

# 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:				
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR NICKNAME JimBO		FIRST James	MI W				
	LAST BROWER		SUFFIX JR					
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX:		APT / SUITE #:	CITY: STATE: ZIP CODE				
				Texarkana TX 75503				
5 CANDIDATE/ OFFICEHOLDER PHONE		AREA CODE ( )	PHONE NUMBER	EXTENSION				
6 CAMPAIGN TREASURER NAME		MS / MRS / MR NICKNAME	FIRST LAST	MI SUFFIX				
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;		CITY; STATE; ZIP CODE				
8 CAMPAIGN TREASURER PHONE		AREA CODE ( )	PHONE NUMBER	EXTENSION				
9 REPORT TYPE		<input 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 /	Month /	Day /	Year /	
11 ELECTION		ELECTION DATE Month Day Year / / /	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special Description					
12 OFFICE		OFFICE HELD (if any)		13 OFFICE SOUGHT (if known)				
14 NOTICE FROM POLITICAL COMMITTEE(S)		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.						
<input type="checkbox"/> Additional Pages		COMMITTEE TYPE	COMMITTEE NAME					
		<input type="checkbox"/> GENERAL						
		<input type="checkbox"/> SPECIFIC						

GO TO PAGE 2

# 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:	
3 CANDIDATE / OFFICEHOLDER NAME	M/S/MRS / MR FIRST <i>JAMES</i> MI <i>W</i> NICKNAME <i>Jimbo</i> LAST <i>BROWER</i> SUFFIX <i>JR</i>			OFFICE USE ONLY		
				Date Received	7025 DEC 29 PM BOWIE COUNTY TEXAS FILED 2025	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX: <i>[REDACTED]</i> APT / SUITE #: <i>[REDACTED]</i> CITY: <i>TEXARKANA TX</i> STATE: <i>75503</i>					
<input type="checkbox"/> Change of Address						
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE <i>[REDACTED]</i>	PHONE NUMBER <i>[REDACTED]</i>	EXTENSION <i>-</i>	Date Hand-delivered or Date Postmarked <i>[REDACTED]</i>		
6 CAMPAIGN TREASURER NAME	M/S/MRS / MR FIRST <i>GEORGE</i> MI <i>E</i> NICKNAME <i>MERRILL</i> LAST <i>[REDACTED]</i> SUFFIX <i>[REDACTED]</i>			Receipt # <i>[REDACTED]</i>	Amount \$ <i>[REDACTED]</i>	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE # <i>[REDACTED]</i> CITY: <i>TEXARKANA TX</i> STATE: <i>75503</i>			Date Processed <i>Emailed</i>		
8 CAMPAIGN TREASURER PHONE	AREA CODE <i>[REDACTED]</i>	PHONE NUMBER <i>[REDACTED]</i>	EXTENSION <i>[REDACTED]</i>	Date Imaged		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit		<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> Final Report (Attach C/OH - FR)			
10 PERIOD COVERED	Month <i>/</i>	Day <i>/</i>	Year <i>/</i>	Month <i>/</i>	Day <i>/</i>	
11 ELECTION	ELECTION DATE Month <i>/</i> Day <i>/</i> Year <i>/</i>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special			<i>[REDACTED]</i>	
12 OFFICE	OFFICE HELD (if any)			13 OFFICE SOUGHT (if known)		
14 NOTICE FROM POLITICAL COMMITTEE(S)	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.					
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME				
		COMMITTEE ADDRESS				
		COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRESS				

GO TO PAGE 2