

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: 10
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Nathan	<div>OFFICE USE ONLY</div> <div>Lamar County Elections</div> <div>Date Received JAN 15 2026</div>	
	NICKNAME LAST SUFFIX Polsky		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input checked="" type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 7991 FM 137 Paris, TX 75460	Date Hand-delivered <div>Received</div>	
		Receipt # Amount	
		Date Processed	
		Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI NICKNAME LAST SUFFIX		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION		
8 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)		
9 PERIOD COVERED	Month Day Year Month Day Year 10/20/2025 THROUGH 12/31/2025		
10 ELECTION	ELECTION DATE Month Day Year 11/03/2026	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) None	12 OFFICE SOUGHT (if known) Lamar County Commissioner Place 2	

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME	Polsky, Nathan	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	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.	
	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)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 975.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 816.52
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 208.48
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 50.00

17 AFFIDAVIT		
<p>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.</p>		
<p>_____ Signature of Candidate or Officeholder</p>		
AFFIX NOTARY STAMP / SEAL ABOVE		
<p>Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.</p>		
Signature of officer administering	Printed name of officer administering	Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

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18 FILER NAME Polsky, Nathan		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 975.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 50.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 816.52
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
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: 1/3 Rpt: 4/10

2 FILER NAME
Polsky, Nathan

3 Filer ID

4 Date
10/20/2025

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Amelang, Andrew

7 Amount of Contribution (\$) \$250.00

6 Contributor address; City; State; Zip Code

1240 Rehburg Rd

Brenham, TX 77833

8 Principal occupation / Job title (See Instructions)
retired

9 Employer (See Instructions)
retired

Date
11/16/2025

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Benedict, Wes

Amount of Contribution (\$) \$100.00

Contributor address; City; State; Zip Code

9308 Queens Park Cv

Austin, TX 78717

Principal occupation / Job title (See Instructions)
Advocacy

Employer (See Instructions)
Texans for Reasonable Solutions

Date
11/08/2025

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Brashear, Frances

Amount of Contribution (\$) \$50.00

Contributor address; City; State; Zip Code

11989 FM 1834

Raymondville, TX 78580

Principal occupation / Job title (See Instructions)
Loan Admin

Employer (See Instructions)
Texas Farm Credit

Date
11/08/2025

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Dooling, Michael

Amount of Contribution (\$) \$50.00

Contributor address; City; State; Zip Code

1406 OVERTURE WAY

Carrollton, TX 75006

Principal occupation / Job title (See Instructions)
Cyber Security

Employer (See Instructions)
Bank of America

Date
10/20/2025

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Haseloff, JR

Amount of Contribution (\$) \$250.00

Contributor address; City; State; Zip Code

4320 Laurie Michelle Rd

San Antonio, TX 78261

Principal occupation / Job title (See Instructions)
retired

Employer (See Instructions)
retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 2/3 Rpt: 5/10

2 FILER NAME
Polsky, Nathan

3 Filer ID

4 Date
11/08/2025

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Hoogen, Austen

7 Amount of Contribution (\$) \$50.00

6 Contributor address; City; State; Zip Code

601 Donaldson Avenue

San Antonio, TX 78201

8 Principal occupation / Job title (See Instructions)
Software Engineer

9 Employer (See Instructions)
Apex Systems

Date
10/24/2025

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Mitchell, Patrick

Amount of Contribution (\$) \$25.00

Contributor address; City; State; Zip Code

209 Tracy Ln

Victoria, TX 77904

Principal occupation / Job title (See Instructions)
Help Desk Supervisor

Employer (See Instructions)
VTX1 - Victoria

Date
11/24/2025

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Mitchell, Patrick

Amount of Contribution (\$) \$25.00

Contributor address; City; State; Zip Code

209 Tracy Ln

Victoria, TX 77904

Principal occupation / Job title (See Instructions)
Help Desk Supervisor

Employer (See Instructions)
VTX1 - Victoria

Date
12/24/2025

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Mitchell, Patrick

Amount of Contribution (\$) \$25.00

Contributor address; City; State; Zip Code

209 Tracy Ln

Victoria, TX 77904

Principal occupation / Job title (See Instructions)
Help Desk Supervisor

Employer (See Instructions)
VTX1 - Victoria

Date
11/08/2025

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Westbrook, Jack

Amount of Contribution (\$) \$50.00

Contributor address; City; State; Zip Code

3930 Puckett Dr.

Amarillo, TX 79109

Principal occupation / Job title (See Instructions)
retired

Employer (See Instructions)
retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/3 Rpt: 6/10
2 FILER NAME Polsky, Nathan		3 Filer ID
4 Date 12/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodcraft, Ryan <hr/> 6 Contributor address; City; State; Zip Code 14708 Tierra Coruna Ave El Paso, TX 79938	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:
Sch: 1/1 Rpt: 7/10

2 FILER NAME
Polsky, Nathan

3 Filer ID

4 TOTAL OF UNITEMIZED LOANS

\$

5 Date of loan
10/20/2025

7 Name of lender ☐ out-of-state PAC (ID#: _____)
Polsky, Nathan

9 Loan Amount (\$)
\$50.00

6 Is lender a
financial
institution?
No

8 Lender address; City; State; Zip Code
7991 FM 137

Paris, TX 75460

10 Interest Rate

11 Maturity Date

12 Principal occupation / Job title (See Instructions)
Pre-Sales/Delivery Engineer

13 Employer (See Instructions)
ENEA

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

21 Employer (See Instructions)

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: 1/3 Rpt: 8/10	2 FILER NAME Polisky, Nathan	3 Filer ID
4 Date 11/20/2025	5 Payee name Lamar County Clerk	
6 Amount (\$) \$750.00	7 Payee address; City; State; Zip Code 119 N. Main St. Paris, TX 75460	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/20/2025	Candidate/Officeholder name Payee name Raise The Money	Office sought Office held
Amount (\$) \$32.99	Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/24/2025	Candidate/Officeholder name Payee name Raise The Money	Office sought Office held
Amount (\$) \$1.48	Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 2/3 Rpt: 9/10		2 FILER NAME Polsky, Nathan		3 Filer ID	
4 Date 11/08/2025		5 Payee name Raise The Money			
6 Amount (\$) \$10.80		7 Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/16/2025		Payee name Raise The Money			
Amount (\$) \$5.15		Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/24/2025		Payee name Raise The Money			
Amount (\$) \$1.48		Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

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: 3/3 Rpt: 10/10	2 FILER NAME Polsky, Nathan	3 Filer ID
4 Date 12/23/2025	5 Payee name Raise The Money	
6 Amount (\$) \$13.14	7 Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/24/2025	Payee name Raise The Money	
Amount (\$) \$1.48	Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held