CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to comp	lete this form.	1 Filer ID (Ethics Commi 00019422	,	2 Total pages	filed: 8
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		USE ONLY
	Mr.	James E.				
NAME					Date Received	
						CALLY FILED
	NICKNAME	LAST		SUFFIX	07/12/2024	
	Pete	Laney				
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	ΓY;	ZIP CODE	Date Hand-delivered	d or Date Postmarked
OFFICEHOLDER	1082 FM 1071					
MAILING ADDRESS					Receipt #	Amount
Change of Address	Hale Center, TX 79041				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER NAME	The Honorable	James E.				
	NICKNAME	LAST		SUFFIX		
	Pete	Laney				
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE)	ΔΡ	r / SUITE #; CITY;	S.	TATE; ZIP CODE
TREASURER	1082 FM 1071		7.4		0	
ADDRESS						
(Residence or Business)						
	Hale Center, TX 79041					
7 CAMPAIGN	AREA CODE PHO	NE NUMBER	EXTENSION			
TREASURER	(806) 879-4706		EXTENSION			
PHONE	(800) 879-4700					
8 REPORT						
TYPE	January 15	30th day before	e election	Runoff	15th day after o	campaign treasurer
						fficeholder only)
	X July 15	8th day before	election	Exceeded modified reporting limit	Final Report (A	ttach C/OH-FR)
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2024	TI	HROUGH	06/30/2024	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year		Primary	Runoff	Other	
			General	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
II OFFICE	None			None		
		GO ⁻	TO PAGE 2			
Forms provided by Te	exas Ethics Commission		thics.state.tx.u	\$		sion V4.1.0.d378aba0
		*****		0	v Ci s	

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2 2 of 8

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13 C / OH NAME	Laney, James E. (Mr)	14 Filer ID (l 00019422	Ethics Commi	ssion Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditur These expenditures may have been made without the officeholders are required to report this information	he candidate's or office	holder's know	ledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	S		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$	0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
EXPENDITURE TOTALS					0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$	7,911.00
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA RIOD	AST DAY OF THE	\$	18,383.95
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS (TING PERIOD	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes all under Title 15, Election Code.			
		Mr. J	James E. Laney		
		Signature of	Candidate or Officehold	ler	
AFFIX NO	TARY STAMP / SEAL AB	DVE			
Sworn to and subs	cribed before me, by the s	aid	, this the		day
of	, 20, to ca	ertify which, witness my hand and seal of office.			
Signature of offi	cer administering	Printed name of officer administering	Title of officer	administering	l oath
Forms provided by Te	exas Ethics Commission	www.ethics.state.tx.us	V	/ersion V4.1	.0.d378aba0

SUBTOTALS - C/OH	co	FORM C/OH OVER SHEET PG 3 3 of 8
18 FILER NAME Laney, James E. (Mr.)	19 Filer ID 00019422	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
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 CONTRIBUTIONS	5	\$ 4,143.00
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$
8. X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 3,768.00
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 CONTRIBUTIO	DNS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1						
	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: Sch: 1/3 Rpt: 4/8	2 FILER NAME 3 Laney, James E. (Mr.)	Filer ID (Ethics Commission Filers) 00019422			
4	Date 01/30/2024	5 Payee name Chase				
6	Amount (\$) \$628.00	 Payee address; City; State; Zip Code Cardmember Services P.O. Box 94014 Palatine, IL 60094-4014 				
8	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. X, officeholder living expense dit card bill for storage expense.			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held			
	Date 02/23/2024 Amount (\$)	Payee name Chase Payee address; City; State; Zip Code				
	\$628.00	Cardmember Services P.O. Box 94014 Palatine, IL 60094-4014				
	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. X, officeholder living expense dit card bill for storage expense.			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held			
	Date 03/26/2024	Payee name Chase				
	Amount (\$) \$628.00	Payee address; City; State; Zip Code Cardmember Services P.O. Box 94014 Palatine, IL 60094-4014				
	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. X, officeholder living expense dit card bill for storage expense.			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held			

CONTRIBUTIO	PENDITURES FROM POLITICAL	SCHEDULE F1
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		/Reinbursement Solicitation/Fundraising Expense Rental Expense Transportation Equipment & Related Expense Travel in District Travel Out of District Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule F1: Sch: 2/3 Rpt: 5/8	2 FILER NAME Laney, James E. (Mr.)	3 Filer ID (Ethics Commission Filers 00019422
4 Date 04/19/2024	5 Payee name Chase	
6 Amount (\$) \$628.00	7 Payee address; City; State; Zip Code Cardmember Services P.O. Box 94014 Palatine, IL 60094-4014	
8 PURPOSE OF EXPENDITURE	Credit Card Payment	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payment of credit card bill for storage expense.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
Date 05/25/2024	Payee name Chase	
Amount (\$) \$628.00	Payee address; City; State; Zip Code Cardmember Services P.O. Box 94014 Palatine, IL 60094-4014	
PURPOSE OF EXPENDITURE	Credit Card Payment	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payment of credit card bill for storage expense.
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
Date 06/23/2024	Payee name Chase	
Amount (\$) \$628.00	Payee address; City; State; Zip Code Cardmember Services P.O. Box 94014 Palatine, IL 60094-4014	
PURPOSE OF EXPENDITURE	Credit Card Payment	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payment of credit card bill for storage expense.
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

dvertising Expense accounting/Banking consulting Expense contributions/ Donations Made By Candidate/Officeholder/Politica credit Card Payment	EXPENDITURE CATEGORIES FOR BOX 8(a) 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 I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
tal nages Schedule E1:	
	Laney, James E. (Mr.) 00019422
	5 Payee name
/17/2024	Lewis Kaufman Reid Stukey Gattis & Co., PC
nount (\$) \$375.00	 Payee address; City; State; Zip Code 2308 West 5th Plainview, TX 79072
PURPOSE OF XPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Tax return preparation - Form 1120-POL.
omplete <u>ONLY</u> if direct penditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	ccounting/Banking onsulting Expense ontributions/ Donations Made By Candidate/Officeholder/Politica redit Card Payment tal pages Schedule F1: Sch: 3/3 Rpt: 6/8 ite /17/2024 hount (\$) \$375.00 PURPOSE OF XPENDITURE

SCHEDULE F4

	EXPENDITURE CATEGORIES FOR BOX 10(a)							
				Loan Repayment/Reimbursement Office Overhead/Rental Expense		blicitation/Fundraising		Exponso
Consulting Expense		Food/Beve	rage Expense	Polling Expense	Tra	ansportation Equipme avel in District	ni a Reialeu	Expense
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee		l Committee Legal Serv	s/Memorials Expense ices	Printing Expense Salaries/Wages/Contract Labor		avel Out of District THER (enter a catego	ry not listed a	oove)
	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)
	Sch: 1/2 Rpt: 7/8	Laney, James E. (N	1r.)			00019422		
4	CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITE	MIZED			
	ISSUER	Ch	ase	EXPENDITURES \$ CHARGED TO A CREDIT				
				CARD	ONEDIT			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Ca	rd Issuei	r Paid		
		\$628.00	01/08/2024	01/30/2024				
		4020.00	01/00/2024					
7	PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code
				6412 Burnet Road				
		Extra Space Storag	e					
				Austin, TX 78757				
8	PURPOSE OF	(a) Category		(b) Description				
	EXPENDITURE	(See Categories listed at the top		Storage expense.				
	X Political	Office Overhead/Ren	tal Expense					
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule		Auctin TV	officeholder living exp	0000	
9	Complete <u>ONLY</u> if direct	Candidate/Officeholder	•	Diffice sought	Ausun, TA,	Office held	Jense	
	xpenditure to benefit C/OH	Candidate, Oniceriolaei		Since Sought		Office field		
Ĕ		(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Ca	rd Issue	r Paid		
				02/23/2024	10 155001			
		\$628.00	02/08/2024					
-	PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code
		(a) r ayee hame		6412 Burnet Road		ony,	otato,	Lip Couc
		Extra Space Storage		0412 Bumet Roud				
				Austin, TX 78757				
⊢	PURPOSE OF	(a) Category		(b) Description				
	EXPENDITURE	(See Categories listed at the top		Storage expense.				
	X Political	Office Overhead/Rental Expense						
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule		Austin TX	officeholder living exp	ense	
⊢	Complete <u>ONLY</u> if direct	Candidate/Officeholder		Office sought	uoun, iv,	Office held		
е	xpenditure to benefit C/OH							
⊢	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Ca	rd Issue	r Paid		
		\$628.00	03/08/2024	03/26/2024				
		Φ020.00	03/06/2024					
⊢	PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code
		(a) r ayee hame		6412 Burnet Road		ony,	otato,	Lip Couc
		Extra Space Storag	e	0412 Bumet Road				
				Austin, TX 78757				
⊢	PURPOSE OF	(a) Category		(b) Description				
	EXPENDITURE	(See Categories listed at the top		Storage expense.				
	X Political	Office Overhead/Ren	tal Expense					
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if A	Austin TX	officeholder living exp	oense	
⊢	Complete <u>ONLY</u> if direct	Candidate/Officeholder		Office sought		Office held		
e e	xpenditure to benefit C/OH							
Ĕ								

SCHEDULE F4

	EXPENDITURE CATEGORIES FOR BOX 10(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Gift/Award Legal Serv	rage Expense s/Memorials Expense ices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising I Transportation Equipmen Travel in District Travel Out of District OTHER (enter a categor	nt & Related		
		ruction Guide explains h	ow to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethic	cs Commiss	sion Filers)		
Sch: 2/2 Rpt: 8/8	Laney, James E. (N	Ar.)		00019422			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CRED CARD	\$			
6 PAYMENT	(a) Amount Charged \$628.00	(b) Date of Charge 04/08/2024	(c) Date(s) Credit Card Issu 04/19/2024	uer Paid			
7 PAYEE	(a) Payee name	1	(b) Payee address;	City,	State,	Zip Code	
	Extra Space Storag	je	6412 Burnet Road				
8 PURPOSE OF	(a) Category		Austin, TX 78757 (b) Description				
	(See Categories listed at the top Office Overhead/Rent		Storage expense.				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T Check if Austin 1	TX, officeholder living exp	ense		
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder		ffice sought	Office held			
expenditure to benefit C/OH			U U				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	uer Paid			
	\$628.00	05/08/2024	05/25/2024				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Extra Space Storage		6412 Burnet Road Austin, TX 78757				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top		Storage expense.				
X Political	Office Overhead/Rental Expense						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, 1	TX, officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder	•	ffice sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	uer Paid			
	\$628.00	06/08/2024	06/23/2024				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Extra Space Storag	je	6412 Burnet Road				
	(a) Catagory		Austin, TX 78757 (b) Description				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	Storage expense.				
X Political	Office Overhead/Ren	tal Expense					
Non-Political		of Texas. Complete Schedule		FX, officeholder living exp	ense		
Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	ffice sought	Office held			
expenditure to benefit C/OH							