

# 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:

7

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / MR

FIRST

MI

Mr. Joseph

NICKNAME

LAST

SUFFIX

Joe

McAnally

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

☐ Change of Address

5 CANDIDATE/  
OFFICEHOLDER  
PHONE

6 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR

FIRST

MI

Mrs. Janet

NICKNAME

LAST

SUFFIX

McAnally

7 CAMPAIGN  
TREASURER  
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

(Residence or Business)

8 CAMPAIGN  
TREASURER  
PHONE

9 REPORT TYPE

☐ January 15

☐ 30th day before election

☐ Runoff

☐ 15th day after campaign  
treasurer appointment  
(Officeholder Only)

☒ July 15

☐ 8th day before election

☐ Exceeded Modified  
Reporting Limit

☐ Final Report (Attach C/OH - FR)

10 PERIOD  
COVERED

Month

Day

Year

Month

Day

Year

11/25/2025

THROUGH

01/15/2026

11 ELECTION

ELECTION DATE

Month

Day

Year

ELECTION TYPE

☒ Primary

☐ Runoff

☐ Other  
Description

☐ General

☐ Special

03/03/2025

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Justice Of The Peace Pct 5

14 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

## OFFICE USE ONLY

Date Received

at 10:12 FILED A M  
o'clock

FEB 09 2026

LEE H. CHAMBERS  
COUNTY CLERK, LIBERTY COUNTY, TEXAS  
BY: Nat Jarama DEPUTY

Date Hand-delivered or Date Postmarked

Receipt #

Amount \$

Date Processed

Date Imaged

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME

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)

\$ 2000.00

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 2000.00

EXPENDITURE  
TOTALS

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE

\$ 1650.36

4. TOTAL POLITICAL EXPENDITURES

\$ 1650.36

CONTRIBUTION  
BALANCE

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

\$ 349.64

OUTSTANDING  
LOAN TOTALS

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

\$

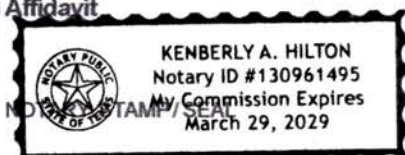
18 SIGNATURE

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.

*Joseph W. McAnally*  
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



Sworn to and subscribed before me by Joseph McAnally this the 9 day of February  
20 26, to certify which, witness my hand and seal of office.

*Kemberly A. Hilton*  
Signature of officer administering oath

Kemberly A. Hilton  
Printed name of officer administering oath

Notary Public  
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\_\_\_\_.

*Joseph W. McAnally*  
Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME

Joe McNally

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2000.00
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$
5.	<input type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
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	\$ 375.00
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.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <div style="font-size: 1.2em; font-family: cursive;">Joe McAnally</div>		3 Filer ID (Ethics Commission Filers)
4 Date <div style="font-size: 1.2em; font-family: cursive;">12/8/25</div>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <div style="font-size: 1.2em; font-family: cursive;">Joe McAnally</div>	7 Amount of contribution (\$) <div style="font-size: 1.5em; font-family: cursive;">2000.00</div>
6 Contributor address; City; State; Zip Code <div style="background-color: black; width: 400px; height: 20px; margin-bottom: 5px;"></div> <div style="font-size: 1.2em; font-family: cursive;">77321</div>		
8 Principal occupation / Job title (See Instructions) <div style="font-size: 1.2em; font-family: cursive;">Pipeline technician</div>		9 Employer (See Instructions) <div style="font-size: 1.2em; font-family: cursive;">Costal Row</div>
Date	Full name of contributor <input type="checkbox"/> 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 <input type="checkbox"/> 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 <input type="checkbox"/> out-of-state PAC (ID#: _____)  Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# 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.

<b>1</b> Total pages Schedule F1:		<b>2</b> FILER NAME <div style="font-size: 1.2em;">Joe McAnally</div>		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date <div style="font-size: 1.2em;">12/17/25</div>		<b>5</b> Payee name <div style="font-size: 1.2em;">Harland Clark</div>			
<b>6</b> Amount (\$) <div style="font-size: 1.2em;">37.50</div>		<b>7</b> Payee address; City; State; Zip Code <div style="font-size: 1.2em;">Southside Bank Cleveland TX 77327</div>			
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) <div style="font-size: 1.2em;">Accounting Checks</div>		<b>(b)</b> Description <div style="font-size: 1.2em;">Checks</div>		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date <div style="font-size: 1.2em;">12/23</div>		Payee name <div style="font-size: 1.2em;">Signs365</div>			
Amount (\$) <div style="font-size: 1.2em;">1423.62</div>		Payee address; City; State; Zip Code <div style="font-size: 1.2em;">Sign365.com Shelby TOWNSH, MI</div>			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <div style="font-size: 1.2em;">§ Advertising</div>		Description <div style="font-size: 1.2em;">Signs</div>		
	<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					
Date <div style="font-size: 1.2em;">12/30</div>		Payee name <div style="font-size: 1.2em;">Amazon</div>			
Amount (\$) <div style="font-size: 1.2em;">70.38</div>		Payee address; City; State; Zip Code <div style="font-size: 1.2em;">Amazon.Com Seattle WA</div>			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <div style="font-size: 1.2em;">Advertising</div>		Description <div style="font-size: 1.2em;">Zip ties, Bungies</div>		
	<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					
<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.

<b>1</b> Total pages Schedule F1: <div style="text-align: center;">2</div>	<b>2</b> FILER NAME <div style="text-align: center;">Joe McAnally</div>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <div style="text-align: center;">1/3/26</div>	<b>5</b> Payee name <div style="text-align: center;">Tractor Supply</div>		
<b>6</b> Amount (\$) <div style="text-align: center;">118.86</div>	<b>7</b> Payee address; City; State; Zip Code <div style="text-align: center;">1725 East Houston St. Cleveland Tx 77327</div>		
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <div style="text-align: center;">Advertising</div>		<b>(b)</b> Description <div style="text-align: center;">fence post for signs</div>
	<div style="display: flex; justify-content: space-between;"> <span><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</span> <span><input type="checkbox"/> Check if Austin, TX, officeholder living expense</span> </div>		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>			
<b>PURPOSE OF EXPENDITURE</b>	<div style="display: flex; justify-content: space-between;"> <span>Date</span> <span>Payee name</span> </div> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <span>Amount (\$)</span> <span>Payee address; City; State; Zip Code</span> </div> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <span>Category (See Categories listed at the top of this schedule)</span> <span>Description</span> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <span><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</span> <span><input type="checkbox"/> Check if Austin, TX, officeholder living expense</span> </div>		
<b>Complete ONLY if direct expenditure to benefit C/OH</b> <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>			
<b>PURPOSE OF EXPENDITURE</b>	<div style="display: flex; justify-content: space-between;"> <span>Date</span> <span>Payee name</span> </div> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <span>Amount (\$)</span> <span>Payee address; City; State; Zip Code</span> </div> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <span>Category (See Categories listed at the top of this schedule)</span> <span>Description</span> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <span><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</span> <span><input type="checkbox"/> Check if Austin, TX, officeholder living expense</span> </div>		
<b>Complete ONLY if direct expenditure to benefit C/OH</b> <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>			
<b>PURPOSE OF EXPENDITURE</b>	<div style="display: flex; justify-content: space-between;"> <span>Date</span> <span>Payee name</span> </div> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <span>Amount (\$)</span> <span>Payee address; City; State; Zip Code</span> </div> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <span>Category (See Categories listed at the top of this schedule)</span> <span>Description</span> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <span><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</span> <span><input type="checkbox"/> Check if Austin, TX, officeholder living expense</span> </div>		
<b>Complete ONLY if direct expenditure to benefit C/OH</b> <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>			

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

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G:		<b>2</b> FILER NAME <u>Joe McNally</u>		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date <u>12-5-25</u>		<b>5</b> Payee name <u>Republican Party filing fee</u>			
<b>6</b> Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended		<b>7</b> Payee address; <u>1808 Sam Houston St. #309</u> City: <u>Liberty</u> State: <u>TEXAS</u> Zip Code: <u>77575</u>			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) <u>filing fee</u>		<b>(b)</b> Description	
		<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name <u>Joe McNally</u>		Office sought <u>Justice of the Peace #5</u>	
Date		Payee name			
Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended		Payee address;  City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)		Description	
		<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	
Date		Payee name			
Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended		Payee address;  City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)		Description	
		<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	
Date		Payee name			
Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended		Payee address;  City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)		Description	
		<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	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED