

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

|                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                             |                                                                                                                             |                                                                                            |                                                   |                                                                                          |                                                                                                                                                                      |                                  |                                                  |                                                            |                                                        |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|---------------------------------------------------|------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|--------------------------------------------------|------------------------------------------------------------|--------------------------------------------------------|
| <b>The C/OH Instruction Guide explains how to complete this form.</b>                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <b>1</b> Filer ID<br>(Ethics Commission Filers)<br>00080038 | <b>2</b> Total pages filed:<br>5                                                                                            |                                                                                            |                                                   |                                                                                          |                                                                                                                                                                      |                                  |                                                  |                                                            |                                                        |
| <b>3</b> CANDIDATE / OFFICEHOLDER NAME                                                                                                                                  | <table style="width: 100%;"> <tr> <td style="width: 30%;">MS / MRS / MR<br/>The Honorable</td> <td style="width: 30%;">FIRST<br/>Philip Mack</td> <td style="width: 40%;">MI<br/>MI</td> </tr> </table>                                                                                                                                                                                                                                                                                                                                                             |                                                             | MS / MRS / MR<br>The Honorable                                                                                              | FIRST<br>Philip Mack                                                                       | MI<br>MI                                          | <b>OFFICE USE ONLY</b><br><br>Date Received<br><b>ELECTRONICALLY FILED</b><br>01/14/2026 |                                                                                                                                                                      |                                  |                                                  |                                                            |                                                        |
|                                                                                                                                                                         | MS / MRS / MR<br>The Honorable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | FIRST<br>Philip Mack                                        | MI<br>MI                                                                                                                    |                                                                                            |                                                   |                                                                                          |                                                                                                                                                                      |                                  |                                                  |                                                            |                                                        |
| <table style="width: 100%;"> <tr> <td style="width: 30%;">NICKNAME</td> <td style="width: 30%;">LAST<br/>Furlow</td> <td style="width: 40%;">SUFFIX</td> </tr> </table> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | NICKNAME                                                    | LAST<br>Furlow                                                                                                              | SUFFIX                                                                                     |                                                   |                                                                                          |                                                                                                                                                                      |                                  |                                                  |                                                            |                                                        |
| NICKNAME                                                                                                                                                                | LAST<br>Furlow                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | SUFFIX                                                      |                                                                                                                             |                                                                                            |                                                   |                                                                                          |                                                                                                                                                                      |                                  |                                                  |                                                            |                                                        |
| <b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS<br><br><input type="checkbox"/> Change of Address                                                                     | ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE<br>502 SW 23rd<br><br>Seminole, TX 79360                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                             | Date Hand-delivered or Date Postmarked                                                                                      |                                                                                            |                                                   |                                                                                          |                                                                                                                                                                      |                                  |                                                  |                                                            |                                                        |
|                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                             | <table style="width: 100%;"> <tr> <td style="width: 50%;">Receipt #</td> <td style="width: 50%;">Amount</td> </tr> </table> | Receipt #                                                                                  | Amount                                            |                                                                                          |                                                                                                                                                                      |                                  |                                                  |                                                            |                                                        |
|                                                                                                                                                                         | Receipt #                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Amount                                                      |                                                                                                                             |                                                                                            |                                                   |                                                                                          |                                                                                                                                                                      |                                  |                                                  |                                                            |                                                        |
|                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                             | Date Processed                                                                                                              |                                                                                            |                                                   |                                                                                          |                                                                                                                                                                      |                                  |                                                  |                                                            |                                                        |
|                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Date Imaged                                                 |                                                                                                                             |                                                                                            |                                                   |                                                                                          |                                                                                                                                                                      |                                  |                                                  |                                                            |                                                        |
| <b>5</b> CAMPAIGN TREASURER NAME                                                                                                                                        | <table style="width: 100%;"> <tr> <td style="width: 30%;">MS / MRS / MR<br/>Mr.</td> <td style="width: 30%;">FIRST<br/>Don</td> <td style="width: 40%;">MI<br/>MI</td> </tr> </table>                                                                                                                                                                                                                                                                                                                                                                               |                                                             |                                                                                                                             | MS / MRS / MR<br>Mr.                                                                       | FIRST<br>Don                                      | MI<br>MI                                                                                 |                                                                                                                                                                      |                                  |                                                  |                                                            |                                                        |
|                                                                                                                                                                         | MS / MRS / MR<br>Mr.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | FIRST<br>Don                                                | MI<br>MI                                                                                                                    |                                                                                            |                                                   |                                                                                          |                                                                                                                                                                      |                                  |                                                  |                                                            |                                                        |
| <table style="width: 100%;"> <tr> <td style="width: 30%;">NICKNAME</td> <td style="width: 30%;">LAST<br/>Vogler</td> <td style="width: 40%;">SUFFIX</td> </tr> </table> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                             | NICKNAME                                                                                                                    | LAST<br>Vogler                                                                             | SUFFIX                                            |                                                                                          |                                                                                                                                                                      |                                  |                                                  |                                                            |                                                        |
| NICKNAME                                                                                                                                                                | LAST<br>Vogler                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | SUFFIX                                                      |                                                                                                                             |                                                                                            |                                                   |                                                                                          |                                                                                                                                                                      |                                  |                                                  |                                                            |                                                        |
| <b>6</b> CAMPAIGN TREASURER ADDRESS<br><br>(Residence or Business)                                                                                                      | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br>1509 S. 8th St.<br><br>Lamesa, TX 79331                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                             |                                                                                                                             |                                                                                            |                                                   |                                                                                          |                                                                                                                                                                      |                                  |                                                  |                                                            |                                                        |
|                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                             |                                                                                                                             |                                                                                            |                                                   |                                                                                          |                                                                                                                                                                      |                                  |                                                  |                                                            |                                                        |
| <b>7</b> CAMPAIGN TREASURER PHONE                                                                                                                                       | AREA CODE PHONE NUMBER EXTENSION<br>(806) 872-3725                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                             |                                                                                                                             |                                                                                            |                                                   |                                                                                          |                                                                                                                                                                      |                                  |                                                  |                                                            |                                                        |
| <b>8</b> REPORT TYPE                                                                                                                                                    | <table style="width: 100%;"> <tr> <td><input checked="" type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded modified reporting limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH-FR)</td> </tr> </table> |                                                             |                                                                                                                             | <input checked="" type="checkbox"/> January 15                                             | <input type="checkbox"/> 30th day before election | <input type="checkbox"/> Runoff                                                          | <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)                                                                           | <input type="checkbox"/> July 15 | <input type="checkbox"/> 8th day before election | <input type="checkbox"/> Exceeded modified reporting limit | <input type="checkbox"/> Final Report (Attach C/OH-FR) |
|                                                                                                                                                                         | <input checked="" type="checkbox"/> January 15                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/> 30th day before election           | <input type="checkbox"/> Runoff                                                                                             | <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) |                                                   |                                                                                          |                                                                                                                                                                      |                                  |                                                  |                                                            |                                                        |
| <input type="checkbox"/> July 15                                                                                                                                        | <input type="checkbox"/> 8th day before election                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Exceeded modified reporting limit  | <input type="checkbox"/> Final Report (Attach C/OH-FR)                                                                      |                                                                                            |                                                   |                                                                                          |                                                                                                                                                                      |                                  |                                                  |                                                            |                                                        |
|                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                             |                                                                                                                             |                                                                                            |                                                   |                                                                                          |                                                                                                                                                                      |                                  |                                                  |                                                            |                                                        |
| <b>9</b> PERIOD COVERED                                                                                                                                                 | Month Day Year                      Month Day Year<br>07/01/2025                      THROUGH                      12/31/2025                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                             |                                                                                                                             |                                                                                            |                                                   |                                                                                          |                                                                                                                                                                      |                                  |                                                  |                                                            |                                                        |
|                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                             |                                                                                                                             |                                                                                            |                                                   |                                                                                          |                                                                                                                                                                      |                                  |                                                  |                                                            |                                                        |
| <b>10</b> ELECTION                                                                                                                                                      | <table style="width: 100%;"> <tr> <td style="width: 40%;">ELECTION DATE<br/>Month Day Year</td> <td style="width: 60%;">ELECTION TYPE</td> </tr> <tr> <td></td> <td> <input type="checkbox"/> Primary                      <input type="checkbox"/> Runoff                      <input type="checkbox"/> Other<br/> <input type="checkbox"/> General                      <input type="checkbox"/> Special                 </td> </tr> </table>                                                                                                                     |                                                             |                                                                                                                             | ELECTION DATE<br>Month Day Year                                                            | ELECTION TYPE                                     |                                                                                          | <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other<br><input type="checkbox"/> General <input type="checkbox"/> Special |                                  |                                                  |                                                            |                                                        |
|                                                                                                                                                                         | ELECTION DATE<br>Month Day Year                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ELECTION TYPE                                               |                                                                                                                             |                                                                                            |                                                   |                                                                                          |                                                                                                                                                                      |                                  |                                                  |                                                            |                                                        |
|                                                                                                                                                                         | <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other<br><input type="checkbox"/> General <input type="checkbox"/> Special                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |                                                                                                                             |                                                                                            |                                                   |                                                                                          |                                                                                                                                                                      |                                  |                                                  |                                                            |                                                        |
|                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                             |                                                                                                                             |                                                                                            |                                                   |                                                                                          |                                                                                                                                                                      |                                  |                                                  |                                                            |                                                        |
| <b>11</b> OFFICE                                                                                                                                                        | OFFICE HELD (if any)<br>District Attorney (Multi-county) District 106                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                             |                                                                                                                             |                                                                                            |                                                   |                                                                                          |                                                                                                                                                                      |                                  |                                                  |                                                            |                                                        |
|                                                                                                                                                                         | <b>12</b> OFFICE SOUGHT (if known)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                             |                                                                                                                             |                                                                                            |                                                   |                                                                                          |                                                                                                                                                                      |                                  |                                                  |                                                            |                                                        |

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

2 of 5

|                       |                                     |                    |                                        |
|-----------------------|-------------------------------------|--------------------|----------------------------------------|
| <b>13 C / OH NAME</b> | Furlow, Philip Mack (The Honorable) | <b>14 Filer ID</b> | (Ethics Commission Filers)<br>00080038 |
|-----------------------|-------------------------------------|--------------------|----------------------------------------|

|                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                |                                      |
|-------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|
| <b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b><br><input type="checkbox"/> Additional Pages | This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. |                                      |
|                                                                                           | COMMITTEE TYPE                                                                                                                                                                                                                                                                                                                                                                                 | COMMITTEE NAME                       |
|                                                                                           | <input type="checkbox"/> GENERAL                                                                                                                                                                                                                                                                                                                                                               | COMMITTEE ADDRESS                    |
|                                                                                           | <input type="checkbox"/> SPECIFIC                                                                                                                                                                                                                                                                                                                                                              | COMMITTEE CAMPAIGN TREASURER NAME    |
|                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                | COMMITTEE CAMPAIGN TREASURER ADDRESS |

|                               |                                                                                                                                       |    |      |
|-------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|----|------|
| <b>16 CONTRIBUTION TOTALS</b> | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ | 0.00 |
|                               | 2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)                                           | \$ | 0.00 |
| EXPENDITURE TOTALS            | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES                                                                                            | \$ | 0.00 |
|                               | 4. <b>TOTAL POLITICAL EXPENDITURES</b>                                                                                                | \$ | 0.00 |
| CONTRIBUTION BALANCE          | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD                                                | \$ | 0.00 |
| OUTSTANDING LOAN TOTALS       | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD                                         | \$ | 0.00 |

|                                                                                                                                                                                          |                                       |                                     |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|-------------------------------------|
| <b>17 AFFIDAVIT</b>                                                                                                                                                                      |                                       |                                     |
| I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. |                                       |                                     |
| The Honorable Philip Mack Furlow<br>_____<br>Signature of Candidate or Officeholder                                                                                                      |                                       |                                     |
| AFFIX NOTARY STAMP / SEAL ABOVE                                                                                                                                                          |                                       |                                     |
| Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.                                        |                                       |                                     |
| Signature of officer administering                                                                                                                                                       | Printed name of officer administering | Title of officer administering oath |

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

3 of 5

|                                                             |                                                                                                             |                                |                            |
|-------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|--------------------------------|----------------------------|
| <b>18 FILER NAME</b><br>Furlow, Philip Mack (The Honorable) |                                                                                                             | <b>19 Filer ID</b><br>00080038 | (Ethics Commission Filers) |
| <b>20 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE            |                                                                                                             | SUBTOTAL AMOUNT                |                            |
| 1.                                                          | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                           | \$                             | 0.00                       |
| 2.                                                          | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS             | \$                             | 0.00                       |
| 3.                                                          | <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS                                       | \$                             | 0.00                       |
| 4.                                                          | <input checked="" type="checkbox"/> SCHEDULE E: LOANS                                                       | \$                             | 0.00                       |
| 5.                                                          | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS        | \$                             | 0.00                       |
| 6.                                                          | <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS                                | \$                             | 0.00                       |
| 7.                                                          | <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS       | \$                             | 0.00                       |
| 8.                                                          | <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                           | \$                             | 0.00                       |
| 9.                                                          | <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS                  | \$                             | 0.00                       |
| 10.                                                         | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH             | \$                             |                            |
| 11.                                                         | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                | \$                             |                            |
| 12.                                                         | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$                             |                            |

# PLEDGED CONTRIBUTIONS

## SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:  
Sch: 1/1 Rpt: 4/5

2 FILER NAME

Furlow, Philip Mack (The Honorable)

3 Filer ID (Ethics Commission Filers)  
00080038

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

7 Pledgor Address; City; State; Zip Code

8 Amount of  
pledge (\$)

9 In-kind description  
(If applicable)

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

# LOANS

## SCHEDULE E

|                                                                                |                                                                                |                                                                                                                        |
|--------------------------------------------------------------------------------|--------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>               |                                                                                | <b>1</b> Total pages Schedule E:<br>Sch: 1/1 Rpt: 5/5                                                                  |
| <b>2</b> FILER NAME<br>Furlow, Philip Mack (The Honorable)                     |                                                                                | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080038                                                               |
| <b>4</b> TOTAL OF UNITEMIZED LOANS                                             |                                                                                | <b>\$</b> 0.00                                                                                                         |
| <b>5</b> Date of loan                                                          | <b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) | <b>9</b> Loan Amount (\$)                                                                                              |
| <b>6</b> Is lender a financial institution?                                    | <b>8</b> Lender address; City; State; Zip Code                                 | <b>10</b> Interest Rate                                                                                                |
|                                                                                |                                                                                | <b>11</b> Maturity Date                                                                                                |
| <b>12</b> Principal occupation / Job title (See Instructions)                  |                                                                                | <b>13</b> Employer (See Instructions)                                                                                  |
| <b>14</b> Description of Collateral<br><input type="checkbox"/> None           |                                                                                | <b>15</b> Check if personal funds were deposited into political account (See Instructions)<br><input type="checkbox"/> |
| <b>16</b> GUARANTOR INFORMATION<br><br><input type="checkbox"/> not applicable | <b>17</b> Name of guarantor                                                    | <b>19</b> Amount Guaranteed (\$)                                                                                       |
|                                                                                | <b>18</b> Guarantor address; City; State; Zip Code                             |                                                                                                                        |
| <b>20</b> Principal occupation                                                 |                                                                                | <b>21</b> Employer (See Instructions)                                                                                  |