

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 Filer)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST JOE NICKNAME Last Ham LAST SUFFIX	OFFICE USE ONLY Date Received Filed For Record Time 10:16 am JAN 17 2024 Casey Brown Elections Administrator By [Signature] deputy	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ Change of Address	ADDRESS / PO BOX 199 AN CR 2142 Palestine, Tx 75801 APT / SUITE # CITY STATE ZIP CODE	Data Hand-delivered or Date Postmarked	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (903) PHONE NUMBER 724-7809 EXTENSION	Receipt # Amount \$ Date Processed Date Imaged	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST JANIS NICKNAME Burr's LAST SUFFIX		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE) 324 E. Palestine Ave APT / SUITE # CITY Palestine, Texas STATE ZIP CODE 75801		
8 CAMPAIGN TREASURER PHONE	AREA CODE (903) PHONE NUMBER 724-4936 EXTENSION		
9 REPORT TYPE	☒ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (Officeholder Only) ☐ July 15 ☐ 6th day before election ☐ Exceeded Modified Reporting Limit ☐ Final Report (Attach C/OH - CR)		
10 PERIOD COVERED	Month Day Year 09 / 14 / 23 THROUGH 01 / 16 / 24		
11 ELECTION	ELECTION DATE Month Day Year 03 / 05 / 24 ELECTION TYPE ☒ Primary ☐ Runoff ☐ Other ☐ General ☐ Special		
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) Constable Pct. 2	
14 NOTICE FROM POLITICAL COMMITTEE(S) ☐ Additional Pages	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 ☐ GENERAL ☐ SPECIFIC COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME		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)	\$ <u>600.00</u>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>4337.58</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$
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

NOTARY STAMP/SEAL

Sworn to and subscribed before me by _____ this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Joe LATHAM, and my date of birth is September 5, 1952
My address is 199 AN CR 2147, Palestine, Tx, 75801, Anderson
(street) (city) (state) (zip code) (country)

Executed in Anderson County, State of Texas, on the 16 day of January, 202024
(year)

Signature of Candidate/Officeholder (Declarant)

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

19 FILER NAME		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 600.00
2.	☐ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	☐ SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	☐ SCHEDULE C: LOANS	\$
5.	☐ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
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	\$ 4344.21
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:
2 FILER NAME JOE LATAM		3 Filer ID (Ethics Commission Filers)
4 Date 10/17/2023	5 Full name of contributor ☐ out-of-state PAC ID# Toby Joe LATAM	7 Amount of contribution (\$) \$ 250.00
6 Contributor address: City: State: Zip Code 3901 monclair Odessa, TX 79762		
8 Principal occupation / Job title (See Instructions) Loan Officer		9 Employer (See Instructions) West Texas State Bank
Date 10/16/2023	Full name of contributor ☐ out-of-state PAC ID# Christopher Comer	Amount of contribution (\$) \$ 50.00
Contributor address: City: State: Zip Code 5242 18th Street Lubbock, TX 79416		
Principal occupation / Job title (See Instructions) Loan Officer		Employer (See Instructions) West Texas State Bank
Date 12/15/2023	Full name of contributor ☐ out-of-state PAC ID# Certipro Painters	Amount of contribution (\$) \$ 300.00
Contributor address: City: State: Zip Code 129 Duke Trl. Weatherford, TX 76087		
Principal occupation / Job title (See Instructions) OWNER-Franchisee		Employer (See Instructions) Certipro Painter
Date	Full name of contributor ☐ out-of-state PAC ID#	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.

LOANS**SCHEDULE E**

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 E:	
2 FILER NAME JOE LATHAM		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED LOANS		\$	
5 Date of loan 12/13/2023	7 Name of lender ☐ out-of-state PAC (ID# _____) JOE D. LATHAM	9 Loan Amount (\$) \$4337.58	
6 Is lender a financial institution? Y N	8 Lender address: City: State: Zip Code 199 Avlar 2142 Protesting, TX 75801	10 Interest rate 0%	
		11 Maturity date N/A	
12 Principal occupation / Job title (See instructions) Deputy Sheriff		13 Employer (See instructions) Anderson County Sheriff's Office	
14 Description of Collateral ☒ none		15 ☒ Check if personal funds were deposited into political account (See instructions)	
16 GUARANTOR INFORMATION ☐ not applicable	17 Name of guarantor 18 Guarantor address: City: State: Zip Code	19 Amount Guaranteed (\$)	
20 Principal Occupation (See instructions)		21 Employer (See instructions)	
Date of loan	Name of lender ☐ out-of-state PAC (ID# _____)	Loan Amount (\$)	
Is lender a financial institution? Y N	Lender address: City: State: Zip Code	Interest rate	
		Maturity date	
Principal occupation / Job title (See instructions)		Employer (See instructions)	
Description of Collateral ☐ none		☐ Check if personal funds were deposited into political account (See instructions)	
GUARANTOR INFORMATION ☐ not applicable	Name of guarantor Guarantor address: City: State: Zip Code	Amount Guaranteed (\$)	
Principal Occupation (See instructions)		Employer (See instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If lender 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
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officer/Member/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Expense

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Printing Expense
Postage Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2		2 FILER NAME JOE LATHAM		3 Filer ID (Ethics Commission Filers)	
4 Date 11/04/2023		5 Payee name Designer Graphics			
6 Amount (\$) 369.56		7 Payee address: City: State: Zip Code 12402 Hwy 155 South Tyler, Texas 75703			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description Post Cards		
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/24/2023		Payee name Lowes Home Center			
Amount (\$) 101.81		Payee address: City: State: Zip Code 2715 South Loop 256 Palestine, Tx 75801			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description material for building Signs		
	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/26/2023		Payee name Lowes Home Center			
Amount (\$) 10.32		Payee address: City: State: Zip Code 2715 South Loop 256 Palestine, Tx 75801			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description Material for Building Signs		
	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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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 Expenses
Accounting/Auditing
Consulting Expenses
Contributions/Donations Made By
Candidate's Office/Political Action Committee
Cash/Car/Postage

Food Expenses
Travel
Post Office/Postage Expenses
Cell/Air/Internet/Mobile Expenses
Legal Services

Loan Repayment/Reimbursement
Office Operations/Related Expenses
Printing Expenses
Postage Expenses
Lodging/Travel/Contract Labor

Substantive Fundraising Expenses
Transportation Expenses & Related Expenses
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2	2 FILER NAME JOE LATHAM	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name DESIGNER GRAPHICS	
6 Amount (\$) 119.02 Signs Order # 620532	7 Payee address: 12404 Hwy 155 South Tyler, Texas 75703	City: State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description 4x4 Signs and Lapel Pins
	(c) ☐ Check if travel outside of Texas. Complete Schedule F	☐ Check if Austin, TX, officeholder being reported
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address:	City: State: Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	☐ Check if travel outside of Texas. Complete Schedule F	☐ Check if Austin, TX, officeholder being reported
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address:	City: State: Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	☐ Check if travel outside of Texas. Complete Schedule F	☐ Check if Austin, TX, officeholder being reported
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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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/Rent/Utilities	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Printing 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: 6	2 FILER NAME JOE LATNAM	3 Filer ID (Ethics Commission filers)
4 Date 09/14/2023	5 Payee name Designer Graphics	
6 Amount (\$) \$439.75 ☒ Reimbursement from political contributions intended	7 Payee address: City: State: Zip Code 12404 Hwy 155 South Tyler, Tx 75703	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description Bus. Cards, Magnets, Post Cards
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

Date 09/29/2023	Payee name Designer Graphics	
Amount (\$) \$427.70 ☒ Reimbursement from political contributions intended	Payee address: City: State: Zip Code 12404 Hwy 155 South Tyler, Tx 75703	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Signs, Bus. Cards, Name badges
	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

Date 10/20/2023	Payee name The Home Depot	
Amount (\$) \$54.72 ☒ Reimbursement from political contributions intended	Payee address: City: State: Zip Code 3901 Old Jacksonville Hwy Tyler, Tx 75701	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Material to haul OVERSIZE SIGNS
	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

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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
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officerholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Deverign Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rent/Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G. **6** 2 FILER NAME **JOE LATAM** 3 Filer ID (Ethics Commission Filer)

4 Date **10/20/23** 5 Payee name **Designer Graphics**
6 Amount (\$) **\$ 665.34** 7 Payee address: City: State: Zip Code
☒ Reimbursement from political contributions extended **12402 Hwy 155 South Tyler, Tex 75703**

8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) **Printing Expense** (b) Description **Yard Signs**
(c) ☐ Check if travel outside of Texas. Complete Schedule F ☐ Check if Austin, TX, officerholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officerholder name Office sought Office held

Date **11/06/2023** Payee name **Designer Graphics**
Amount (\$) **\$ 231.82** Payee address: City: State: Zip Code
☒ Reimbursement from political contributions extended **12402 Hwy 155 South Tyler, Tex 75703**

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) **Printing Expense** Description **4x4 Yard Signs Name Badges**
☐ Check if travel outside of Texas. Complete Schedule F ☐ Check if Austin, TX, officerholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officerholder name Office sought Office held

Date **11/13/2023** Payee name **Mario's Mexican Grill**
Amount (\$) **\$ 37.65** Payee address: City: State: Zip Code
☒ Reimbursement from political contributions extended **1717 W - Palestine Ave Palestine, Tx 75801**

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) **Consulting expense** Description **Consult w/ current Constable**
☐ Check if travel outside of Texas. Complete Schedule F ☐ Check if Austin, TX, officerholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officerholder name Office sought Office held

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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
Accounting/Bookkeeping
Consulting Expense
Contributions/Donations Made By
Candidate/Officer/Member/Political Committee
Credit Card Payment

Event Expense
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rent/Utilities
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The instruction Guide explains how to complete this form.

1 Total pages Schedule G: 6		2 FILER NAME JOE LATNAM		3 Filer ID (Ethics Commission Filers)	
4 Date 11/13/2023		5 Payee name Anderson County Republican Party			
6 Amount (\$) \$ 375.00 ☒ Reimbursement from political contributions intended		7 Payee address: 1118 N Link		City: Palestine, Tx	State: 75801
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Ballot Application Fee		
	(c) ☐ Check if travel outside of Texas. Complete Schedule T		☐ Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Lowes Home Center Office sought Lowes Home Center Office held Lowes Home Center					
Date 11/24/2023		Payee name Lowes Home Center			
Amount (\$) \$ 199.22 ☒ Reimbursement from political contributions intended		Payee address: 2715 South Loop 256		City: Palestine, Tx	State: 75801
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description Lumber for Signs		
	☐ Check if travel outside of Texas. Complete Schedule T		☐ Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Lowes Home Center Office sought Lowes Home Center Office held Lowes Home Center					
Date 11/25/23		Payee name Lowes Home Center			
Amount (\$) 198.67 ☒ Reimbursement from political contributions intended		Payee address: 2715 South Loop 256		City: Palestine, Tx	State: 75801
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description Lumber for Signs		
	☐ Check if travel outside of Texas. Complete Schedule T		☐ Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Lowes Home Center Office sought Lowes Home Center Office held Lowes Home Center					

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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
Accounting/Marketing
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Drverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rent/Utilities Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 6		2 FILER NAME JOE LATHAM		3 Filer ID (Ethics Commission Filers)	
4 Date 12/02/2023		5 Payee name Lowes Home Center			
6 Amount (\$) \$226.22 ☒ Reimbursement from political contributions allowed		7 Payee address: 2715 South Loop 256 Palestine, Tx 75801 City: State: Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description lights for parade float		
	(c) ☐ Check if travel outside of Texas. Complete Schedule T ☐ Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held					
Date 12/04/2023		Payee name Designer Graphics			
Amount (\$) \$425.01 ☒ Reimbursement from political contributions allowed		Payee address: 12404 Hwy 155 South Palestine, Tx 75703 City: State: Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description T-Shirts w/ Campaign Logo		
	☐ Check if travel outside of Texas. Complete Schedule T ☐ Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held					
Date 12/05/2023		Payee name Lowes Home Centers			
Amount (\$) \$147.48 ☒ Reimbursement from political contributions allowed		Payee address: 2715 South Loop 256 Palestine, Tx 75801 City: State: Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description Lumber for Signs		
	☐ Check if travel outside of Texas. Complete Schedule T ☐ Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held					

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Bookkeeping
Consulting Expense
Contributions/Donations Made By
Candidate/Officer/holder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Developing Expense
Gift/Award/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 6	2 FILER NAME JOE LATHAM	3 Filer ID (Ethics Commission Filers)
4 Date 12/14/2023	5 Payee name LOWSTAR Apparel And Design	
6 Amount (\$) \$ 27.06 ☐ Reimbursement from political contributions intended	7 Payee address: City: State: Zip Code 1317 S.H. 266 Loop Palestine, TX 75801	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expenses	(b) Description emb. Campaign Logo
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.	☐ Check if Austin, TX, officer/holder living expense
9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officer/holder name Office sought Office held		
Date 12/15/2023	Payee name Designer Graphics	
Amount (\$) \$210.84 Receipt 17704 ☒ Reimbursement from political contributions intended	Payee address: City: State: Zip Code 12401 Hwy 155 South Tyler, Tx 75703	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description 4x4 Signs
	☐ Check if travel outside of Texas. Complete Schedule T.	☐ Check if Austin, TX, officer/holder living expense
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officer/holder name Office sought Office held		
Date 12/15/2023	Payee name Designer Graphics	
Amount (\$) \$210.44 Receipt 17703 ☒ Reimbursement from political contributions intended	Payee address: City: State: Zip Code 12401 Hwy 155 South Tyler, Tx 75703	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description 4x4 Signs
	☐ Check if travel outside of Texas. Complete Schedule T.	☐ Check if Austin, TX, officer/holder living expense
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officer/holder name Office sought Office held		

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Bookkeeping
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Food
Food/Beverage Expense
Gift/Award/Memorial Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Printing Expense
Salaries/Wages/Contract Labor

Substantive Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The instruction Guide explains how to complete this form.

1 Total pages Schedule G: 6		2 FILER NAME JOE LATHAM		3 Filer ID (Ethics Commission Filers)	
4 Date 12/30/2023		5 Payee name Lowes Home Centers			
6 Amount (\$) \$ 15.38 ☐ Reimbursement from political contributions included		7 Payee address: City: State: Zip Code 2715 South Loop 256 Palestine, Tx 75801			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule): Advertising Expense		(b) Description Cable Tics for Signs	
		(c) ☐ Check if travel outside of Texas. Complete Schedule T.		☐ 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 12/09/2023		Payee name Shrell			
Amount (\$) \$ 62.48 ☐ Reimbursement from political contributions included		Payee address: City: State: Zip Code 2320 W. Oak St Palestine, Tx 75801			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule): Transportation equipment & related expense		Description gas to put out signs	
		☐ Check if travel outside of Texas. Complete Schedule T.		☐ 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 12/31/23		Payee name Lowes Home Centers			
Amount (\$) \$ 29.96 ☒ Reimbursement from political contributions included		Payee address: City: State: Zip Code 2715 South Loop 256 Palestine, Tx 75801			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule): Advertising Expense		Description T-Post for Signs	
		☐ Check if travel outside of Texas. Complete Schedule T.		☐ 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	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

The Instruction Guide explains how to complete this form.

-- Complete only if "Report Type" on page 1 is marked "Final Report" --

1 C/OH NAME

2 Filer ID (Ethics Commission Filer)

3 SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

Signature of Candidate / Officeholder

4 FILER WHO IS NOT AN OFFICEHOLDER

-- Complete A & B below only if you are not an officeholder. --

A CAMPAIGN FUNDS

Check only one:

☒ I do not have unexpended contributions or unexpended interest or income earned from political contributions.

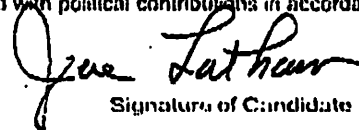
☐ I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

B. ASSETS

Check only one:

☒ I do not retain assets purchased with political contributions or interest or other income from political contributions.

☐ I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.



Signature of Candidate

5 OFFICEHOLDER

-- Complete this section only if you are an officeholder --

☐ I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

Signature of Officeholder