

**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

**FORM C/OH  
COVER SHEET PG 1**

|   |  |                   |  |   |        |          |
|---|--|-------------------|--|---|--------|----------|
| The C/OH Instruction Guide explains how to complete this form.  |  |                   | 1 Filer ID<br>(Ethics Commission Filers)<br>00089797   | 2 Total pages filed:<br>7   |        |          |
| 3 CANDIDATE /<br>OFFICEHOLDER<br>NAME   | MS / MRS / MR<br>Mr.   | FIRST<br>Jason    | MI   | <b>OFFICE USE ONLY</b>  |        |          |
|   | NICKNAME   | LAST<br>Eddington | SUFFIX   | Date Received<br>ELECTRONICALLY FILED<br>01/15/2026                     |        |          |
| 4 CANDIDATE /<br>OFFICEHOLDER<br>MAILING<br>ADDRESS<br><br><input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY;<br>P.O. Box 99<br><br>Crandall, TX 75114  |                   |  | Date Hand-delivered or Date Postmarked                                  |        |          |
|   |  |                   |  | Receipt #   | Amount |          |
|   |  |                   |  | Date Processed  |        |          |
|   |  |                   |  | Date Imaged   |        |          |
| 5 CAMPAIGN<br>TREASURER<br>NAME   | MS / MRS / MR  | FIRST<br>Will     | MI   |   |        |          |
|   | NICKNAME   | LAST<br>Smith     | SUFFIX   |   |        |          |
| 6 CAMPAIGN<br>TREASURER<br>ADDRESS<br><br>(Residence or Business)                                     | STREET ADDRESS (NO PO BOX PLEASE);<br>6060 Village Bend Dr.<br><br>#2205<br>Dallas, TX 75206   |                   | APT / SUITE #;   | CITY;   | STATE; | ZIP CODE |
| 7 CAMPAIGN<br>TREASURER<br>PHONE  | AREA CODE<br>(806) 317-0060  | PHONE NUMBER      | EXTENSION  |   |        |          |
| 8 REPORT<br>TYPE  | <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)<br><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) |                   |  |   |        |          |
| 9 PERIOD<br>COVERED   | Month<br>08/16/2025  | Day               | Year   | Month<br>12/31/2025   | Day    | Year     |
| 10 ELECTION   | ELECTION DATE<br>Month<br>03/03/2026   |                   | ELECTION TYPE<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other<br><input type="checkbox"/> General <input type="checkbox"/> Special |   |        |          |
| 11 OFFICE   | OFFICE HELD (if any)   |                   |  | 12 OFFICE SOUGHT (if known)<br>State Senator Place St Senate District 2 |        |          |

**GO TO PAGE 2**

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS**

**FORM C/OH  
COVER SHEET PG 2**

2 of 7

|  |  |                                      |   |
|--|--|--------------------------------------|---|
| 13 C / OH NAME                                 | Eddington, Jason (Mr.)   |                                      | 14 Filer ID<br>(Ethics Commission Filers)<br>00089797 |
| 15 NOTICE<br>FROM<br>POLITICAL<br>COMMITTEE(S) | 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. |                                      |   |
| <input type="checkbox"/> Additional Pages      | COMMITTEE TYPE<br><input type="checkbox"/> GENERAL<br><input type="checkbox"/> SPECIFIC  | COMMITTEE NAME                       |   |
|  |  | COMMITTEE ADDRESS                    |   |
|  |  | COMMITTEE CAMPAIGN TREASURER NAME    |   |
|  |  | COMMITTEE CAMPAIGN TREASURER ADDRESS |   |
| 16 CONTRIBUTION<br>TOTALS                      | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS,<br>OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)   |                                      | \$ 0.00   |
|  | 2. <b>TOTAL POLITICAL CONTRIBUTIONS</b><br>(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)   |                                      | \$ 2,050.00   |
| EXPENDITURE<br>TOTALS                          | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES   |                                      | \$ 1,625.00   |
|  | 4. <b>TOTAL POLITICAL EXPENDITURES</b>   |                                      | \$ 4,623.80   |
| CONTRIBUTION<br>BALANCE                        | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE<br>REPORTING PERIOD  |                                      | \$ 375.00   |
| OUTSTANDING<br>LOAN TOTALS                     | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY<br>OF THE REPORTING PERIOD   |                                      | \$ 0.00   |

**17 AFFIDAVIT**

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.

Mr. Jason Eddington

\_\_\_\_\_  
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 7

|  |  |
|--|--|
| <b>18</b> FILER NAME<br>Eddington, Jason (Mr.)   | <b>19</b> Filer ID<br>(Ethics Commission Filers)<br>00089797 |
| <b>20</b> SCHEDULE SUBTOTALS<br>NAME OF SCHEDULE   |  |
| 1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                               |  |
| 2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                            |  |
| 3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS  |  |
| 4. <input type="checkbox"/> SCHEDULE E: LOANS  |  |
| 5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS            |  |
| 6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS   |  |
| 7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS                      |  |
| 8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD  |  |
| 9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS                      |  |
| 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<br>TO FILER |  |
| SUBTOTAL AMOUNT  |  |
| \$ 2,050.00  |  |
| \$   |  |
| \$   |  |
| \$   |  |
| \$   |  |
| \$ 1,659.90  |  |
| \$   |  |
| \$   |  |
| \$   |  |
| \$   |  |
| \$ 2,963.90  |  |
| \$   |  |
| \$   |  |
| \$   |  |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|   |   |  |
|---|---|--|
| <p><b>The Instruction Guide explains how to complete this form.</b></p> |   | <p><b>1</b> Total pages Schedule A1:<br/>Sch: 1/1 Rpt: 4/7</p>   |
| <p><b>2</b> FILER NAME<br/>Eddington, Jason (Mr.)</p>                   |   | <p><b>3</b> Filer ID (Ethics Commission Filers)<br/>00089797</p> |
| <p><b>4</b> Date<br/>11/12/2025</p>                                     | <p><b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br/>Lauren Eddington PLLC<br/>.....<br/><b>6</b> Contributor address; City; State; Zip Code<br/><br/>Forney, TX 75126</p> | <p><b>7</b> Amount of Contribution (\$)<br/>\$1,250.00</p>       |
| <p><b>8</b> Principal occupation / Job title (See Instructions)</p>     |   | <p><b>9</b> Employer (See Instructions)</p>                      |
| <p>Date<br/>09/26/2025</p>  | <p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br/>Lauren Eddington PLLC<br/>.....<br/>Contributor address; City; State; Zip Code<br/><br/>Forney, TX 75126</p>                   | <p>Amount of Contribution (\$)<br/>\$400.00</p>                  |
| <p>Principal occupation / Job title (See Instructions)</p>              |   | <p>Employer (See Instructions)</p>                               |
| <p>Date<br/>10/27/2025</p>  | <p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br/>Lauren Eddington PLLC<br/>.....<br/>Contributor address; City; State; Zip Code<br/><br/>Forney, TX 75126</p>                   | <p>Amount of Contribution (\$)<br/>\$400.00</p>                  |
| <p>Principal occupation / Job title (See Instructions)</p>              |   | <p>Employer (See Instructions)</p>                               |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

|   |                               |                                |  |
|---|-------------------------------|--------------------------------|--|
| Advertising Expense   | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking  | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense  | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Credit Card Payment   | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

|   |  |   |
|---|--|---|
| 1 Total pages Schedule F1:<br>Sch: 1/1 Rpt: 5/7       | 2 FILER NAME<br>Eddington, Jason (Mr.)   | 3 Filer ID (Ethics Commission Filers)<br>00089797   |
| 4 Date<br>11/10/2025                                  | 5 Payee name<br>GOP  |   |
| 6 Amount (\$)<br>\$1,500.00                           | 7 Payee address; City; State; Zip Code<br>1501 Congress Ave<br><br>Austin, TX 78701      |   |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Fees                 | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Application for Filing to be on ballot |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought   | Office held   |
| Date<br>12/23/2025                                    | Payee name<br>Quickbooks   |   |
| Amount (\$)<br>\$159.90                               | Payee address; City; State; Zip Code<br>2700 Coast Avenue<br><br>Mountain View, CA 94043 |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Accounting/Banking   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Accounting                             |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought   | Office held   |

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

|  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Credit Card Payment  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

|  |   |  |             |
|--|---|--|-------------|
| 1 Total pages Schedule G:<br>Sch: 1/2 Rpt: 6/7               | 2 FILER NAME<br>Eddington, Jason (Mr.)  | 3 Filer ID (Ethics Commission Filers)<br>00089797  |             |
| 4 Date<br>12/20/2025   | 5 Payee name<br>Custom Order Prints   |  |             |
| 6 Amount (\$)<br>\$231.63                                    | 7 Payee address; City; State; Zip Code<br>11861 N Profit Row<br><br>Forney, TX 75126    |  |             |
| 8 PURPOSE<br>OF<br>EXPENDITURE                               | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Yard Signs |             |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought  | Office held |
| Date<br>12/02/2025   | Payee name<br>Facebook  |  |             |
| Amount (\$)<br>\$450.00                                      | Payee address; City; State; Zip Code<br>1 Hacker Way,<br><br>Menlo Park, TX 94025       |  |             |
| PURPOSE<br>OF<br>EXPENDITURE                                 | Category (See Categories listed at the top of this schedule)<br>Advertising Expense     | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Advertisements |             |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name   | Office sought  | Office held |
| Date<br>11/07/2025   | Payee name<br>Facebook  |  |             |
| Amount (\$)<br>\$400.00                                      | Payee address; City; State; Zip Code<br>1 Hacker Way<br><br>Menlo Park, TX 94025        |  |             |
| PURPOSE<br>OF<br>EXPENDITURE                                 | Category (See Categories listed at the top of this schedule)<br>Advertising Expense     | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Ads            |             |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name   | Office sought  | Office held |
|  |   |  |             |

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

|  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Credit Card Payment  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

|   |  |   |             |
|---|--|---|-------------|
| 1 Total pages Schedule G:<br>Sch: 2/2 Rpt: 7/7  | 2 FILER NAME<br>Eddington, Jason (Mr.)   | 3 Filer ID (Ethics Commission Filers)<br>00089797   |             |
| 4 Date<br>10/23/2025  | 5 Payee name<br>Quickbooks   |   |             |
| 6 Amount (\$)<br>\$159.90<br><br><input type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address; City; State; Zip Code<br>2700 Coast Avenue<br><br>Mountain View, CA 94043 |   |             |
| 8 PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Accounting/Banking     | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Accounting Software |             |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name  | Office sought   | Office held |
| Date<br>09/18/2025  | Payee name<br>Rush Order Tees  |   |             |
| Amount (\$)<br>\$97.37<br><br><input type="checkbox"/> Reimbursement from political contributions intended    | Payee address; City; State; Zip Code<br>2727 Commerce Way<br><br>Philadelphia, PA 19154    |   |             |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Advertising Expense        | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>T-Shirt Ads             |             |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name  | Office sought   | Office held |