

# 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 Mr.	FIRST William	MI S.	OFFICE USE ONLY			
	NICKNAME Scott	LAST Alwood	SUFFIX	Date Received 1/15/2026 <i>YJ</i>			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX: APT / SUITE #: CITY, STATE: ZIP CODE 12175 Jackson Creek Lane, Brenham, TX 77833						
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE ( 832 )	PHONE NUMBER 493-1489	EXTENSION	Date Hand-delivered or Date Postmarked 1/15/2026			
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Joel	MI	Receipt #   Amount \$			
	NICKNAME Romo.	LAST	SUFFIX	Date Processed 1/15/2026			
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: P.O. Box 114, Chappell Hill, TX 77426			STATE: ZIP CODE			
8 CAMPAIGN TREASURER PHONE	AREA CODE ( 512 )	PHONE NUMBER 423-1598	EXTENSION				
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 10	Day / 03 /	Year 2025	Month 12	Day / 31 /	Year 2025	
11 ELECTION	ELECTION DATE Month Day Year 3 / 3 / 2026		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) None			13 OFFICE SOUGHT (if known) Justice of the Peace, Precinct 1			
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

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

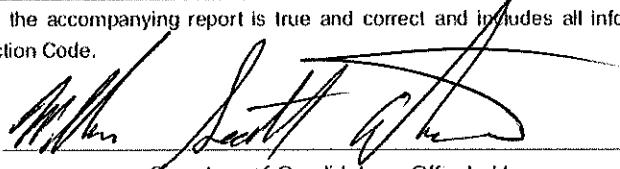
## FORM C/OH COVER SHEET PG 2

15 C/OH NAME

16 Filer ID (Ethics Commission Filers)

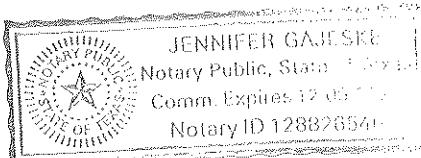
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2875.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 2453.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 571.20
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

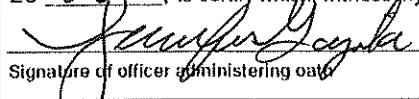
Please complete either option below:

(1) Affidavit

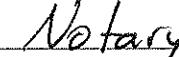


NOTARY STAMP/SEAL

Sworn to and subscribed before me by William Scott Atwood this the 15 day of January, 20 26, 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 William S. Atwood, and my date of birth is 12/24/1961.  
 My address is 12176 Jackson Creek Ln., Brenham, TX, 77833, USA.  
 Executed in Washington County, State of Texas, on the 14 day of January, 20 26.  
 (street) (city) (state) (zip code) (country)  
 (month) (year)



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

<b>19 FILER NAME</b> William S. Atwood	<b>20 Filer ID (Ethics Commission Filers)</b>
<b>21 SCHEDULE SUBTOTALS NAME OF SCHEDULE</b>	<b>SUBTOTAL AMOUNT</b>
1. <input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2875.00
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 type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 2303.80
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 150.00
10. <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12. <input type="checkbox"/> 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.

<b>The Instruction Guide explains how to complete this form.</b>			<b>1</b> Total pages Schedule A1:  <b>3</b> Filer ID (Ethics Commission Filers)
<b>2</b> FILER NAME  William S. Atwood			
<b>4</b> Date  11-7-25	<b>5</b> Full name of contributor  Scott & Kelli Atwood	<input type="checkbox"/> out-of-state PAC (ID#:  .....  <b>6</b> Contributor address;  12175 Jackson Creek Lane, Brenham, TX 77833	<b>7</b> Amount of contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions)  Business Owner		<b>9</b> Employer (See Instructions)  Kippers Kountry Store	
<b>Date</b>  12-1-25	<b>Full name of contributor</b>  Scott & Kelli Atwood	<input type="checkbox"/> out-of-state PAC (ID#:  .....  <b>Contributor address;</b>  12175 Jackson Creek Lane, Brenham, TX 77833	<b>Amount of contribution (\$)</b>  \$450.00
<b>Principal occupation / Job title (See Instructions)</b>  Business Owner		<b>Employer (See Instructions)</b>  Kippers Kountry Store	
<b>Date</b>  11-17-25	<b>Full name of contributor</b>  Ron Barlay	<input type="checkbox"/> out-of-state PAC (ID#:  .....  <b>Contributor address;</b>  325 Stone Hill Dr., Brenham, TX 77833	<b>Amount of contribution (\$)</b>  \$500.00
<b>Principal occupation / Job title (See Instructions)</b>  Chiropractor		<b>Employer (See Instructions)</b>  Barlay Group	
<b>Date</b>  11-21-25	<b>Full name of contributor</b>  Roy Mease	<input type="checkbox"/> out-of-state PAC (ID#:  .....  <b>Contributor address;</b>  4008 Vista Rd., Ste. 101, Pasadena, TX 77054	<b>Amount of contribution (\$)</b>  \$500.00
<b>Principal occupation / Job title (See Instructions)</b>  Business		<b>Employer (See Instructions)</b>  Self	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> 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.

<b>The Instruction Guide explains how to complete this form.</b>			<b>1 Total pages Schedule A1:</b>
<b>2 FILER NAME</b> William S. Atwood			<b>3 Filer ID (Ethics Commission Filers)</b>
<b>4 Date</b> 12/01/2025	<b>5 Full name of contributor</b> Lester Rorick	<b>out-of-state PAC (ID#):</b> _____	<b>7 Amount of contribution (\$)</b> <big><b>500.00</b></big>
	<b>6 Contributor address:</b> 4934 Julia Ct., Pasadena, TX 77505	City: _____ State: _____ Zip Code _____	
<b>8 Principal occupation / Job title (See Instructions)</b> Business		<b>9 Employer (See Instructions)</b> Self	
<b>Date</b> 12/03/2025	<b>Full name of contributor</b> Sandra Kindt	<b>out-of-state PAC (ID#):</b> _____	<b>Amount of contribution (\$)</b> <big><b>100.00</b></big>
	<b>Contributor address:</b> 1205 FM 390E, Brenham, TX 77833	City: _____ State: _____ Zip Code _____	
<b>Principal occupation / Job title (See Instructions)</b> Business		<b>Employer (See Instructions)</b> Self	
<b>Date</b> 12/03/2025	<b>Full name of contributor</b> Penny Spreen	<b>out-of-state PAC (ID#):</b> _____	<b>Amount of contribution (\$)</b> <big><b>35.00</b></big>
	<b>Contributor address:</b> 1507 McKinney Ct., Brenham, TX 77833	City: _____ State: _____ Zip Code _____	
<b>Principal occupation / Job title (See Instructions)</b> Business		<b>Employer (See Instructions)</b> Self	
<b>Date</b> 12/03/2025	<b>Full name of contributor</b> Joe Sharkey	<b>out-of-state PAC (ID#):</b> _____	<b>Amount of contribution (\$)</b> <big><b>50.00</b></big>
	<b>Contributor address:</b> 2442 Rau Rd., Brenham, TX 77833	City: _____ State: _____ Zip Code _____	
<b>Principal occupation / Job title (See Instructions)</b> Business		<b>Employer (See Instructions)</b> Self	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> 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.

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1:
<p><b>2 FILER NAME</b> William S. Atwood</p>			<b>3 Filer ID (Ethics Commission Filers)</b>
<b>4 Date</b> 12/03/2025	<b>5 Full name of contributor</b> Larry Plocheck	out-of-state PAC (ID#: .....)	<b>7 Amount of contribution (\$)</b> <big>500.00</big>
	<b>6 Contributor address;</b> 12700 Jackson Creek Ln., Brenham, TX 77833	City; State; Zip Code	
<b>8 Principal occupation / Job title (See Instructions)</b> Business		<b>9 Employer (See Instructions)</b> Self	
<b>Date</b> 12/03/2025	<b>Full name of contributor</b> Wayne Kleasen	■ out-of-state PAC (ID#: .....)	<b>Amount of contribution (\$)</b> <big>40.00</big>
	<b>Contributor address;</b> 11839 Hwy. 105, Brenham, TX 77833	City; State; Zip Code	
<b>Principal occupation / Job title (See Instructions)</b> Business		<b>Employer (See Instructions)</b> Self	
<b>Date</b>	<b>Full name of contributor</b>	out-of-state PAC (ID#: .....)	<b>Amount of contribution (\$)</b>
	<b>Contributor address;</b>	City; State; Zip Code	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>Date</b>	<b>Full name of contributor</b>	out-of-state PAC (ID#: .....)	<b>Amount of contribution (\$)</b>
	<b>Contributor address;</b>	City; State; Zip Code	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> 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 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		3 Filer ID (Ethics Commission Filers)
4 Date 11-10-25	5 Payee name Washington County Republican Party		
6 Amount (\$) \$376.00	7 Payee address; PO Box 479, Brenham, Texas 77834	City;	State; Zip Code
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule)  Filing Fee	(b) Description  Filing for for primary	
	(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
Date 11-18-25	Payee name Brand It Graphic		
Amount (\$) \$964.40	Payee address; 2507 Becker Drive, Brenham, Texas	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Advertising	Description  Campaign Signs	
	<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 held
Date 12-2-25	Payee name Brand It Graphic		
Amount (\$) \$964.40	Payee address; 2507 Becker Dr., Brenham, TX 77833	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Advertising	Description  Campaign signs	
	<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
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			