

# 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:
<b>3 CANDIDATE / OFFICEHOLDER NAME</b> MS / MRS / MR <b>Mr.</b> FIRST <b>Stephen</b> MI NICKNAME <b>"Red"</b> LAST <b>Holmes</b> SUFFIX				<b>OFFICE USE ONLY</b> <small>Date Received</small> <b>Lamar County Elections</b> <b>6</b>	
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b> ADDRESS / PO BOX: <b>416 CR. 43600</b> APT / SUITE #: <b>Paris</b> CITY: <b>TX</b> STATE: <b>75462</b> <input type="checkbox"/> Change of Address				<b>JAN 20 2026</b> <b>Received</b> <small>Date Hand-delivered or Date Postmarked</small>	
<b>5 CANDIDATE/ OFFICEHOLDER PHONE</b> AREA CODE <b>(903)</b> PHONE NUMBER <b>346-9234</b> EXTENSION				<small>Receipt #</small> <input type="text"/> <small>Amount \$</small> <input type="text"/>	
<b>6 CAMPAIGN TREASURER NAME</b> MS / MRS / MR <b>Mrs.</b> FIRST <b>Tuesday</b> MI NICKNAME <b>Chadwick</b> LAST <b>Smallwood</b> SUFFIX				<small>Date Processed</small> <small>Date Imaged</small>	
<b>7 CAMPAIGN TREASURER ADDRESS</b> <small>(Residence or Business)</small> STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: <b>555 Lamor Ave.</b> CITY: <b>Paris</b> STATE: <b>TX</b> ZIP CODE <b>75460</b>					
<b>8 CAMPAIGN TREASURER PHONE</b> AREA CODE <b>(903)</b> PHONE NUMBER <b>249-1641</b> EXTENSION					
<b>9 REPORT TYPE</b> <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)					
<b>10 PERIOD COVERED</b> Month <b>11</b> Day <b>7</b> Year <b>2025</b> THROUGH <b>11 / 7 / 25</b> THROUGH <b>1 / 14 / 26</b>					
<b>11 ELECTION</b> ELECTION DATE Month <b>03</b> Day <b>03</b> Year <b>2026</b> <small>Primary</small> <input checked="" type="checkbox"/> <small>Runoff</small> <input type="checkbox"/> <small>Other Description</small> <input type="checkbox"/> <small>General</small> <input type="checkbox"/> <small>Special</small> <input type="checkbox"/>					
<b>12 OFFICE</b> OFFICE HELD (if any)				<b>13 OFFICE SOUGHT (if known)</b> <b>Justice of Peace Prec #4</b>	
<b>14 NOTICE FROM POLITICAL COMMITTEE(S)</b> <small>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.</small>					
<input type="checkbox"/> Additional Pages		<small>COMMITTEE TYPE</small> <input type="checkbox"/> COMMITTEE NAME <small>GENERAL</small> <small>SPECIFIC</small> <small>COMMITTEE ADDRESS</small> <small>COMMITTEE CAMPAIGN TREASURER NAME</small> <small>COMMITTEE CAMPAIGN TREASURER ADDRESS</small>			

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**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

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

**15 C/OH NAME**

Stephen "Red" Holmes

**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)

\$ 10550.00

**EXPENDITURE  
TOTALS**

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.

\$

**CONTRIBUTION  
BALANCE**

4. **TOTAL POLITICAL EXPENDITURES**

\$ 5,946.32

**OUTSTANDING  
LOAN TOTALS**

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

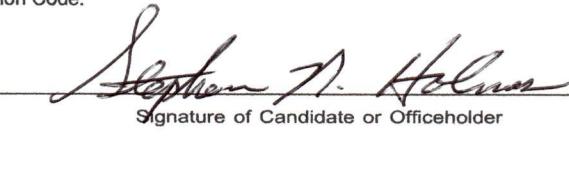
\$

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$

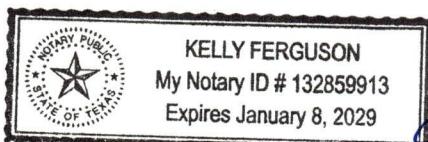
**18 SIGNATURE**

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 Stephen N. Holmes this the 20<sup>th</sup> day of January, 20 20, 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 \_\_\_\_\_, 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 \_\_\_\_\_.

Signature of Candidate/Officeholder (Declarant)

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

19 FILER NAME	Stephen "Red" Holmes	
20 Filer ID (Ethics Commission Filers)		
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 18,550.00	
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	\$ 6,000.00	
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 5,946.32	
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	\$	
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.

<p>The Instruction Guide explains how to complete this form.</p>				1 Total pages Schedule A1:  <i>1</i>
<b>2 FILER NAME</b> <i>Stephen "Red" Holmes</i>				3 Filer ID (Ethics Commission Filers)
<b>4 Date</b> <i>12/30/25</i>	<b>5 Full name of contributor</b> <i>Larry Townes</i>	<input type="checkbox"/> out-of-state PAC (ID#: <i>P.O. Box 739 Lewisville Ar. 71845</i>		<b>7 Amount of contribution (\$)</b> <i>2500.00</i>
<b>6 Contributor address;</b> <i>P.O. Box 739 Lewisville Ar. 71845</i>		City;	State;	Zip Code
<b>8 Principal occupation / Job title (See Instructions)</b> <i>OWNER Townes Telecommunications</i>		<b>9 Employer (See Instructions)</b> <i>Self</i>		
<b>Date</b> <i>12/30/25</i>	<b>Full name of contributor</b> <i>Rick Browning</i>	<input type="checkbox"/> out-of-state PAC (ID#: <i>4170 Linn Drive Paris TX 75462</i>		<b>Amount of contribution (\$)</b> <i>50.00</i>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>		
<b>Date</b> <i>1/7/26</i>	<b>Full name of contributor</b> <i>Larry Townes</i>	<input type="checkbox"/> out-of-state PAC (ID#: <i>P.O. Box 739 Lewisville Ar. 71845</i>		<b>Amount of contribution (\$)</b> <i>2000.00</i>
<b>Contributor address;</b> <i>P.O. Box 739 Lewisville Ar. 71845</i>		City;	State;	Zip Code
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>		
<b>Date</b> <i>1/7/26</i>	<b>Full name of contributor</b> <i>Stephen "Red" Holmes</i>	<input type="checkbox"/> out-of-state PAC (ID#: <i>146 CR 43600 Paris Tx. 75462</i>		<b>Amount of contribution (\$)</b> <i>6000.00</i>
<b>Contributor address;</b> <i>146 CR 43600 Paris Tx. 75462</i>		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> <b>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</b>				

**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)	
2	Stephen "Red" Holmes		
4 Date	5 Payee name		
12/16/25	Function 4		
6 Amount (\$)	7 Payee address;	City; State; Zip Code	
16.78	1010 Lamar Ave.	Paris TX 75460	
<input type="checkbox"/> Check if individual's residence address.			
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
	Advertising Expense	Name tag	
	(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		Office sought	Office held
Date	Payee name		
1/18/26	Designer Graphics		
Amount (\$)	Payee address;	City; State; Zip Code	
3,306.04	12404 Hwy 155 S	Tyler TX	75703
<input type="checkbox"/> Check if individual's residence address.			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description	
	Advertising	Yard 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		Office sought	Office held
Date	Payee name		
1/18/26	Designer Graphics		
Amount (\$)	Payee address;	City; State; Zip Code	
392.31	12404 Hwy 155 S.	Tyler TX	75703
<input type="checkbox"/> Check if individual's residence address.			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description	
	Advertising	Yard 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		Office sought	Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>			

**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  
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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
2	Stephen "Red" Holmes		
4 Date	5 Payee name		
12/30/25	1st Street Media		
6 Amount (\$)	7 Payee address;	City; State; Zip Code	
1,156.19	14 1st Street SE Paris	TX 75460	
<input type="checkbox"/> Check if individual's residence address.			
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
	Advertising	Yard Signs	
(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
Date	Payee name		
12/30/25	1st Street Media		
Amount (\$)	Payee address;	City; State; Zip Code	
708.00	14 1st Street SE Paris	TX	75460
<input type="checkbox"/> Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	Advertising	My Paris Texas - 30 days	
<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
Date	Payee name		
11/7/25	Lamer County Republican Party		
Amount (\$)	Payee address;	City; State; Zip Code	
375.00	Club Country Estates Paris,	TX	75460
<input type="checkbox"/> Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	Fees	Filing Fee	
<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
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>			

## LOANS

## SCHEDULE E

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 E: <i>1</i>
2 FILER NAME <i>Stephen 'Red' Holmes</i>			3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS			\$
5 Date of loan <i>1/17/26</i>	7 Name of lender <i>Stephen 'Red' Holmes</i>	<input type="checkbox"/> out-of-state PAC (ID#: .....)	9 Loan Amount (\$) <i>6000.00</i>
6 Is lender a financial institution? <i>Y <input checked="" type="checkbox"/> N</i>	8 Lender address; <i>1446 CR 43600</i>	City; <i>Paris</i>	State; Zip Code <i>25462</i>
12 Principal occupation / Job title (See Instructions) <i>Retired</i>	13 Employer (See Instructions) <i>.....</i>		
14 Description of Collateral <input checked="" type="checkbox"/> none	15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)		
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor .....	18 Guarantor address; .....	19 Amount Guaranteed (\$)
20 Principal Occupation (See Instructions)	21 Employer (See Instructions)		
Date of loan	Name of lender .....	<input type="checkbox"/> out-of-state PAC (ID#: .....)	Loan Amount (\$)
Is lender a financial institution? <i>Y <input checked="" type="checkbox"/> N</i>	Lender address; .....	City; .....	State; Zip Code .....
Principal occupation / Job title (See Instructions)	Employer (See Instructions)		
Description of Collateral <input type="checkbox"/> none	<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)		
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor .....	Guarantor address; .....	Amount Guaranteed (\$)
Principal Occupation (See Instructions)	Employer (See Instructions)		

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If lender is out-of-state PAC, please see Instruction guide for additional reporting requirements.