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	FIRST Joseph	MI E
	NICKNAME Joey	LAST McCarthy	SUFFIX III

OFFICE USE ONLY

Lamar County Elections

Date Received

JAN 15 2026

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

575 Mt. Olive Rd. Reno, Tx. 75462

Date Hand-delivered or Date Postmarked

Received

Receipt #   Amount $

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE   PHONE NUMBER   EXTENSION

(903) 715-8520

Date Processed

6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Joseph	MI E
	NICKNAME Joey	LAST McCarthy	SUFFIX III

Date Imaged

7 CAMPAIGN TREASURER ADDRESS
(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

575 Mt. Olive Rd. Reno, Tx. 75462

8 CAMPAIGN TREASURER PHONE

AREA CODE   PHONE NUMBER   EXTENSION

(903) 715-8520

9 REPORT TYPE

☒ January 15   ☐ 30th day before election   ☐ Runoff   ☐ 15th day after campaign treasurer appointment (Officeholder Only)

☐ July 15   ☐ 8th day before election   ☐ Exceeded Modified Reporting Limit   ☐ Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year   01 / 01 / 2026   THROUGH   Month Day Year   01 / 14 / 2026

11 ELECTION

ELECTION DATE   Month Day Year   03 / 03 / 26

ELECTION TYPE
☒ Primary   ☐ Runoff   ☐ Other Description
☐ General   ☐ Special

12 OFFICE   OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)   Justice of the Peace 5-2

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.

COMMITTEE TYPE	COMMITTEE NAME
☐ GENERAL	COMMITTEE ADDRESS
☐ SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

15 C/OH NAME	16 Filer ID (Ethics Commission Filers)
Joey McCarthy	

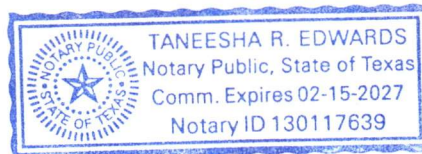| 17 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	$
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 950
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	$
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 3323.72
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 950
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0

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

TANEESHA R. EDWARDS
Notary Public, State of Texas
Comm. Expires 02-15-2027
Notary ID 130117639

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _Joey McCarthy_ this the _15_ day of _January_,

20 _26_ , to certify which, witness my hand and seal of office.

Taneesha R Edwards	_Taneesha Edwards_	_Notary Public_
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

19 FILER NAME	20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. ☐ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$ 950
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	$
6. ☐ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	$
7. ☐ SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	$
8. ☐ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	$ 2723.72
9. ☐ SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	$ 500
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	**3** Filer ID (Ethics Commission Filers)
Joey McCarthy	

4 Date	**5** Full name of contributor	☐ out-of-state PAC (ID#_____)	**7** Amount of contribution ($)
	Rick Browning		
	6 Contributor address; City; State; Zip Code		
1·4·26	Paris Tx 75462		$50

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
Retired	N/A

Date	Full name of contributor	☐ out-of-state PAC (ID#_____)	Amount of contribution ($)
	Douglas Caro		
	Contributor address; City; State; Zip Code		
1·11·26	795 Airport Rd Reno Tx 75462		$300—

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	N/A

Date	Full name of contributor	☐ out-of-state PAC (ID#_____)	Amount of contribution ($)
	Anson Amis		
	Contributor address; City; State; Zip Code		
1·12·26	Paris Tx 75460		$100—

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor	☐ out-of-state PAC (ID#_____)	Amount of contribution ($)
	Anonymous		
	Contributor address; City; State; Zip Code		
1·12·26	— —		$500⁰⁰

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.

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

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	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)

The Instruction Guide explains how to complete this form.   **USE A NEW PAGE FOR EACH CREDIT CARD ISSUER**

1 TOTAL PAGES SCHEDULE F4: 1	2 FILER NAME Joey McCarthy	3 FILER ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 CREDIT CARD ISSUER	Name of financial institution Discover

6 PAYMENT	(a) Amount Charged $ 84	(b) Date Expenditure Charged 1·2·26	(c) Date(s) Credit Card Issuer Paid 1·2·26

7 PAYEE	(a) Payee name Designer Graphics	(b) Payee address; City, State, Zip Code 12404 Hwy 155 S. Tyler Tx. 75703 ☐ Check if individual's residence address.

8 PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) Printing Expenses	(b) Description Signs
	(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 Joey McCarthy	Office Sought JP 5-2	Office Held

PAYMENT	(a) Amount Charged $ 791.34	(b) Date Expenditure Charged 1·8·26	(c) Date(s) Credit Card Issuer Paid 1·8·26

PAYEE	(a) Payee name Designer Graphics	(b) Payee address; City, State, Zip Code 12404 Hwy 155 S. Tyler Tx. 75703 ☐ Check if individual's residence address.

PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) Printing Expenses	(b) Description Signs
	(c) ☐ 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 Joey McCarthy	Office Sought JP 5-2	Office Held

PAYMENT	(a) Amount Charged $ 1091.38	(b) Date Expenditure Charged 1·5·26	(c) Date(s) Credit Card Issuer Paid 1·5·26

PAYEE	(a) Payee name Designer Graphics	(b) Payee address; City, State, Zip Code 12404 Hwy 155 S. Tyler Tx. 75703 ☐ Check if individual's residence address.

PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) Printing Expenses	(b) Description Signs
	(c) ☐ 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 Joey McCarthy	Office Sought JP 5-2	Office Held

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
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 G: 1	2 FILER NAME Joey McCarthy	3 Filer ID (Ethics Commission Filers)

4 Date 1-12-26	5 Payee name Hailey Hoskins		

6 Amount ($) 200.00 ☐ Reimbursement from political contributions intended	7 Payee address; ☐ Check if individual's residence address.	City; Powderly	State; Tx.	Zip Code 25473

8 **PURPOSE OF EXPENDITURE**	(a) Category (See Categories listed at the top of this schedule) Food Beverage Expense (c) ☐ Check if travel outside of Texas. Complete Schedule T.	(b) Description Snacks ☐ Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Joey McCarthy	Office sought JP 5-2	Office held

Date 1-12-26	Payee name Hilton Home2Suites		

Amount ($) 300 ☐ Reimbursement from political contributions intended	Payee address; ☐ Check if individual's residence address.	City; Paris	State; Tx.	Zip Code 25460

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense ☐ Check if travel outside of Texas. Complete Schedule T.	Description Rental ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Joey McCarthy	Office sought JP 5-2	Office held

Date	Payee name		

Amount ($) ☐ Reimbursement from political contributions intended	Payee address; ☐ Check if individual's residence address.	City;	State;	Zip Code

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ☐ Check if travel outside of Texas. Complete Schedule T.	Description ☐ Check if Austin, TX, officeholder living expense

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED