

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: 23		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY	
		John	K		
	NICKNAME	LAST	SUFFIX	Date Received	
		Hill			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE	Date Hand-delivered or Date Postmarked	
	P.O. BOX 1660				
	SHERMAN, TX 75091			Receipt #	Amount
				Date Processed	
				Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI		
		CLINT	A		
	NICKNAME	LAST	SUFFIX		
		LONG	M.D.		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE; ZIP CODE
	2203 N. FM 1417			SHERMAN	TX 75092
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	903	892	2020		
8 REPORT TYPE	<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)				
9 PERIOD COVERED	Month	Day	Year	Month	Day
		01/01/2024	THROUGH	01/25/2024	
10 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month	Day	Year	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff
		03/05/2024		<input type="checkbox"/> General	<input type="checkbox"/> Other
				<input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) District Attorney Place Sherman District GRAYSON		

GO TO PAGE 2

GRAYSON CO ELECTIONS
2024 FEB 5 PM 04:10

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2


2 of 23

13 C / OH NAME Hill, John	14 Filer ID
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15 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. <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.		
<input type="checkbox"/> Additional Pages <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		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)	\$	8,545.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$	5,133.17
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 AFFIDAVIT



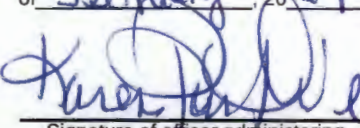
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said John Kermit Hill, this the 5th day of February, 2024, to certify which, witness my hand and seal of office.



 Signature of officer administering

Karen Parthie

 Printed name of officer administering

Notary

 Title of officer administering oath

WISDOM CO ELECTRONS
2024 FEB 5 PM 1:48:15

SUBTOTALS - C/OH

18 FILER NAME Hill, John	19 Filer ID
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20 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 5,545.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 3,000.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 5,091.37
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 5,133.17
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: 1/7 Rpt: 4/23
2 FILER NAME Hill, John		3 Filer ID
4 Date 01/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALL, R <hr/> 6 Contributor address; City; State; Zip Code 107 W. BALL TOM BEAN, TX 75489	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRASSFIELD, MARK <hr/> Contributor address; City; State; Zip Code 1721 S BROWN AVE DENISON, TX 75020	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRISTMAN, DAVID <hr/> Contributor address; City; State; Zip Code 2930 WILSONWOOD WAY SHERMAN, TX 75092	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRISTMAN, KISHA <hr/> Contributor address; City; State; Zip Code 2930 WILSONWOOD WAY SHERMAN, TX 75092	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRISTMAN, MARY <hr/> Contributor address; City; State; Zip Code 527 HAYDEN HALL RD BELLS, TX 75414	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

2024 FEB 5 10:43 AM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/7 Rpt: 5/23
2 FILER NAME Hill, John		3 Filer ID
4 Date 01/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUSTOM CREATIONS	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code 231 W WOODARD ST UNIT 637 DENISON, TX 75020		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANCER, ANN	Amount of Contribution (\$) \$260.00
Contributor address; City; State; Zip Code 611 QUEENS RD DENISON, TX 75020		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GESWEIN, CHUCK	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code 4017 SHADOW CIRCLE DENISON, TX 75020		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAYSON COUNTY CONSERVATIVES PAC	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 3164 HARRELL RD HOWE, TX 75459		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSON, BUFFY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code 1302 N. LUCKETT ST. SHERMAN, TX 75090		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/7 Rpt: 6/23
2 FILER NAME Hill, John		3 Filer ID
4 Date 01/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, CLIFFORD	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code 3718 FAWN MEADOW TR DENISON, TX 75020		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KANE, MAUREEN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 3700 MELROSE TRL SHERMAN, TX 75090		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANE, MACKENZIE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code 611 N GAYLE CR BELLS, TX 75414		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONG M.D., CLINTON	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 108 SANDY CREEK CR SHERMAN, TX 75092		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUTHER, SHELLEY	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 587 WHITEMOUND ROAD SHERMAN, TX 75090		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/7 Rpt: 7/23
2 FILER NAME Hill, John		3 Filer ID
4 Date 01/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASSENGALE, KARA	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 1709 W. MCGEE ST. SERMAN, TX 75092		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAIL, SHANNON	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code 529 ANSLEY LANE DENISON, TX 75020		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NUNCIO, KALLI	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code 928 W. WALKER ST. DENISON, TX 75020		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, JOHN	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code 93 GLENWOOD DR DENISON, TX 75020		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARTHIE, KAREN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 2715 W. WALKER STREET DENISON, TX 75020		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

UNWAVENED
2024 FEB 2 4:43:44

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/7 Rpt: 8/23
2 FILER NAME Hill, John		3 Filer ID
4 Date 01/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNEED, LINDA	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 4909 HARA LANE SHERMAN, TX 75092		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, JAMIE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 2041 OKLAHOMA 7E SULPHUR, OK 73086		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, JUDY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 1006 MEADOWLARK LANE DURANT, OK 74701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VINCENT, BEN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 625 VERNA LANE DENNISON, TX 75020		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, DANA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 922 LANGFORD CT ANNA, TX 75409		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

GRAYSON COUNTY ELECTIONS
2024 FEB 3 11:19 AM '24

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/7 Rpt: 9/23
2 FILER NAME Hill, John		3 Filer ID
4 Date 01/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATTERSON, DONNA	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code 107 PECOS STREET BELLS, TX 75414	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, BOBBY	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 2545 E. FM 120 DENISON, TX 75021	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, GABRIEL	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 109 MELROSE CR DENISON, TX 75020	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, GABRIEL	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 109 MELROSE CR DENISON, TX 75020	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, JACOB	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code 579 GUN CLUB ROAD DENISON, TX 75021	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/7 Rpt: 10/23
2 FILER NAME Hill, John		3 Filer ID
4 Date 01/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, JACOB	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 579 GUN CLUB RD DENISON, TX 75021		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, LINDSAY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 109 MELROSE CR DENISON, TX 75020		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, LINDSAY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 109 MELROSE CR DENISON, TX 75020		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

BRUNSON - LEGISLATIVE
2024 FEB 5 10:46:35

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 11/23	
2 FILER NAME Hill, John		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 01/10/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DSB WOLDWIDE, INC	8 Amount of contribution (\$) \$1,000.00	9 In-kind contribution description ADVERTISING SERVICES
7 Contributor address; City; State; Zip Code 1906 W. TAYLOR ST ROOM 2 SHERMAN, TX 75092		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 01/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEXOMALAND	Amount of contribution (\$) \$2,000.00	In-kind contribution description WEBSITE SERVICES
Contributor address; City; State; Zip Code 1906 W TAYLOR ST ROOM 2 SHERMAN, TX 75092		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

GRAVSON CO ELECTIONS
 2024 FEB 09 09:45:22

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/8 Rpt: 12/23
2 FILER NAME Hill, John		3 Filer ID
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 01/02/2024	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) 903 BREWERS	9 Loan Amount (\$) \$72.42
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 1718 S. ELM ST. SHERMAN, TX 75090	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)
Date of loan 01/20/2024	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) AMAZON	Loan Amount (\$) \$193.14
Is lender a financial institution? No	Lender address; City; State; Zip Code 410 Terry Ave N, Seattle , WA 98109	Interest Rate
		Maturity Date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal occupation		Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 2/8 Rpt: 13/23
2 FILER NAME Hill, John		3 Filer ID
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 01/13/2024	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) AMAZON	9 Loan Amount (\$) \$52.45
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 410 Terry Ave N, Seattle , WA 98109	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor ----- 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)
20 Principal occupation		21 Employer (See Instructions)
Date of loan 01/09/2024	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) AT&T	Loan Amount (\$) \$69.13
Is lender a financial institution? No	Lender address; City; State; Zip Code 301 W US Hwy 82 SUITE 1A SHERMAN, TX 75092	Interest Rate
		Maturity Date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor ----- Guarantor address; City; State; Zip Code	Amount Guaranteed (\$)
Principal occupation		Employer (See Instructions)

GRAYSON C. ELECTIONS
2024 FEB 5 PM 4:45.12

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 3/8 Rpt: 14/23
2 FILER NAME Hill, John		3 Filer ID
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 01/15/2024	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) CITY LIMITS	9 Loan Amount (\$) \$32.74
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 4521 TEXOMA PARKWAY SHERMAN, TX 75090	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor ----- 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)
20 Principal occupation		21 Employer (See Instructions)
Date of loan 01/02/2024	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) FIRST GRAPHIC SERVICES INC	Loan Amount (\$) \$1,398.59
Is lender a financial institution? No	Lender address; City; State; Zip Code 229 GARVON ST. GARLAND, TX 75040	Interest Rate
		Maturity Date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor ----- Guarantor address; City; State; Zip Code	Amount Guaranteed (\$)
Principal occupation		Employer (See Instructions)

GRAND COUNTY ELECTIONS
2024 FEB 5 PM 4:43:17

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 4/8 Rpt: 15/23
2 FILER NAME Hill, John		3 Filer ID
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 01/18/2024	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) FIRST GRAPHIC SERVICES INC	9 Loan Amount (\$) \$1,211.59
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 229 GARVON ST. GARLAND, TX 75040	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	
	18 Guarantor address; City; State; Zip Code	
19 Amount Guaranteed (\$)		
20 Principal occupation		21 Employer (See Instructions)
Date of loan 01/10/2024	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEN GROWLER	Loan Amount (\$) \$48.78
Is lender a financial institution? No	Lender address; City; State; Zip Code 101 E. MAIN ST. DENISON, TX 75020	Interest Rate
		Maturity Date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor	
	Guarantor address; City; State; Zip Code	
Amount Guaranteed (\$)		
Principal occupation		Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 5/8 Rpt: 16/23
2 FILER NAME Hill, John		3 Filer ID
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 01/24/2024	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) HERALD DEMOCRAT	9 Loan Amount (\$) \$4.99
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 603 S. SAM RAYBURN FRWY SHERMAN, TX 75090	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor ----- 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)
20 Principal occupation		21 Employer (See Instructions)
Date of loan 01/16/2024	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) HOT N' CREAMY DONUTS	Loan Amount (\$) \$20.20
Is lender a financial institution? No	Lender address; City; State; Zip Code 717 W. LAMAR ST SHERMAN, TX 75092	Interest Rate
		Maturity Date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor ----- Guarantor address; City; State; Zip Code	Amount Guaranteed (\$)
Principal occupation		Employer (See Instructions)

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LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 6/8 Rpt: 17/23
2 FILER NAME Hill, John		3 Filer ID
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 01/25/2024	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) JOS A BANK	9 Loan Amount (\$) \$481.17
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 101 WHISTLESTOP WAY FAIRVIEW, TX 75069	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)
20 Principal occupation		21 Employer (See Instructions)
Date of loan 01/05/2024	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWE'S	Loan Amount (\$) \$145.06
Is lender a financial institution? No	Lender address; City; State; Zip Code 2801 N. HWY 75 SHERMAN, TX 75090	Interest Rate
		Maturity Date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor Guarantor address; City; State; Zip Code	Amount Guaranteed (\$)
Principal occupation		Employer (See Instructions)

GRANDSON CO - E. LEWIS
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LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 7/8 Rpt: 18/23
2 FILER NAME Hill, John		3 Filer ID
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 01/11/2024	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) OLD IRON POST	9 Loan Amount (\$) \$41.37
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 101 N. TRAVIS ST. SHERMAN, TX 75090	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)
Date of loan 01/23/2024	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) TEXAS ROADHOUSE	Loan Amount (\$) \$54.35
Is lender a financial institution? No	Lender address; City; State; Zip Code 2733 US HWY 75 SHERMAN, TX 75090	Interest Rate
		Maturity Date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal occupation		Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 8/8 Rpt: 19/23	
2 FILER NAME Hill, John		3 Filer ID	
4 TOTAL OF UNITEMIZED LOANS		\$	
5 Date of loan 01/05/2024	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) TRACTOR SUPPLY	9 Loan Amount (\$) \$1,265.39	
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 3201 N. HWY 75 SHERMAN, TX 75090	10 Interest Rate	
		11 Maturity Date	
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)	
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>	
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor		19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code		
20 Principal occupation		21 Employer (See Instructions)	

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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: 1/4 Rpt: 20/23		2 FILER NAME Hill, John		3 Filer ID	
4 Date 01/12/2024		5 Payee name ABUSAOUD, OMAR			
6 Amount (\$) \$145.00		7 Payee address; City; State; Zip Code 900 N GRAND AVE SHERMAN, TX 75090			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BLOCK WALKING	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 01/03/2024		Payee name ABUSAOUD, OMAR			
Amount (\$) \$150.00		Payee address; City; State; Zip Code 900 N GRAND AVE SHERMAN, TX 75090			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BLOCK WALKING	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 01/25/2024		Payee name BROOKS, BRITTON			
Amount (\$) \$1,000.00		Payee address; City; State; Zip Code 1308 PRESTON DR SHERMAN, TX 75092			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) REJECTED CONTRIBUTION		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND GIVEN DUE TO REJECTED CONTRIBUTION	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

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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: 2/4 Rpt: 21/23	2 FILER NAME Hill, John	3 Filer ID
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4 Date 01/24/2024	5 Payee name FIRST GRAPHICS
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6 Amount (\$) \$1,211.59	7 Payee address; City; State; Zip Code 229 GARVON ST GARLAND, TX 75040
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN SIGNS AND HARDWARE
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/12/2024	Payee name GATSON, MELVIN
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Amount (\$) \$80.00	Payee address; City; State; Zip Code 900 GRAND AVE SHERMAN, TX 75090
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BLOCK WALKING
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/03/2024	Payee name GATSON, MELVIN
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Amount (\$) \$150.00	Payee address; City; State; Zip Code 900 GRAND AVE SHERMAN, TX 75090
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BLOCK WALKING
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 3/4 Rpt: 22/23		2 FILER NAME Hill, John		3 Filer ID	
4 Date 01/24/2024		5 Payee name HARLAND CLARKE			
6 Amount (\$) \$72.86		7 Payee address; City; State; Zip Code 5800 Northwest Pkwy San Antonio, TX 78249			
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 CHECK ORDER	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 01/16/2024		Payee name JUSTBUTTONS			
Amount (\$) \$92.95		Payee address; City; State; Zip Code 59 School Ground Road UNIT D Branford, CT 06405			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BUTTONS	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 01/23/2024		Payee name MAC'S SHIRTS AND MORE			
Amount (\$) \$649.50		Payee address; City; State; Zip Code 213 E LAMAR ST SHERMAN, TX 75090			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CAPS	
Complete ONLY 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: 4/4 Rpt: 23/23	2 FILER NAME Hill, John	3 Filer ID
4 Date 01/12/2024	5 Payee name MAC'S SHIRTS AND MORE	
6 Amount (\$) \$286.86	7 Payee address; City; State; Zip Code 213 E LAMAR ST SHERMAN, TX 75090	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TSHIRTS
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/25/2024	Candidate/Officeholder name O'NEAL, NORMAN	
Amount (\$) \$1,000.00	Office sought Office held	
Date 01/25/2024	Payee name O'NEAL, NORMAN	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 614 N. Travis Street Sherman, TX 75090	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REJECTED CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND DUE TO REJECTED CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/17/2024	Candidate/Officeholder name	
Amount (\$) \$294.41	Office sought Office held	
Date 01/17/2024	Payee name VISTAPRINT	
Amount (\$) \$294.41	Payee address; City; State; Zip Code 100 Hayden Avenue LEXINGTON, MA 02421	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BUSINESS CARDS
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name		
Office sought Office held		