 731,984.29					
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00					
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 27,522.84					
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 31,086.46					
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 91,325.00					
17 AFFIDAVIT		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.							
			rs. Janis A. Holt						
	Signature of Candidate or Officeholder								
AFFIX NO	TARY STAMP / SEAL ABO	DVE							
	Sworn to and subscribed before me, by the said day								
ot	, 20, to ce	ertify which, witness my hand and seal of office.							
Signature of offic	cer administering	Printed name of officer administering	Title of officer	administering oath					

SUBTOTALS - C/OH	FORM C/OH OVER SHEET PG 3 3 of 25	
18 FILER NAME Holt, Janis A. (Mrs.)	(Ethics Commission Filers)	
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT	
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 57,365.39
2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 674,618.90
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$ 27,522.84
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 I TO FILER	RETURNED	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

_							
	The Instruc	ction Guide explains how to c	1	Total pages Schedule A1: Sch: 1/3 Rpt: 4/25			
2	FILER NAME		3	Filer ID (Ethics Commission	n Filers)		
	Holt, Janis A	(Mrs.)			00085727		
4	Date	5 Full name of contributor 🗌 ou	ut-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	02/06/2024	Billot, Loyd					\$50.00
		6 Contributor address; City; State; Zi	ip Code				
		Sour Lake, TX 77659					
8		pation / Job title (See Instructions)		9 Employer (See Instructions))		
	Retired						
	Date	Full name of contributor	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/03/2024	Brents, Tommy					\$104.48
		Contributor address; City; State; Zi	ip Code				
		Liberty, TX 77575					
	-	pation / Job title (See Instructions)		Employer (See Instructions)	5)		
	IT Consultan			Self			
	Date		ut-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/15/2024	Carter, Nick				\$521.15	
		Contributor address; City; State; Zi	ip Code				
		Lumberton, TX 77657					
_	Princinal occu	pation / Job title (See Instructions)		Employer (See Instructions)	<u> </u>		
	Retired				9		
╞	Date	Full name of contributor	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/24/2024	Chambers, Alma	II-0I-SIALE PAC (ID#)			\$100.00
	02/24/2024	Contributor address; City; State; Zi	in Codo				Ψ100.00
		Contributor address, City, State, Zi	h cone				
		Cleveland, TX 77328					
	Principal occu	nation / Job title (See Instructions)		Employer (See Instructions)	5)		
	Retired						
⊨	Date	Full name of contributor 🛛 ou	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/09/2024						\$50.00
	Contributor address; City; State; Zip Code						
		Lumberton, TX 77657					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)	;)		
	Homemaker						
1							ľ

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/3 Rpt: 5/25 2 FILER NAME Filer ID (Ethics Commission Filers) 3 00085727 Holt, Janis A. (Mrs.) Date 4 **5** Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 01/29/2024 Family Empowerment Group, PAC \$50,000.00 6 Contributor address; City; State; Zip Code Austin, TX 78734 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/19/2024 Fossum, Tore \$26.35 Contributor address; City; State; Zip Code Huntsville, TX 77342 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 02/17/2024 McKee, Rob (Rev.) \$104.48 Contributor address; City; State; Zip Code Katy, TX 77493 Principal occupation / Job title (See Instructions) Employer (See Instructions) Pastor The Pentecostals of Katy Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/23/2024 \$200.00 Meadows, James Contributor address; City; State; Zip Code Austin, TX 78703 Principal occupation / Job title (See Instructions) Employer (See Instructions) Legal Assistant Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 02/22/2024 \$104.48 O'Pry, Donny Contributor address; City; State; Zip Code Lumberton, TX 77657 Principal occupation / Job title (See Instructions) Employer (See Instructions) Manager

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 3/3 Rpt: 6/25	
2 FILER NAME	3	Filer ID (Ethics Commissio	on Filers)
Holt, Janis A. (Mrs.)		00085727	
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
02/16/2024 Pierce, Michael			\$104.45
6 Contributor address; City; State; Zip Code	·		
Sour Lake, TX 77659			
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	<u> </u>		
Retired	- /		
		Amount of Contribution (¢)	
Date Full name of contributor out-of-state PAC (ID#:) 02/16/2024 Smart, Arlene		Amount of Contribution (\$)	¢1 000 00
			\$1,000.00
Contributor address; City; State; Zip Code			
Liberty TX 77575			
Liberty, TX 77575			
Principal occupation / Job title (See Instructions) Employer (See Instructions	S)		
Secretary Smart materials			
Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
01/29/2024 Texans United for a Conservative Majority			\$5,000.00
Contributor address; City; State; Zip Code	1		
Victoria , TX 77901			
Principal occupation / Job title (See Instructions) Employer (See Instructions	s)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 1/2 Rpt: 7/25							
2 FILER NAME			3 Filer ID (Ethics Commission Filers)						
Holt, Janis A	A. (Mrs.)	00085727							
⁴ TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$							
5 Date 02/22/2024	 6 Full name of contributor out-of-state PAC (ID#: Greg Abbott Campaign 7 Contributor address; City; State; Zip Code)	8 Amount of 9 In-kind contribution contribution (\$) description \$38,147.10 Digital						
	Austin, TX 78767	-	Check if travel outside of Texas. Complete Schedule T.						
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instructions)						
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)						
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)						
16 If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)								
Date 02/20/2024	Full name of contributor out-of-state PAC (ID#: Greg Abbott Campaign Contributor address; City; State; Zip Code)	Amount of In-kind contribution contribution (\$) description \$3,852.00 Canvassing						
	Austin, TX 78767		Check if travel outside of Texas. Complete Schedule T.						
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON							
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	ributor's job title (FOR JUDICIAL) (See instructions)						
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributc	contributor's spouse (if any) (FOR JUDICIAL)						
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)								
Date 02/20/2024	Full name of contributor out-of-state PAC (ID#: Greg Abbott Campaign Contributor address; City; State; Zip Code)	Amount of In-kind contribution contribution (\$) description \$629,301.00 I Advertising						
	Austin, TX 78767		I Check if travel outside of Texas. Complete Schedule T.						
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)						
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)						
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)						
If contributor i	If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)								

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

	The Instru	ction Guide explains how to complete this f	1	1 Total pages Schedule A2: Sch: 2/2 Rpt: 8/25			
2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Holt, Janis A	A. (Mrs.)			00085727		
4	TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$				
5	Date 02/24/2024	7 Contributor address; City; State; Zip Code)	8	Amount of 9 In-kind contribution contribution (\$) description \$3,318.80 Campaign Endorsement Text Message		
		Houston, TX 77046			Check if travel outside of Texas. Complete Schedule T.		
10	Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JL	IDICIAL) (See instructions)		
12	Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title (FOR JUDICIAL) (See instructions)				
14	Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's	spouse (if any) (FOR JUDICIAL)		
16	If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District - Gift/Awards/Memorials Expense Printing Expense Travel Out of District								
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)								
	Sch: 1/17 Rpt: 9/25	Holt, Janis A. (Mrs.) 00085727								
4	Date	5 Payee name								
	02/02/2024	Academy Sports								
_										
6	Amount (\$) \$930.21	7 Payee address; City; State; Zip Code . 7130 Eastex Freeway								
		Beaumont, TX 77708								
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Canopies (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Canopies for Voting locations 								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held								
	Date	Payee name								
	02/02/2024	Amazon Shopping								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$43.08	440 Terry Ave. North Seattle, WA 98109								
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meet and Greet supplies 								
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held								
	Date	Payee name								
	02/09/2024	Amazon Shopping								
-	Amount (\$)	Payee address; City; State; Zip Code								
	\$82.23	440 Terry Ave.								
		North Seattle, WA 98109								
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Decorations for Meet and Greet 								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held								

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment				Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAM	E				3	Filer ID	(Ethics Commission Filers)
	Sch: 2/17 Rpt: 10/25		Holt, Janis	A. (Mrs.)					00085727	
4	Date	5	Payee name	2						
	02/20/2024		Amazon SI	nopping						
6	Amount (\$)	7	Payee addre	ess; City;	State	; Zip Co	le			
	\$7.57		440 Terry	Ave.						
			North Seat	tle, WA 98109						
8	PURPOSE	(a)	Category (See Categories listed at t	bo top of this sch	odulo)	(b) Description			
	OF		Event Expe			ieuuie)		outsi	ide of Texas. Com	nplete Schedule T.
	EXPENDITURE							n, TX,	, officeholder living	g expense
							Tablecloths			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Of	ïceholder name	C	Office sou	lht		Office h	eld
	Date		Payee name	•						
	02/20/2024		Amazon SI	nopping						
	Amount (\$)		Payee addre	ess; City;	State	; Zip Co	le			
	\$104.50		440 Terry	Ave.						
			North Seat	tle, WA 98109						
	PURPOSE OF	(a)		See Categories listed at t	he top of this sch	edule)	(b) Description			
	EXPENDITURE		Event Expe	ense					ide of Texas. Com , officeholder living	nplete Schedule T. n expense
							Texas Flags	, 17,		genpense
	Complete ONLY if direct	I (Candidate/Of	iceholder name	(Dffice sou	Jht		Office h	eld
	expenditure to benefit C/OF	Η								
	Date		Payee name							
	02/20/2024		Amazon Sl							
	Amount (\$)		Payee addre	ess; City;	State	; Zip Co	le			
	\$107.70		440 Terry	-		,				
	•)							
			North Seat	tle, WA 98109						
	PURPOSE	(a)	Category (S	See Categories listed at t	he top of this sch	edule)	(b) Description			
	OF EXPENDITURE		Event Expe	ense						nplete Schedule T.
							Texas flags a		, officeholder living	g expense
							i chus nays d	ai iu		
-	Complete ONLY if direct	L	Candidate/Of	iceholder name		Office sou	iht		Office h	eld
	expenditure to benefit C/OF			istrolation name	(2000 300	,			
-										

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead/Rental Expense Transpor Food/Beverage Expense Polling Expense Travel in y - Gift/Awards/Memorials Expense Printing Expense Travel out							vlicitation/Fundraising Expense ansportation Equipment & Related Expense avel in District avel Out of District THER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)			
	Sch: 3/17 Rpt: 11/25		Holt, Janis A. (Mrs.)					00085727	``````````````````````````````````````			
4	Date	5	Payee name									
	02/24/2024		Anedot									
6	Amount (\$)	7	Payee address; City; Stat	e; Zip Co	ode							
	\$46.90		1920 McKinney Ave									
			7th Floor									
			Dallas, TX 75201									
8	PURPOSE	(a)			(b)	Description						
ľ	OF	(~)	Category (See Categories listed at the top of this so Fees	chedule)	()		outsi	de of Texas. Com	plete Schedule T.			
	EXPENDITURE					Check if Austin	, TX,	officeholder living	expense			
						Processing fe	ees	for donation	IS			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office he	eld			
	Date		Payee name									
	01/29/2024		CASA of Liberty									
	Amount (\$)		Payee address; City; Stat	e; Zip Co	ode							
	\$100.00		2015 Scout St	· •								
	+											
			Liberty, TX 77575									
	PURPOSE	(a)	Category (See Categories listed at the top of this se	chedule)	(b)	Description						
	OF EXPENDITURE		Contributions/Donations Made By					de of Texas. Com officeholder living				
			Candidate/Officeholder/Political Com	mittee		expense						
						Fundraiser						
			Condidate (Office helder norme	Office co				Office he				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	igni			Office he				
-	Date	—	Payee name									
	02/21/2024		Constant Contact									
				a. 7:- C	- el -							
	Amount (\$)			e; Zip Co	ode							
	\$101.27		1601 Trapelo Rd									
			Waltham, MA 02451									
	PURPOSE	(a)	Category (See Categories listed at the top of this se	chedule)	(b)	Description						
	OF EXPENDITURE		Fees					de of Texas. Com				
						EMail fee	, TX,	officeholder living	expense			
					Ļ							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office he	eld			

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide exp	Off Pol Prii Sal	fice Overh Iling Expending Exp Inting Exp Iaries/Wa	ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)				
	Sch: 4/17 Rpt: 12/25		Holt, Janis A. (Mrs.)					00085727				
4	Date 02/14/2024	5	Payee name Donut Palace									
6	Amount (\$) \$60.02	7	Payee address; City; S 857 N. 5th St Silsbee, TX 77656	State; Zi	ip Cod	e						
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of t Event Expense	his schedule) (, тх,	de of Texas. Complete Schedule T. officeholder living expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		candidate/Officeholder name	Office	e soug	nt		Office held				
	Date		Payee name									
	02/01/2024		El Burrito									
	Amount (\$) \$66.19		Payee address; City; S 2400 N. Main St Liberty, TX 77575	State; Zi	ip Cod	e						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of t Consulting Expense	his schedule	») (, TX,	de of Texas. Complete Schedule T. officeholder living expense ו Meal				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Offic	e soug	nt		Office held				
	Date		Payee name									
	02/01/2024		Facebook									
	Amount (\$) \$111.47		Payee address; City; S 1 Hacker Way	State; Zi	ip Cod	e						
			Menlo Park, CA 94025									
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of t Advertising Expense	his schedule	•) (, TX,	de of Texas. Complete Schedule T. officeholder living expense				
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	Offic	e soug	nt		Office held				

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment								Travel in District Travel Out of Dis	quipment & Related Expense		
1	Total pages Schedule F1:	2 FIL	ER NAME			-		3	Filer ID	(Ethics Commission Filers)		
_	Sch: 5/17 Rpt: 13/25		lt, Janis A. (Mrs	.)					00085727	(
4	Date 02/20/2024		vee name cebook									
6	Amount (\$) \$400.00	1 F	vee address; lacker Way nlo Park, CA 94		te; Zip Co	ode						
8	PURPOSE OF EXPENDITURE		egory _{(See Categol} vertising Expens	ies listed at the top of this s Se	chedule)	(b)		, TX,	de of Texas. Com officeholder living	plete Schedule T. J expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		lidate/Officeholde	r name	Office sou	ıght			Office he	eld		
	Date	Pay	vee name									
	02/14/2024	Fue	entes,									
	Amount (\$) \$160.00	302	vee address; L Smart Dr. erty, TX 77575	City; Sta	te; Zip Co	ode						
	PURPOSE OF EXPENDITURE		egory _{(See Categor} ent Expense	ies listed at the top of this s	chedule)	(b)			de of Texas. Com officeholder living	plete Schedule T. J expense		
	Complete ONLY if direct expenditure to benefit C/OF		lidate/Officeholde	r name	Office sou	ught			Office he	eld		
	Date	Pay	vee name									
	01/29/2024	Ge	nerations Coffe	е								
	Amount (\$) \$230.72	-	vee address; 06 Sam Houstor	•	te; Zip Co	ode						
		Lib	erty, TX 77575			ı —						
	PURPOSE OF EXPENDITURE		egory _{(See Categor} ent Expense	ies listed at the top of this s	schedule)	(b)		, TX,	officeholder living			
	Complete ONLY if direct expenditure to benefit C/OF		lidate/Officeholde	r name	Office sou	ught			Office he	eld		

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Event Expense Fees Food/Beverage Exper Gift/Awards/Memorials Legal Services The Instruction G	ise s Expense	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	ayment rhead/ pense pense (ages/0	t/Reimbursement /Rental Expense Contract Labor		Transportation Travel in Distric Travel Out of D		
1	Total pages Schedule F1:	2	FILER NAM	E					3	Filer ID	(Ethics Comm	ission Filers)
	Sch: 6/17 Rpt: 14/25	I	Holt, Janis							00085727		
4	Date	5	Payee name									
	02/05/2024		Generation	s Coffee								
6	Amount (\$)	7	Payee addre	ess; City;	State;	; Zip Co	de					
	\$19.29		1806 Sam	Houston St								
			Liberty, TX	77575								
8	PURPOSE	(a)	Category (s	ee Categories listed at	the top of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Travel In D			,	I	Check if travel of	outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITORE						Ι		, TX,	officeholder livir	ig expense	
								Meal				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder name	C	Office sou	ght			Office h	neld	
	Date		Payee name									
	02/12/2024		Holt, Timot	hy								
	Amount (\$)		Payee addre	ess; City;	State;	Zip Co	de					
	\$200.00		7708 Rose	wood Drive								
			Lumberton	, TX 77657								
	PURPOSE	(a)	Category (s	see Categories listed at	the top of this sch	edule)	(b)	Description				
	OF EXPENDITURE			ages/Contract L			Į				mplete Schedule T.	
							l			officeholder livir	ig expense	
								Labor for Sigi	ΠP	lacement		
			Severalizate (Off							Office k		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Off	iceholder name	Ĺ	Office sou	gnt			Office h	iela	
		-										
	Date		Payee name									
	02/20/2024		Holt, Timot	hy								
	Amount (\$)		Payee addre	ess; City;	State;	; Zip Co	de					
	\$204.00		7708 Rose	wood Drive								
			Lumberton	, TX 77657								
	PURPOSE	(a)	Category (S	ee Categories listed at	the top of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Salaries/W	ages/Contract L	abor		ļ				mplete Schedule T.	
							I			officeholder livir	ig expense	
								Labor for Sigi	пΡ	acement		
		Ľ					e la ć			0		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Off	iceholder name	Ĺ	Office sou	ynt			Office h	ieia	

	EXPENDITURE CATEGORIES FOR BOX 8(a)												
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Event Expense Fees Food/Beverage Exp Gift/Awards/Memori Legal Services The Instruction		Office Ove Polling Exp Printing Ex Salaries/W	rhead pense pense ages/	e Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense		
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filer	is)	
	Sch: 7/17 Rpt: 15/25		Holt, Janis /							00085727		-	
4	Date 02/20/2024	5 Payee name Holt, Timothy											
6	Amount (\$)	7	Payee addre	ss; City;	State	; Zip Co	de						
-	\$72.00		7708 Rosev	vood Drive		, 1							
8	PURPOSE	(a)					(h)	Description					
Ū	OF			ee Categories listed ages/Contract		iedule)		Check if travel of	, тх,	officeholder living	plete Schedule T. J expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	C	Office sou	ght			Office he	eld		
	Date		Payee name										
	02/01/2024		K's Cookie	Jars									
	Amount (\$)		Payee addre	ss; City;	State	; Zip Co	de						
	\$72.00		1406 N. Fre	edonia St. es, TX 75961									
	PURPOSE OF EXPENDITURE			ee Categories listed age Expense	at the top of this sch	iedule)			, TX,	tside of Texas. Complete Schedule T. X, officeholder living expense et Cookies			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	(Office sou	ght			Office he	eld		
⊨	Date		Payee name										
	02/16/2024		Kady and Iv	y Designs									
	Amount (\$) \$200.00		Payee addre 108 Cook S		State	; Zip Co	de						
			Dayton, TX	77535									
	PURPOSE OF EXPENDITURE		Category _{(Si} Advertising	ee Categories listed Expense	at the top of this sch	edule)				de of Texas. Com officeholder living	plete Schedule T. J expense		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	(Dffice sou	ght			Office he	eld		

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fe Fo Git nmittee Le	ent Expense es od/Beverage Expense ft/Awards/Memorials E gal Services he Instruction Gui d	xpense	Office Over Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense		
1	Total pages Schedule F1:	2						2	Filer ID	(Ethics Commission Filers)		
1	Sch: 8/17 Rpt: 16/25	2	Holt, Janis A.	(Mrs.)				J	00085727			
4	Date	5	Payee name									
	01/30/2024		Kats Korner									
6	Amount (\$)	7	Payee address;	City;	State;	; Zip Co	de					
	\$10.36		130 E. Ave H									
			Silsbee, TX 7	7656								
8	PURPOSE	(a)	Category (See (Categories listed at the	top of this sch	odulo)	(b) Description					
-	OF		Meal	categories listed at the	top of this sch	leuule)		outsi	de of Texas. Com	plete Schedule T.		
	EXPENDITURE								officeholder living	expense		
							Meal during (Can	npaign			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Office	holder name	C	Office souç	Jht		Office he	eld		
	Date		Payee name									
	02/14/2024		Kats Korner									
	Amount (\$)		Payee address;	City;	State;	; Zip Co	de					
	\$10.36		130 E. Ave H									
			Silsbee, TX 7	7656								
	PURPOSE OF EXPENDITURE	(a)	Category (See C Travel In Distr	Categories listed at the rict	top of this sch	edule)			de of Texas. Com officeholder living			
							Meal					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Office	holder name	C	Office sou	Jht		Office he	eld		
	Date		Payee name									
	02/20/2024		Kats Korner									
	Amount (\$)		Payee address;	City;	State;	; Zip Co	de					
	\$66.67		130 E. Ave H									
			Silsbee, TX 7	7656								
	PURPOSE OF	(a)		Categories listed at the	top of this sch	edule)	(b) Description			alata Oshadula T		
	EXPENDITURE		Food/Beverag	je Expense				ı, ТХ,	de of Texas. Com officeholder living ation			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Office	holder name	C	Office sou	jht		Office he	eid		

	EXPENDITURE CATEGORIES FOR BOX 8(a)												
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - Gift/Awards/Memorials Expense Polling Expense Travel in District Travel out of District Travel Out of District								Equipment & Related Expense t			
1	Total pages Schedule F1:	2	FILER NAM	E					3	Filer ID	(Ethics Commission File	rs)	
	Sch: 9/17 Rpt: 17/25		Holt, Janis							00085727	·	ŕ	
4	Date	5	Payee name	;									
	02/02/2024		Kountze C	hamber of	Commerce								
6	Amount (\$)	7	Payee addre	ess; Ci	ty; Stat	e; Zip Co	ode						
	\$194.75		800 Redwo		-								
			Kountzo T	V 7760E									
			Kountze, T	X //025									
8	PURPOSE OF	(a)			listed at the top of this se	chedule)	(b)	Description					
	EXPENDITURE		Advertising	Expense							nplete Schedule T.		
								Ad in Program		officeholder livin	g expense		
								Aumenograf					
_						011				011			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Of	iceholder r	name	Office sou	ight			Office h	eld		
	Date		Payee name	;									
	02/05/2024		Liberty Cou	unty Repu	blican Party								
⊢	Amount (\$)	┢	Payee addre	ess; Ci	tv: Stat	e; Zip Co	ode						
	\$250.00		PO Box 36			-, 1							
	\$200.00		1 0 200 00										
			Liberty, TX	77575									
⊢	PURPOSE	(a)	Category (See Categories	listed at the top of this s	chedule)	(b)	Description					
	OF	 `´	Event Expe			chedule)	. ,		outsi	de of Texas. Con	nplete Schedule T.		
	EXPENDITURE							Check if Austin	, TX,	officeholder livin	g expense		
								Meet and Gre	eet	Fee			
	Complete ONLY if direct		Candidate/Of	ficeholder r	name	Office sou	ight			Office h	eld		
	expenditure to benefit C/OI	Н											
	Date	Γ	Payee name)									
	01/31/2024		Liberty ISD		on								
-	Amount (\$)	-	Payee addre	ess; Ci	hv: Stat	e; Zip Co	aha						
	\$2,500.00		1517 Trinit		iy, Siai	с, др сс	Juc						
	ψ2,300.00			y St									
			Liberty, TX	//5/5									
	PURPOSE	(a)	Category (S	See Categories	listed at the top of this se	chedule)	(b)	Description					
	OF EXPENDITURE				ons Made By						nplete Schedule T.		
			Candidate/	Officehold	der/Political Com	mittee				officeholder livin	g expense		
								Donation to F	-un	uraiser			
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Office sought Office held Office held </th												

	EXPENDITURE CATEGORIES FOR BOX 8(a)												
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp mittee Legal Services The Instruction Guide		Office Over Polling Exp Printing Exp Salaries/Wa	ense ges/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense				
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)				
	Sch: 10/17 Rpt: 18/25		Holt, Janis A. (Mrs.)					00085727					
4	Date	5	Payee name										
	01/31/2024		Lumberton Chamber of Comn	nerce									
6	Amount (\$)	7	Payee address; City;	State;	Zip Coc	e							
	\$102.00		826 N Main St										
			Lumberton, TX 77657										
8	PURPOSE	(a)	Category (See Categories listed at the t	on of this sch	(elube	b) Description							
	OF		Contributions/Donations Made		cuulc)		outsi	de of Texas. Com	plete Schedule T.				
	EXPENDITURE		Candidate/Officeholder/Politic	al Comm	ittee		, TX,	officeholder living	expense				
						Donation							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht		Office he	2ld				
	Date		Payee name										
	02/14/2024		McDonald's Restaurant										
	Amount (\$)		Payee address; City;	State;	Zip Coc	e							
	\$15.08		441 W. Southline St.										
			Cleveland, TX 77327										
	PURPOSE OF		Category (See Categories listed at the t	op of this sche	edule)	b) Description	outoi	de of Texas. Com	alata Sahadula T				
	EXPENDITURE		Travel In District					officeholder living					
						Meal							
	Complete ONLY if direct		andidate/Officeholder name	C	Office soug	ht		Office he	ld				
	expenditure to benefit C/OI	H											
	Date		Payee name										
	02/16/2024		Myers, Landon										
	Amount (\$)		Payee address; City;	State;	Zip Coc	е							
	\$204.00		7708 Rosewood Drive										
			Lumberton, TX 77657										
	PURPOSE					b) Description							
	OF		Category (See Categories listed at the t Salaries/Wages/Contract Lab		euule)		outsi	de of Texas. Com	plete Schedule T.				
	EXPENDITURE		Calance, Wagee, Contract Las					officeholder living	expense				
						Sign Placem	ent	Labor					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht		Office he	ld				

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment			nmittee Legal Services	Fees Office Food/Beverage Expense Pollin Gift/Awards/Memorials Expense Printir				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME 3				Filer ID (Ethics Commission Filers)				
	Sch: 11/17 Rpt: 19/25		Holt, Janis A. (Mrs.)					00085727			
4	Date	5	5 Payee name								
	02/20/2024		Next Day Flyers								
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	е			_		
	\$299.79		10930 Santa Monica Blvd								
			Los Angeles, CA 90025								
8	PURPOSE	(a)	Category (See Categories listed at the top	of this sche	edule)	b) Description					
	OF EXPENDITURE		Event Expense		,	Check if travel		ide of Texas. Complete Schedule T.			
								, officeholder living expense			
						Banner Back	aro	h			
0	Complete ONLY if direct		Condidate/Officebolder name		office cours	bt.		Office held			
9	expenditure to benefit C/OF		Candidate/Officeholder name	0	office soug			Onice neid			
	Date		Payee name								
	01/29/2024		Nexus Strategies								
Amount (\$) Payee address; City; State; Zip Code											
	\$5,000.00		100 S. Magnolia Dr								
			Cleveland, TX 77328								
	PURPOSE OF	(a)	Category (See Categories listed at the top	of this sche	edule)	b) Description					
	EXPENDITURE		Consulting Expense					ide of Texas. Complete Schedule T. , officeholder living expense			
						Consultant S					
	Complete ONLY if direct	(Candidate/Officeholder name	0	office soug	ht		Office held	-		
	expenditure to benefit C/OI	Н									
	Date		Payee name						=		
	02/15/2024		Nice Guy Ricky's Grill								
	Amount (\$)		Payee address; City;	State;	Zip Coo	e					
	\$620.00		192 S. LHS Dr.								
			Lumberton, TX 77657								
-	PURPOSE	(a)	Category (See Categories listed at the top	of this sche	edule)	b) Description			-		
	OF EXPENDITURE		Food/Beverage Expense		Julioy		outsi	ide of Texas. Complete Schedule T.			
	EXPENDITORE							, officeholder living expense			
						Food and Be	ver	rage For Abbott Event			
	Complete ONU V Stallaget	L	Condidate (Office helder		ffice and	ht .		Office hald	_		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	U	office soug	111		Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/ Fees Office Overhead/F Food/Beverage Expense Polling Expense By - Gift/Awards/Memorials Expense Printing Expense			yment/Reimbursement rhead/Rental Expense ense pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAM	E				3	Filer ID	(Ethics Commission Filers)
	Sch: 12/17 Rpt: 20/25		Holt, Janis	A. (Mrs.)					00085727	
4	Date	5 Payee name								
	02/15/2024		Nice Guy F	Ricky's Grill						
6	Amount (\$)	7	Payee addre	ess; City;	State;	; Zip Co	de			
	\$620.00		192 S. LHS	S Dr.						
			Lumberton	, TX 77657						
8	PURPOSE	(a)	Category (S	See Categories listed at	the top of this sch	edule)	(b) Description			
	OF EXPENDITURE		Food/Beve	rage Expense					ide of Texas. Com	
	-						Meet and Gre		, officeholder living	j expense
							Meet and Gr	eel	Gumbo	
_	Complete ONIL V if direct		Candidata/Off	Socholdor nomo			vh+		Office by	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Januluale/OII	ficeholder name	Ĺ	Office sou	Jur		Office he	eid
	Date		Payee name)						
	02/06/2024		Novroskys							
	Amount (\$)		Payee addre	ess; City;	State;	; Zip Co	de			
	\$11.05		1170 Hwy							
			,							
			Silsbee, TX	(77656						
	PURPOSE	(a)	Category (S	See Categories listed at	the top of this sch	edule)	(b) Description			
	OF EXPENDITURE		Food/Beve	rage Expense					ide of Texas. Com	
							Meet and Gre		, officeholder living	j expense
							Meet and Gr	cei		
	Complete ONIL V if direct		Candidata/Off	Socholdor nomo			vh+		Office he	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Januluale/OII	ficeholder name	(Office sou	JIIL		Once ne	eiu
		_								
	Date		Payee name							
	02/21/2024		Parker Lun							
	Amount (\$)		Payee addre		State;	; Zip Co	de			
	\$33.43		1145 S. Hv	vy 96						
			Silsbee, TX	(77656						
	PURPOSE	(a)	Category (S	See Categories listed at	the top of this sch	edule)	(b) Description			
	OF EXPENDITURE		Advertising	Expense					ide of Texas. Com	
									, officeholder living	j expense
							Supplies to p	uti	up signs	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	ficeholder name	C	Office sou	ght		Office he	eld
		•								

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political C Credit Card Payment								Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Co	ommission Filers)			
	Sch: 13/17 Rpt: 21/25		Holt, Janis A. (Mrs.)					00085727				
4	Date	5	Payee name				I					
	02/01/2024		Post Mart									
6	Amount (\$)	7	Payee address; City	y; State;	Zip Co	le						
	\$3,884.82		335 Hwy 327 W									
			Silsbe, TX 77656									
8	PURPOSE	(a)	Category (See Categories	listed at the top of this sch	edule)	(b) Description						
	OF EXPENDITURE		Advertising Expense		ŕ			ide of Texas. Complete Schedul	le T.			
								, officeholder living expense				
						Signs, push	car	ds, car magnets, bum	per stickers			
9	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH											
	Data	<u> </u>										
	Date		Payee name									
02/12/2024 Post Mart												
	Amount (\$)		Payee address; City	y; State;	Zip Co	le						
	\$974.25		335 Hwy 327 W									
			Silsbe, TX 77656									
	PURPOSE OF	(a)	Category (See Categories	listed at the top of this sch	edule)	(b) Description						
	EXPENDITURE		Advertising Expense					ide of Texas. Complete Schedul , officeholder living expense	е Т.			
						Campaign Si						
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name Office sought Office held									
	Date		Payee name									
	02/16/2024		Post Mart									
	Amount (\$)		Payee address; City	; State;	Zip Co	le						
	\$211.09		335 Hwy 327 W									
			Silsbe, TX 77656									
	PURPOSE OF		Category (See Categories Advertising Expense	listed at the top of this sch	edule)	(b) Description Check if travel	outsi	ide of Texas. Complete Schedul	e T.			
	EXPENDITURE					Check if Austir Signs	ι, TX,	, officeholder living expense				
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder n	ame C	Office sou	ıht		Office held				
-												

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment			Fees Office Overhead Food/Beverage Expense Polling Expense By - Gift/Awards/Memorials Expense Printing Expense			oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 14/17 Rpt: 22/25		Holt, Janis A. (Mrs.)					00085727		
4			Payee name							
	02/17/2024		Post Mart							
6	Amount (\$)	7	Payee address; City;	State;	; Zip Co	le				
	\$4,563.82		335 Hwy 327 W							
			Silsbe, TX 77656							
8	PURPOSE	(a)	Category (See Categories listed at the	on of this sch	edule)	(b) Description				
	OF EXPENDITURE		Advertising Expense	00 01 013 301	icuaic)		outsi	ide of Texas. Complete Schedule T.		
	EXPENDITORE							, officeholder living expense		
						Yard signs, h	and	d signs		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Ĺ	Office sou	Int		Office held		
	Date		Payee name							
	02/03/2024		San Jacinto County Republica	an Party						
	Amount (\$)		Payee address; City;	State;	; Zip Co	le				
	\$1,100.00		PO Box 370							
			Coldspring, TX 77331							
	PURPOSE OF	(a)	Category (See Categories listed at the	top of this sch	edule)	(b) Description				
	EXPENDITURE		Contributions/Donations Made Candidate/Officeholder/Politic		ittee			ide of Texas. Complete Schedule T. , officeholder living expense		
			Candidate/Onicenoider/Politic	arComm	iiilee	Fundraiser	I, I.A.	, oncentider hving expense		
	Complete ONLY if direct		andidate/Officeholder name		Office soug	Iht		Office held		
	expenditure to benefit C/OI	Н								
	Date		Payee name							
	01/30/2024		Smart, Allie							
-	Amount (\$)		Payee address; City;	State:	; Zip Co	le				
	\$60.00		301 Smart Dr.	,	, 1					
			Liberty, TX 77575							
	PURPOSE OF		Category (See Categories listed at the	op of this sch	edule)	(b) Description		ide of Touco, Complete Calendula T		
	EXPENDITURE		Event Expense					ide of Texas. Complete Schedule T. , officeholder living expense		
								for cookies for meet and greet.		
								-		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice sou	ht		Office held		
_										

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 15/17 Rpt: 23/25	Holt, Janis A. (Mrs.)	00085727						
4	Date	5 Payee name							
	02/06/2024	Smart, Allie							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$1,100.00	301 Smart Dr.							
		Liberty, TX 77575							
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	utside of Taylog, Complete Cabadula T						
	EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense						
		Scheduler							
_									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
02/13/2024 Smart, Allie									
	Amount (\$)	Payee address; City; State; Zip Code							
	\$20.00 301 Smart Dr.								
		Liberty, TX 77575							
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense						
			nt for Supplies						
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	02/16/2024	Studio One Three							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$100.00	27384 Wagon Wheel							
		Splendora, TX 77372							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE		utside of Texas. Complete Schedule T.						
		Podcast Adve	TX, officeholder living expense rtisement						
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held						
	expenditure to benefit C/OI								

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						ment/Reimbursement nead/Rental Expense ense iense iges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 16/17 Rpt: 24/25		Holt, Janis A. (Mrs.)					00085727		
4	Date 02/15/2024		Payee name Subway							
_										
6	Amount (\$)		Payee address; City;	State;	Zip Cod	e				
	\$9.61		10720 Hwy 146 N							
		:	Suite B							
		'	Liberty, TX 77575							
8	PURPOSE	(a)	Category (See Categories listed at the	top of this sche	edule) (b) Description				
	OF EXPENDITURE	OF Travel In District Check if travel outside of Texas. Complete Schedule T.								
9	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held								ld	
	Date		Payee name							
	02/08/2024	·	The Vindicator							
	Amount (\$)		Payee address; City;	State;	Zip Cod	e				
	\$525.00		1939 Trinity		·					
			Liberty, TX 77575		<u> </u>					
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Newspaper Ad										
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Of)ffice soug	ht		Office he	ld	
	Date		Payee name							
	02/06/2024		Trinity Valley Exposition							
	Amount (\$)		Payee address; City;	State	Zip Cod	۵				
	\$800.00		321 Wallisville Rd	01110,	-ih					
			Liberty, TX 77575							
	PURPOSE OF EXPENDITURE	(Category (See Categories listed at the Contributions/Donations Mac Candidate/Officeholder/Politi	de By	,		, TX,	de of Texas. Comp officeholder living ndraiser		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Of	office soug	ht		Office he	ld	

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1: Sch: 17/17 Rpt: 25/25	2 FILER NAME Holt, Janis A. (Mrs.)		3	Filer ID 00085727	(Ethics Commission Filers)				
4	Date	5 Payee name								
-	02/14/2024	Walmart								
6	Amount (\$) \$17.61	 Payee address; City; State; Zip Co Hwy 96 Silsbee, TX 77656 	de							
8	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Baskets and Pens									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sour	ght		Office he	ld				
	Date	Payee name								
	02/15/2024	Wright, Dwayne								
Amount (\$) Payee address; City; State; Zip Code										
	\$900.00	100 S. Magnolia Dr Cleveland, TX 77328								
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description							
	OF EXPENDITURE	Event Expense	outside of Texas. Complete Schedule T. n, TX, officeholder living expense er for Events							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sou	ght		Office he	ld				