

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

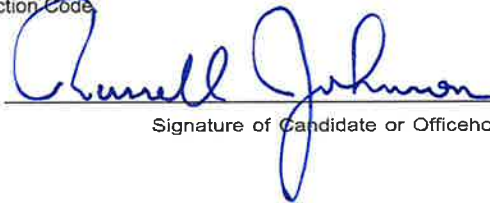
The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 10
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Russell	OFFICE USE ONLY	
	NICKNAME LAST SUFFIX Johnson	Date Received JAN 14 2026 Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <small>Change of Address</small>	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 4521 N.US Hwy 277 Bronte, TX 76933		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (325) 450-4959		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Russell	Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged	
	NICKNAME LAST SUFFIX Johnson		
7 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 4521 N.US Hwy 277 Bronte, TX 76933		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (325) 450-4959		
9 REPORT 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) <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)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 9 / 23 / 25 THROUGH 1 / 15 / 26		
11 ELECTION	ELECTION DATE Month Day Year 3 / 3 / 26	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) Coke County Justice of the Peace Pct 1	13 OFFICE SOUGHT (if known) Coke County Justice of the Peace Pct 1	
14 NOTICE FROM POLITICAL COMMITTEE(S) <small>Additional Pages</small>	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.		
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME <hr/> COMMITTEE ADDRESS <hr/> COMMITTEE CAMPAIGN TREASURER NAME <hr/> COMMITTEE CAMPAIGN TREASURER ADDRESS <hr/>	
GO TO PAGE 2			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Russell L Johnson		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,805.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,899.26
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 0
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

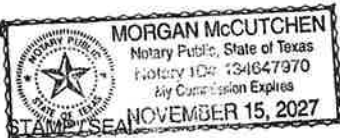
18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



 Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



Sworn to and subscribed before me by Russell Johnson this the 13 day of January.

20 Me, to certify which, witness my hand and seal of office.

Morgan McCutchen Morgan McCutchen Chief Court Clerk
 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

 Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

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

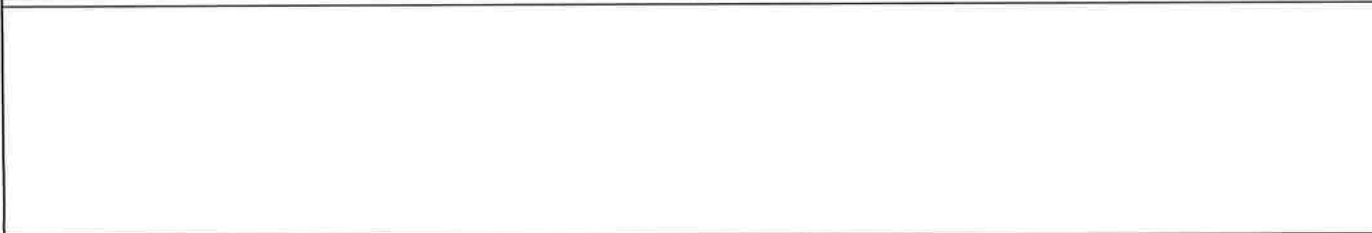
19 FILER NAME Russell Johnson		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 1,805.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 1,805.00
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$ 94.26
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 3
2 FILER NAME Russell Johnson		3 Filer ID (Ethics Commission Filers)
4 Date 1-5-2026	5 Full name of contributor out-of-state PAC (ID#: _____) Carl Beal	7 Amount of contribution (\$) 1000.00
6 Contributor address; City; State; Zip Code Blackwell TX 79556		
8 Principal occupation / Job title (See Instructions) Rancher		9 Employer (See Instructions) self
Date 01/06/2026	Full name of contributor out-of-state PAC (ID#: _____) Tim Smith	Amount of contribution (\$) 200.00
Contributor address; City; State; Zip Code Bronte TX 76933		
Principal occupation / Job title (See Instructions) Store Owner		Employer (See Instructions) self
Date 01/06/2006	Full name of contributor out-of-state PAC (ID#: _____) Tony Montez	Amount of contribution (\$) 40.00
Contributor address; City; State; Zip Code Bronte TX 76933		
Principal occupation / Job title (See Instructions) Store Manager		Employer (See Instructions) Blackburn's
Date 01/06/2026	Full name of contributor out-of-state PAC (ID#: _____) Danny Webb	Amount of contribution (\$) 20.00
Contributor address; City; State; Zip Code Bronte TX 76933		
Principal occupation / Job title (See Instructions) County Commissioner		Employer (See Instructions) Coke County



ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Russell Johnson		3 Filer ID (Ethics Commission Filers)
4 Date 01/06/2026	5 Full name of contributor out-of-state PAC (ID#: _____) Marty Pearcy 6 Contributor address; City; State; Zip Code. Bronte TX 76933	7 Amount of contribution (\$) 40.00
8 Principal occupation / Job title (See Instructions) Heating and Cooling		9 Employer (See Instructions) self
Date 01/06/2026	Full name of contributor out-of-state PAC (ID#: _____) Clabe Webb Contributor address; City; State; Zip Code Bronte TX 76933	Amount of contribution (\$) 5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) self
Date 01/07/2026	Full name of contributor out-of-state PAC (ID#: _____) Henry Chisholm Contributor address; City; State; Zip Code Bronte TX 76933	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) County Commissioner		Employer (See Instructions) Coke County
Date 01/09/2026	Full name of contributor out-of-state PAC (ID#: _____) Shane Bearden Contributor address; City; State; Zip Code Bronte TX 76933	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions) Mechanic		Employer (See Instructions) self
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Russell Johnson		3 Filer ID (Ethics Commission Filers)
4 Date 01/09/2026	5 Full name of contributor Kolby Lee <small>out-of-state PAC (ID#: _____)</small>	7 Amount of contribution (\$) 20.00
6 Contributor address; City; State; Zip Code Bronte TX 76933		
8 Principal occupation / Job title (See Instructions) Firefighter/Paramedic		9 Employer (See Instructions) San Angelo
Date 01/13/2026	Full name of contributor Bill Brasher <small>out-of-state PAC (ID#: _____)</small>	Amount of contribution (\$) 30.00
Contributor address; City; State; Zip Code Bronte TX 76933		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) self
Date 01/13/2026	Full name of contributor Joe Luckett <small>out-of-state PAC (ID#: _____)</small>	Amount of contribution (\$) 200.00
Contributor address; City; State; Zip Code Bronte TX 76933		
Principal occupation / Job title (See Instructions) Bank Vice President		Employer (See Instructions) First National Bank Sterling City
Date	Full name of contributor <small>out-of-state PAC (ID#: _____)</small>	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

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	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3	2 FILER NAME Russell Johnson	3 Filer ID (Ethics Commission Filers)
4 Date 09/23/2025	5 Payee name Observer Enterprise	
6 Amount (\$) 112.00	7 Payee address; PO Box 1329	City; State; Zip Code Robert Lee TX 76945
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) advertising expense	(b) Description newspaper ad
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Russell Johnson	Office sought Coke County Justice of the Peace Pct 1
		Office held Coke County Justice of the Peace Pct 1
Date 11/28/2025	Payee name Observer Enterprise	
Amount (\$) 64.00	Payee address; PO Box 1329	City; State; Zip Code Robert Lee TX 76945
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising expense	Description newspaper ad
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Russell Johnson	Office sought Coke County Justice of the Peace Pct 1
		Office held Coke County Justice of the Peace Pct 1
Date 12/03/2026	Payee name Concho Business Solutions	
Amount (\$) 118.50	Payee address; 3302 Foster St 76903	City; State; Zip Code San Angelo TX
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising expense	Description business cards signs
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Russell Johnson	Office sought Coke County Justice of the Peace Pct 1
		Office held Coke County Justice of the Peace Pct 1

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

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:	2 FILER NAME Russell Johnson	3 Filer ID (Ethics Commission Filers)
4 Date 12/19/2025	5 Payee name Fast Signs	
6 Amount (\$) 286.86	7 Payee address; 720 Knickerbocker Rd	City; State; Zip Code San Angelo TX 76903
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) advertising expense	(b) Description signs
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Russell Johnson	Office sought Coke County Justice of the Peace Pct 1
		Office held Coke County Justice of the Peace Pct 1
Date 12/29/2025	Payee name Fast Signs	
Amount (\$) 129.90	Payee address; 720 Knickerbocker Rd	City; State; Zip Code San Angelo TX 76903
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising expense	Description signs
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Russell Johnson	Office sought Coke County Justice of the Peace Pct 1
		Office held Coke County Justice of the Peace Pct 1
Date 12/23/2026	Payee name Concho Business Solutions	
Amount (\$) 292.00	Payee address; 3302 Foster St 76903	City; State; Zip Code San Angelo TX
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising expense	Description business cards signs
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Russell Johnson	Office sought Coke County Justice of the Peace Pct 1
		Office held Coke County Justice of the Peace Pct 1

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

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	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Russell Johnson	3 Filer ID (Ethics Commission Filers)
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4 Date 01/08/2026	5 Payee name Observer Enterprise
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6 Amount (\$) 128.00	7 Payee address; PO Box 1329	City; Robert Lee	State; TX	Zip Code 76945
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) advertising expense	(b) Description newspaper ad
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Russell Johnson	Office sought Coke County Justice of the Peace Pct 1	Office held Coke County Justice of the Peace Pct 1
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Date 01/13/2026	Payee name Observer Enterprise
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Amount (\$) 673.74	Payee address; PO Box 1329	City; Robert Lee	State; TX	Zip Code 76945
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising expense	Description newspaper
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Russell Johnson	Office sought Coke County Justice of the Peace Pct 1	Office held Coke County Justice of the Peace Pct 1
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Date	Payee name
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Amount (\$)	Payee address;	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

If the requested information is not applicable, **DO NOT** include this page in the report.

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	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 1	2 FILER NAME Russell Johnson	3 Filer ID (Ethics Commission Filers)
4 Date 01/13/2026	5 Payee name Observer Enterprise	
6 Amount (\$) 94.26 <small>Reimbursement from political contributions intended</small>	7 Payee address; PO BOX 1329 76945	City; State; Zip Code Robert Lee TX
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) advertising expense	(b) Description newspaper ad
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$) <small>Reimbursement from political contributions intended</small>	Payee address;	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$) <small>Reimbursement from political contributions intended</small>	Payee address;	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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