

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	2 Total pages filed: 9
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Douglas	MI MI
	NICKNAME	LAST Cone	SUFFIX
OFFICE USE ONLY			
Date Received: <i>JH</i> 2-23-26			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 1805 Shady Lane Brenham, TX 77833		ZIP CODE
	Date Hand-delivered or Date Postmarked 2-23-26		
	Receipt #	Amount	
	Date Processed 2-23-26		
Date Imaged 2-23-26			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Ray	MI MI
	NICKNAME	LAST Weiss	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 4505 Salem Road Brenham, Texas 77833		
	7 CAMPAIGN TREASURER PHONE	AREA CODE 979	PHONE NUMBER 836-0693
8 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 checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month Day Year 01/23/2026	THROUGH	Month Day Year 02/21/2026
10 ELECTION	ELECTION DATE Month Day Year 03/03/2026		ELECTION TYPE
	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any) Justice of the Peace Pct. 2 Place 1 District 2 Washington	12 OFFICE SOUGHT (if known) County Judge	

GO TO PAGE 2

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

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

2 of 9

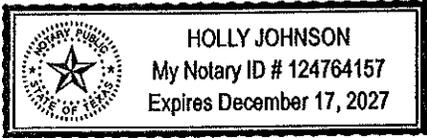
13 C / OH NAME Cone, Douglas	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures 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	COMMITTEE NAME	
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	
	<input type="checkbox"/> SPECIFIC		
	COMMITTEE CAMPAIGN TREASURER NAME		
	COMMITTEE CAMPAIGN TREASURER ADDRESS		

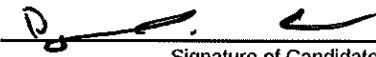
16 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	400.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	5,582.49
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$	13,397.42
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	1898.35
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY 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.



HOLLY JOHNSON
My Notary ID # 124764157
Expires December 17, 2027



 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Douglas Cone, this the 23rd day of February, 2020, to certify which, witness my hand and seal of office.



 Signature of officer administering

Holly Johnson

 Printed name of officer administering

Notary

 Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Cone, Douglas	19 Filer ID
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20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 5,582.49	
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	\$ 2,339.97	
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 11,057.45	
9. <input 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 TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/2 Rpt: 4/9
2 FILER NAME Cone, Douglas		3 Filer ID
4 Date 02/02/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brannon, Michael (Mr.) <hr/> 6 Contributor address; City; State; Zip Code 1555 Hwy 36 N Brenham, TX 77833	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) BIG
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crews, Jerry (Mr.) <hr/> Contributor address; City; State; Zip Code 8001 Old Chappell Hill Road Brenham, TX 77833	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/01/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrer, Judy (Mrs.) <hr/> Contributor address; City; State; Zip Code 20550 FM 1155E Washington, TX 77880	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Regino (Mr.) <hr/> Contributor address; City; State; Zip Code 4000 Route Road Chappell Hill, TX 77746	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hasskarl, John (Mr.) <hr/> Contributor address; City; State; Zip Code 1702 Walsch Lane Brenham, TX 77833	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/2 Rpt: 5/9
2 FILER NAME Cone, Douglas		3 Filer ID
4 Date 02/18/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heine, Darren (Mr.)	7 Amount of Contribution (\$) \$103.20
6 Contributor address; City; State; Zip Code 300 West Bryan Brenham, TX 77833		
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions) BBAx Architects
Date 02/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Jack (Mr.)	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 302 Oak Hill Dr Brenham, TX 77833		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sommers, Jeffrey (Mr.)	Amount of Contribution (\$) \$1,029.29
Contributor address; City; State; Zip Code 2611 Stately Oak Dr. Kingwood, TX 77345		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/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 F1: Sch: 1/1 Rpt: 6/9	2 FILER NAME Cone, Douglas	3 Filer ID
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4 Date 01/27/2026	5 Payee name Green Grain
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6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 304 S Baylor St Brenham, TX 77833
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rental of Hall
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/12/2026	Payee name Romo, Joel (Mr.)
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Amount (\$) \$2,089.97	Payee address; City; State; Zip Code PO Box 114 Chappell Hill, TX 77426
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Brand It cards Zip ties for Signs
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 |
| | 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 F4: Sch: 1/3 Rpt: 7/9	2 FILER NAME Cone, Douglas		3 Filer ID
4 CREDIT CARD ISSUER	Name of financial institution Bank of Amercia		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$4,479.97	(b) Date of Charge 02/05/2026	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name AlphaGraphics	(b) Payee address; City, State, Zip Code 2023 S. Texas Ave Bryan, TX 77802	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Mailers
	(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
PAYMENT	(a) Amount Charged \$3,105.97	(b) Date of Charge 02/06/2026	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name AdMail	(b) Payee address; City, State, Zip Code 427 Dellwood St Bryan, TX 77801	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Mailer - print addresses, postage charges
	(c) <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
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name	(b) Payee address; City, State, Zip Code	
PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)		(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T.		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/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 F4: Sch: 2/3 Rpt: 8/9		2 FILER NAME Cone, Douglas		3 Filer ID
4 CREDIT CARD ISSUER		Name of financial institution Citi Bank		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT		(a) Amount Charged \$275.00	(b) Date of Charge 02/06/2026	(c) Date(s) Credit Card Issuer Paid
7 PAYEE		(a) Payee name KWHI		(b) Payee address; City, State, Zip Code 223 East Main St. Brenham, TX 77833
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Radio Ads
		(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 ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
PAYMENT		(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid
PAYEE		(a) Payee name		(b) Payee address; City, State, Zip Code
PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule)		(b) Description
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
PAYMENT		(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid
PAYEE		(a) Payee name		(b) Payee address; City, State, Zip Code
PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule)		(b) Description
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 |
| | 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 F4: Sch: 3/3 Rpt: 9/9	2 FILER NAME Cone, Douglas		3 Filer ID
4 CREDIT CARD ISSUER	Name of financial institution American Express		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$3,196.51	(b) Date of Charge 02/06/2026	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name AdMail		(b) Payee address; City, State, Zip Code 427 Dellwood St Bryan, TX 77801
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Mailer
	(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