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: 15

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR | FIRST: Joshua | MI

NICKNAME | LAST: Guinn | SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

Change of Address

ADDRESS / PO BOX: [redacted] | APT / SUITE #: | CITY: Midland, TX 79707 | STATE: | ZIP CODE

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE | PHONE NUMBER: [redacted] | EXTENSION

6 CAMPAIGN TREASURER NAME

MS / MRS / MR | FIRST: Kimberly | MI

NICKNAME | LAST: Fotis | SUFFIX

7 CAMPAIGN TREASURER ADDRESS

(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE): [redacted] | APT / SUITE #: | CITY: Midland, TX 79707 | STATE: | ZIP CODE

8 CAMPAIGN TREASURER PHONE

AREA CODE | PHONE NUMBER: [redacted] | EXTENSION

OFFICE USE ONLY

Date Received: RECEIVED OCT 28 2024 BY: [signature]

Date Hand-delivered or Date Postmarked

Receipt # | Amount $

Date Processed

Date Imaged

9 REPORT TYPE

- ☐ January 15
- ☐ July 15
- ☐ 30th day before election
- ☐ 8th day before election
- ☐ Runoff
- ☐ Exceeded Modified Reporting Limit
- ☐ 15th day after campaign treasurer appointment (Officeholder Only)
- ☐ Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month / Day / Year: 9 / 27 / 24 THROUGH 10 / 26 / 24

11 ELECTION

ELECTION DATE: Month / Day / Year: 11 / 5 / 24

ELECTION TYPE:

- ☐ Primary
- ☐ Runoff
- ☐ Other Description
- ☐ General
- ☐ Special

12 OFFICE

OFFICE HELD (if any): Midland ISD District 7

13 OFFICE SOUGHT (if known)

14 NOTICE FROM POLITICAL COMMITTEE(S)

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

- ☐ GENERAL
- ☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

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)
Joshua Guinn	

17 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)	$ 17,536.18
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	$ 0.00
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 30,364.31
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 22,893.08
OUTSTANDING LOAN TOTALS	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 office administering oath

OR

(2) Unsworn Declaration

My name is Joshua Guinn and my date of birth is [redacted].

My address is [redacted] (street) Midland (city) TX (state) 79707 (zip code) USA (country).

Executed in Midland County, State of Texas, on the 28th day of October (month), 20 24 (year).

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME	20 Filer ID (Ethics Commission Filers)
Joshua Guinn	

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$ 16,704.10
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$ 832.08
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	$ 0.00
4.	SCHEDULE E: LOANS	$ 0.00
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$ 30,364.31
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	$ 1,000.00

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

2 FILER NAME
Joshua Guinn

3 Filer ID (Ethics Commission Filers)

4 Date	**5** Full name of contributor (out-of-state PAC (ID#:_____))	**7** Amount of contribution ($)
10/04/2024	Brent Beck **6** Contributor address; City; State; Zip Code [redacted] Midland, TX 79702	4,000.00

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)

Date	Full name of contributor (out-of-state PAC (ID#:_____))	Amount of contribution ($)
10/07/2024	Stanley & Carol Smith Contributor address; City; State; Zip Code [redacted], Midland, TX 79707	500.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor (out-of-state PAC (ID#:_____))	Amount of contribution ($)
10/17/2024	Gary Wilson Contributor address; City; State; Zip Code [redacted] Odessa, TX 79765	104.10

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
CEO	TankLogix

Date	Full name of contributor (out-of-state PAC (ID#:_____))	Amount of contribution ($)
10/22/2024	TREPAC - Texas Realtors PAC Contributor address; City; State; Zip Code [redacted] Austin, TX 78768	10,000.00

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.

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	5 Full name of contributor / out-of-state PAC (ID#)	7 Amount of contribution ($)
10/22/2024	Mark Waddell Jr.	2,000.00
	6 Contributor address: [redacted] City: Ft. Worth State: TX Zip Code 76179	
8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)	

Date	Full name of contributor / out-of-state PAC (ID#)	Amount of contribution ($)
9/27/2024	AirMaster Mechanical Inc.	100.00
	Contributor address: [redacted] City: State: Zip Code	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor / out-of-state PAC (ID#)	Amount of contribution ($)
	Contributor address: City: State: Zip Code	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor / out-of-state PAC (ID#)	Amount of contribution ($)
	Contributor address: City: State: Zip Code	
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.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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 A2. 1
2 FILER NAME Joshua Guinn	**3** Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS	$

5 Date	**6** Full name of contributor ☐ out-of-state PAC ID#	**8** Amount of Contribution $	**9** In-kind contribution description
10/15/2024	Becky Young **7** Contributor address: City: State: Zip Code [redacted] Midland, TX 79707	832.08	Food and event space for meet and greet 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	Full name of contributor ☐ out-of-state PAC ID#	Amount of Contribution $	In-kind contribution description
	Contributor address: City: State: Zip Code		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)	

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.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
9	Joshua Guinn	

4 Date	5 Payee name
10/11/2024	C3 Management

6 Amount ($)	7 Payee address;	City:	State;	Zip Code
54.00	1616 S Voss Rd, Houston, TX 77057			

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Accounting/Baning	Bookkeeping and accounting service
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name
09/27/2024	Permian Basin Office Products

Amount ($)	Payee address:	City:	State;	Zip Code
78.43	208 South A Street, Midland, TX 79701			

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Advertising Expense	Palm Cards
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name
10/09/2024	C3 Management

Amount ($)	Payee address;	City;	State;	Zip Code
5,067.00	1616 S Voss Rd, Houston, TX 77057			

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Advertising Expense	Mail
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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: Joshua Guinn

3 Filer ID (Ethics Commission Filers):

4 Date: 10/15/2024

5 Payee name: C3 Management

6 Amount ($): 75.00

7 Payee address: 1616 S Voss Rd, Houston, TX 77057 City: State: Zip Code

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): Accounting/Banking

(b) Description: Bookkeeping and accounting service

(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officeholder name: Office sought: Office held:

Date: 10/07/2024

Payee name: Facebook

Amount ($): 2.00

Payee address: 1 Hacker Way, Menlo Park, California City: State: Zip Code

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): Advertising Expense

Description: Facebook Ad

Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officeholder name: Office sought: Office held:

Date: 10/07/2024

Payee name: Facebook

Amount ($): 2.00

Payee address: 1 Hacker Way, Menlo Park, California City: State: Zip Code

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): Advertising Expense

Description: Facebook Ad

Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officeholder name: Office sought: Office held:

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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)
	Joshua Guinn	

4 Date	5 Payee name
10/09/2024	C3 Management

6 Amount ($)	7 Payee address;	City:	State;	Zip Code
4,474.00	1616 S Voss Rd, Houston, TX 77057			

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Advertising Expense	Mail
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name
10/07/2024	Facebook

Amount ($)	Payee address;	City:	State;	Zip Code
2.00	1 Hacker Way, Menlo Park, California			

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Advertising Expense	Facebook Ad
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name
10/09/2024	C3 Management

Amount ($)	Payee address;	City;	State;	Zip Code
5,067.00	1616 S Voss Rd, Houston, TX 77057			

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Advertising Expense	Mail
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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)
	Joshua Guinn	

4 Date	5 Payee name
10/15/2024	C3 Management

6 Amount ($)	7 Payee address;	City:	State:	Zip Code
840.20	1616 S Voss Rd, Houston, TX 77057			

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Advertising Expense	MMS - Texting
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name
10/15/2024	C3 Management

Amount ($)	Payee address;	City:	State:	Zip Code
642.00	1616 S Voss Rd, Houston, TX 77057			

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Advertising Expense	MMS - Texting
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name
10/16/2024	C3 Management

Amount ($)	Payee address;	City:	State:	Zip Code
771.00	1616 S Voss Rd, Houston, TX 77057			

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Advertising Expense	MMS - Texting
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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)
	Joshua Guinn	

4 Date	5 Payee name
10/16/2024	Permian Basin Office Products

6 Amount (S)	7 Payee address;	City:	State:	Zip Code
151.55	208 South A Street, Midland, TX 79701			

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Advertising Expense	Palm Cards
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name
10/22/2024	C3 Management

Amount (S)	Payee address;	City:	State:	Zip Code
841.00	1616 S Voss Rd, Houston, TX 77057			

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Advertising Expense	MMS - Texting
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name
10/22/2024	C3 Management

Amount (S)	Payee address;	City:	State:	Zip Code
886.00	1616 S Voss Rd, Houston, TX 77057			

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Advertising Expense	MMS - Texting
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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)
	Joshua Guinn	

4 Date	5 Payee name
10/21/2024	Lowe's

6 Amount ($)	7 Payee address;	City:	State:	Zip Code
52.41	3315 North Loop 250 W, Midland, TX 79707			

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Advertising Expense	Sandbags for signs
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name
09/30/2024	Green Tree Country Club

Amount ($)	Payee address;	City:	State:	Zip Code
1,260.90	4900 Green Tree Blvd, Midland, TX 79707			

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Event Expense	Event Space
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name
10/17/2024	WinRed

Amount ($)	Payee address;	City:	State:	Zip Code
4.10	1776 Wilson Blvd., Suite 530, Arlington, VA 22219			

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Fee	WinRed service fee
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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)
	Josh Guinn	

4 Date	5 Payee name
10/24/2024	CDA Broadcasting

6 Amount (S)	7 Payee address; City; State; Zip Code
1,234.80	1611 College Ave Midland, TX, 79701

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Advertising Expense	Radio Ad
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name
10/24/2024	CDA Broadcasting

Amount (S)	Payee address; City; State; Zip Code
969.00	1611 College Ave Midland, TX, 79701

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Advertising Expense	Radio Ad
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name
10/24/2024	C3 Management

Amount (S)	Payee address; City; State; Zip Code
646.00	1616 S Voss Rd., Houston, TX 77057

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Advertising Expense	MMS - Texting
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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)
	Joshua Guinn	

4 Date	5 Payee name
09/27/2024	Cauble Sportswear

6 Amount ($)	7 Payee address;	City:	State:	Zip Code
700.92	3209 Commercial Dr., Midland, TX 79701			

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)	(b) Description
Advertising Expense	T-Shirts

(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name | Office sought | Office held

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Date	Payee name
10/09/2024	C3 Management

Amount ($)	Payee address;	City:	State:	Zip Code
4,474.00	1616 S Voss Rd, Houston, TX 77057			

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)	Description
Advertising Expense	Mail

Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name | Office sought | Office held

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Date	Payee name
10/25/2024	CDA Broadcasting

Amount ($)	Payee address;	City:	State:	Zip Code
969.00	1611 College Ave Midland, TX, 79701			

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)	Description
Advertsing Expensee	Radio Ad

Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name | Office sought | Office held

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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)
	Joshua Guinn	

4 Date	5 Payee name
10/15/2024	Lightning Oilfield Services, Inc

6 Amount ($)	7 Payee address;	City;	State;	Zip Code
1,000.00	PO Box 203 Haslet, TX 76052			

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Reimbursement	Refund of contribution
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name
10/25/2024	AirMaster Mechanical Inc.

Amount ($)	Payee address;	City;	State;	Zip Code
100.00	4202 N County Road 1250			

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Reimbursement	Refund of contribution
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name

Amount ($)	Payee address;	City;	State;	Zip Code

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED