

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH  
COVER SHEET PG 1**

<b>The C/OH Instruction Guide explains how to complete this form.</b>		<b>1 Filer ID</b> (Ethics Commission Filers)	<b>2 Total pages filed:</b> <div style="text-align: right; font-size: 24pt; font-weight: bold;">12</div>		
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR	FIRST <b>Joshua</b>	MI	OFFICE USE ONLY	
	NICKNAME	LAST <b>Guinn</b>	SUFFIX		
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>  Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <b>10308 Hernandez Ave, Midland, TX 79707</b>				
	Date Received				
<b>5 CANDIDATE/ OFFICEHOLDER PHONE</b>	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked	
	<b>( 432 )</b>	<b>352-1176</b>			
<b>6 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR	FIRST <b>Kimberly</b>	MI	Receipt #      Amount \$	
	NICKNAME	LAST <b>Fotis</b>	SUFFIX		
<b>7 CAMPAIGN TREASURER ADDRESS</b>  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <b>4605 Woodhollow Drive Midland, TX 79707</b>				
	Date Processed				
<b>8 CAMPAIGN TREASURER PHONE</b>	AREA CODE	PHONE NUMBER	EXTENSION	Date Imaged	
	<b>( 432 )</b>	<b>770-7863</b>			
<b>9 REPORT TYPE</b>	<input type="checkbox"/> January 15 <input checked="" 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      Day      Year <b>7 / 1 / 24</b>		THROUGH	Month      Day      Year <b>9 / 26 / 24</b>	
<b>11 ELECTION</b>	ELECTION DATE		ELECTION TYPE		
	Month      Day      Year <b>11 / 5 / 24</b>	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special			
<b>12 OFFICE</b>	OFFICE HELD (if any) <b>Midland ISD District 7</b>		<b>13 OFFICE SOUGHT (if known)</b>		
<b>14 NOTICE FROM POLITICAL COMMITTEE(S)</b>  Additional Pages	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			
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS			
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRESS			

GO TO PAGE 2

# 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	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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>4</b>	<b>2</b> FILER NAME Joshua Guinn	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/07/2024	<b>5</b> Payee name WinRed	
<b>6</b> Amount (\$) <b>41.02</b>	<b>7</b> Payee address; City; State; Zip Code 1776 Wilson Blvd., Suite 530, Arlington, VA 22219	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description WinRed service fee
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date 08/08/2024	Payee name WinRed	
Amount (\$) 10.25	Payee address; City; State; Zip Code 1776 Wilson Blvd., Suite 530, Arlington, VA 22219	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees	Description WinRed service fee
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date 08/09/2024	Payee name WinRed	
Amount (\$) 6.15	Payee address; City; State; Zip Code 1776 Wilson Blvd., Suite 530, Arlington, VA 22219	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees	Description WinRed service fee
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### 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	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)
Credit Card Payment			

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<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Joshua Guinn	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/22/2024	<b>5</b> Payee name A-1 Signs Engravers, Inc.	
<b>6</b> Amount (\$) 4,500.13	<b>7</b> Payee address; City; State; Zip Code 1200 Garden City Hwy, Midland, TX 79701	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description Yard Signs
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right">Office held</span>
Date 09/26/2024	Payee name Cauble Sportswear	
Amount (\$) 700.92	Payee address; City; State; Zip Code 3209 Commercial Dr., Midland, TX 79701	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description T-Shirts
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right">Office held</span>
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right">Office held</span>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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### 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	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)
Credit Card Payment			

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<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Joshua Guinn	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/09/2024	<b>5</b> Payee name WinRed	
<b>6</b> Amount (\$) 10.25	<b>7</b> Payee address; City; State; Zip Code 1776 Wilson Blvd., Suite 530, Arlington, VA 22219	
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description WinRed service fee
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right">Office held</span>
Date 09/19/2024	Payee name Permian Basin Office Products	
Amount (\$) 78.43	Payee address; City; State; Zip Code 208 S A St, Midland TX 79701	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Push Cards
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right">Office held</span>
Date 08/30/2024	Payee name Lamar Advertising	
Amount (\$) 4,644.00	Payee address; City; State; Zip Code 2908 S County Road 1250, Midland, TX 79706	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Billboard Advertising
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right">Office held</span>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### 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	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)
Credit Card Payment			

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<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Joshua Guinn	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/12/2024	<b>5</b> Payee name WinRed	
<b>6</b> Amount (\$) 9.85	<b>7</b> Payee address; City; State; Zip Code 1776 Wilson Blvd., Suite 530, Arlington, VA 22219	
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description WinRed service fee
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right">Office held</span>
Date 08/21/2024	Payee name WinRed	
Amount (\$) 41.02	Payee address; City; State; Zip Code 1776 Wilson Blvd., Suite 530, Arlington, VA 22219	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description WinRed service fee
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right">Office held</span>
Date 08/23/2024	Payee name WinRed	
Amount (\$) 61.52	Payee address; City; State; Zip Code 1776 Wilson Blvd., Suite 530, Arlington, VA 22219	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description WinRed service fee
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right">Office held</span>

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# 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>2</b> FILER NAME Melissa Semmler		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/12/2024	<b>5</b> Full name of contributor out-of-state PAC (ID#: _____) RJ Steel Trading LLC <b>6</b> Contributor address; City; State; Zip Code 4416 Briarwood Drive Ste 110 #203	<b>7</b> Amount of contribution (\$) <b>1,000.00</b>
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 08/07/2024	Full name of contributor out-of-state PAC (ID#: _____) Lighthning Oilfield Services, Inc Contributor address; City; State; Zip Code PO Box 203 Haslet, TX 76052	Amount of contribution (\$) <b>1,000.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Joshua Guinn		3 Filer ID (Ethics Commission Filers)
4 Date 07/22/2024	5 Full name of contributor out-of-state PAC (ID#: _____) Twenty-Tweleve Holdings, LP 6 Contributor address; City; State; Zip Code 23 West Industrial Loop Midland, TX 79701	7 Amount of contribution (\$) <b>7,500.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/22/2024	Full name of contributor out-of-state PAC (ID#: _____) Classic Crane and Transport, LP Contributor address; City; State; Zip Code PO Box 1545 Stephenville, TX 76401	Amount of contribution (\$) <b>1,000.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/06/2024	Full name of contributor out-of-state PAC (ID#: _____) S&D Trucking LLC Contributor address; City; State; Zip Code 2620 Charway Road	Amount of contribution (\$) <b>10,000.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/07/2024	Full name of contributor out-of-state PAC (ID#: _____) Youngs Building Systems Contributor address; City; State; Zip Code PO Box 9908 Midland, TX 79708	Amount of contribution (\$) <b>2,000.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Joshua Guinn		3 Filer ID (Ethics Commission Filers)
4 Date 08/07/2024	5 Full name of contributor out-of-state PAC (ID#: _____) Bales Family Holdings, LLC ..... 6 Contributor address; City; State; Zip Code PO Box 8472	7 Amount of contribution (\$)  <b>2,000.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/16/2024	Full name of contributor out-of-state PAC (ID#: _____) Elzner Equipment Ventures ..... Contributor address; City; State; Zip Code 895 Rosastone TRL	Amount of contribution (\$)  <b>10,000.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/16/2024	Full name of contributor out-of-state PAC (ID#: _____) Dewitt Energy Group, LLC ..... Contributor address; City; State; Zip Code 309 Still Hollow Creek	Amount of contribution (\$)  <b>500.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/29/2024	Full name of contributor out-of-state PAC (ID#: _____) Matthew Hamilton ..... Contributor address; City; State; Zip Code 1906 Hereford Blvd	Amount of contribution (\$)  <b>1,000.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<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.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Joshua Guinn		3 Filer ID (Ethics Commission Filers)
4 Date 08/21/2024	5 Full name of contributor out-of-state PAC (ID#: _____) Trudy Rodriquez 6 Contributor address; City; State; Zip Code 417 West Dormard Avenue, Midland, TX 79705	7 Amount of contribution (\$)  <b>1,041.02</b>
8 Principal occupation / Job title (See Instructions) Project Manager		9 Employer (See Instructions) Arcadis
Date 08/23/2024	Full name of contributor out-of-state PAC (ID#: _____) Joel Dossey Contributor address; City; State; Zip Code 14370 S Klondyke, Odessa, TX 79766	Amount of contribution (\$)  <b>1,561.52</b>
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Dossey Oilfield Services llc
Date 09/09/2024	Full name of contributor out-of-state PAC (ID#: _____) Trey Garmon Contributor address; City; State; Zip Code P.O. Box 52788, Midland, TX 79710	Amount of contribution (\$)  <b>260.25</b>
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Trey Garmon
Date 07/22/2024	Full name of contributor out-of-state PAC (ID#: _____) Mike Byrd Contributor address; City; State; Zip Code PO Box 7269 Abilene, TX 79608	Amount of contribution (\$)  <b>5,000.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# 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>5</b>
<b>2</b> FILER NAME Joshua Guinn		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/07/2024	<b>5</b> Full name of contributor out-of-state PAC (ID#: _____) Larry White <b>6</b> Contributor address; City; State; Zip Code 503 Wagner Dr., Midland TX 79706	<b>7</b> Amount of contribution (\$) <b>1,041.02</b>
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) Spike White
Date 08/08/2024	Full name of contributor out-of-state PAC (ID#: _____) Trey Garmon Contributor address; City; State; Zip Code P.O. Box 52788, Midland TX 79710	Amount of contribution (\$) <b>260.25</b>
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Trey Garmon
Date 08/09/2024	Full name of contributor out-of-state PAC (ID#: _____) Jereme Sanchez Contributor address; City; State; Zip Code 6619 Colony Rd., Midland, TX 79706	Amount of contribution (\$) <b>156.15</b>
Principal occupation / Job title (See Instructions) Sales Director		Employer (See Instructions) Water Runner
Date 08/12/2024	Full name of contributor out-of-state PAC (ID#: _____) Chad White Contributor address; City; State; Zip Code 5408 S C R 1200, Midland, TX 79706	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See Instructions) Mechanic		Employer (See Instructions) Premier Electric Motors
<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.		

# SUBTOTALS - C/OH

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

**19** FILER NAME

Joshua Guinn

**20** Filer ID (Ethics Commission Filers)

**21** SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 45,570.21
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	SCHEDULE E: LOANS	\$ 0.00
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 10,103.54
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0.00
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0.00
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.00

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

<b>15 C/OH NAME</b> Joshua Guinn		<b>16 Filer ID (Ethics Commission Filers)</b>
<b>17 CONTRIBUTION TOTALS</b>	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)	\$ 45,570.21
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 10,103.54
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 35,553.29
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**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 \_\_\_\_\_ this the \_\_\_\_\_ day of \_\_\_\_\_, 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

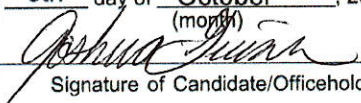
OR

**(2) Unsworn Declaration**

My name is Joshua A. Guinn, and my date of birth is 11/08/1986.

My address is 10308 Hernandez Ave, Midland, TX, 79707, U.S.A.  
(street) (city) (state) (zip code) (country)

Executed in Midland County, State of Texas, on the 6th day of October, 20 24.  
(month) (year)

  
 \_\_\_\_\_  
 Signature of Candidate/Officeholder (Declarant)