

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1. Prior ID (from Commission File)

2. Total pages: 7

3. CANDIDATE / OFFICEHOLDER NAME	Mr. Sean Douglas	OFFICE USE ONLY
4. CANDIDATE / OFFICEHOLDER MAILING ADDRESS	211 E JOHNSON ST CUERO TX 77954	Date Received
5. CANDIDATE / OFFICEHOLDER PHONE	[REDACTED]	Date Hand-Delivered or Date Postmarked
6. CAMPAIGN TREASURER NAME	Ms. Selena Condie	Receipt #
7. CAMPAIGN TREASURER ADDRESS	15595 GRAPE MYRTLE FRISCO TX 75035	Amount
8. CAMPAIGN TREASURER PHONE	[REDACTED]	Date Processed
9. REPORT TYPE	☐ January 15 ☐ 30th day before election ☐ Report ☐ 12th day after campaign treasurer appointment (Donor-Only)	Date Signed
10. PERIOD COVERED	Month: 3 / Day: 25 / Year: 25 THROUGH Month: 4 / Day: 23 / Year: 25	
11. ELECTION	ELECTION DATE: 5 / 3 / 25 ELECTION TYPE: ☐ Primary ☐ General ☐ Special	
12. OFFICE	OFFICE HELD (if any): N/A	13. OFFICE SOUGHT (if any): CUERO ISD BOARD OF TRUSTEES, DIST 1
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: ☐ GENERAL ☐ SPECIFIC COMMITTEE NAME: _____ COMMITTEE ADDRESS: _____ COMMITTEE CAMPAIGN TREASURER NAME: _____ COMMITTEE CAMPAIGN TREASURER ADDRESS: _____	

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

16. C/OH NAME SEAN P DOUGLAS		16. FIRM ID (Election Commission File)
17. CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 300.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 550.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE	\$ 529.91
	4. TOTAL POLITICAL EXPENDITURES	\$ 781.91
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ -231.91
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.

Seán Douglas
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ this the _____ day of _____, 20____, to certify which, witness my hand and seal of office.

Signature of officer administering oath _____ Printed name of officer administering oath _____ Title of officer administering oath _____

OR

(2) Unsworn Declaration

My name is Seán Douglas and my date of birth is 9/24/90
My address is 210 East Johnson St Cuero TX 77954 US
(street) (city) (state) (zip code) (country)
Executed in Dewitt County, State of Texas on the 23 day of April, 2025
(month) (year)

Seán Douglas
Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME SEAN P DOUGLAS		20 Filer ID (Ethics Commission File #)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1	☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 300.00
2	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3	SCHEDULE D: PLEDGED CONTRIBUTIONS	\$
4	SCHEDULE E: LOANS	\$
6	☒ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 500.00
5	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9	☒ SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 29.91
10	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12	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)

1

2 FILER NAME

SEAN P DOUGLAS

3 Filer ID (Ethics Commission Filer)

4 Date

03/11/2025

5 Full name of contributor
KATRINA BOWEN

out-of-state PAC (see instructions)

7 Amount of contribution (\$)

100.00

6 Contributor address

City

State

Zip Code

1209 Twelfth Street Palacios TX 77465

8 Principal occupation / Job title (See instructions)

EDUCATOR

9 Employer (See instructions)

Date

04/23/2025

Full name of contributor

BJ DREHR

out-of-state PAC (see instructions)

Amount of contribution (\$)

100.00

Contributor address

City

State

Zip Code

119 NORTHWOOD DRIVE CUERO TX 77954 5007

Principal occupation / Job title (See instructions)

ENGINEER

Employer (See instructions)

SELF

Date

04/23/2025

Full name of contributor

GREG GOSSETT

out-of-state PAC (see instructions)

Amount of contribution (\$)

100.00

Contributor address

City

State

Zip Code

Principal occupation / Job title (See instructions)

Co-Op Farm Supply President

Employer (See instructions)

FULL-O-PEP

Date

Full name of contributor

out-of-state PAC (see instructions)

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.

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 Expenses
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Child Care Payment

Event Expense
Food
Food/Beverage Expense
Out/Venue/Production Expense
Legal Expense

Lost Receipt/Refund/Reimbursement
Office Overhead/Personal Expense
Printing Expense
Travel Expense
Unrelated/Unrelated Common Labor

Political Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Conferences/Workshops/Retreats/Meetings

The instruction guide explains how to complete this form.

1 Total pages Schedule F1: 1 2 FILER NAME: SEAN P. DOUGLAS 3 Filer ID (Ethics Commission File):

4 Date: 04/28/2025 5 Payee name: SCOTT GOODALE

6 Amount (\$): 500.00 7 Payee address: 4611 E Airline Rd Ste 200 Victoria, TX 77904 City: State: Zip Code:

8 PURPOSE OF EXPENDITURE: (a) Category (See Categories listed at the top of this schedule): ADVERTISING EXPENSE (b) Description: SOCIAL MEDIA CONTRACTOR

9 Complete ONLY if direct expenditure to benefit C/O: 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:

Complete ONLY if direct expenditure to benefit C/O: 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:

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

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 Expenses
Accounting/Banking
Consulting Expenses
Contributions/Outreach Made By
Candidate/Committee/Political Committee
Check Card Payment

Event Expenses
Fees
Food/Beverage Expenses
Gifts/Presents/Memorabilia Expenses
Legal Services

Lease/Ownership/Transportation
Office/Guest and Rental Expenses
Printing Expenses
Posting Expenses
Services/Volunteer Contract Labor

Stationery/Printing/Supplies
Transportation/Equipment & Related Expenses
Travel In District
Travel Out Of District
Other (Specify category not listed above)

The instruction Guide explains how to complete this form.

1. Total pages Schedule G: 1		2. FILER NAME SEAN P DOUGLAS		3. Filer ID (Ethics Commission Use)	
4. Date 02/28/2025		5. Payee name GOOGLE			
6. Amount (\$) 12.00 Reimbursement from political contributions permitted		7. Payee address: ONLINE City: _____ State: _____ Zip Code: _____			
8. PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) ADVERTISING EXP.		(b) Description DOMAIN REGISTRATION	
		(c) Check if Bank account if Bank, Complete Schedule H		Check if Activity, TX, with/without filing expense	
Complete ONLY if direct expenditure to benefit C/D/H		Candidate / Officeholder name		Office sought	
Date 03/31/2025		Payee name GOOGLE WORKSPACE			
Amount (\$) 17.91 Reimbursement from political contributions permitted		Payee address: ONLINE City: _____ State: _____ Zip Code: _____			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) ADVERTISING EXP		Description GOOGLE WORKSPACE	
		Check if Bank account if Bank, Complete Schedule H		Check if Activity, TX, with/without filing expense	
Complete ONLY if direct expenditure to benefit C/D/H		Candidate / Officeholder name		Office sought	
Date		Payee name			
Amount (\$) Reimbursement from political contributions permitted		Payee address: City: _____ State: _____ Zip Code: _____			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description	
		Check if Bank account if Bank, Complete Schedule H		Check if Activity, TX, with/without filing expense	
Complete ONLY if direct expenditure to benefit C/D/H		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



AFFIDAVIT FOR CANDIDATE OR OFFICEHOLDER: ELECTRONIC FILING EXEMPTION

An exemption affidavit must be submitted with each paper report.

Beginning on January 1, 2025, a candidate or officeholder who has accepted more than \$33,910 in political contributions or made more than \$33,910 in political expenditures in any calendar year must file all subsequent reports electronically.

Filer Name <u>Sean P. Douglas</u>	Filer ID #
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OFFICE USE ONLY	
Date Received	
Date Received at State Capitol	
Page #	Amount
Date Forwarded	
Date Indexed	

- I swear or affirm that I have not accepted more than \$33,910 in political contributions or made more than \$33,910 in political expenditures in a calendar year.
- I further swear or affirm that I do not use computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- I further swear or affirm that no person acting as my agent or consultant, and no person with whom I contract, uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- I further swear or affirm that I understand that I am required to file my campaign finance reports electronically if I, my agent or consultant, or a person with whom I contract exceeds \$33,910 in political contributions or political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- I am filing this affidavit with the C/OH report due on 04/25/2025. I understand that this affidavit is required to be filed with each campaign finance report for which I am claiming an exemption from electronic filing.

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

Signature of Filer

Sworn to and subscribed before me by _____ this 20 day of _____, 2025, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Sean Douglas and my date of birth is 9/24/90
My address is 211 E Johnson St Carroll TX 77954 US
(street) (city) (state) (zip code) (country)
Employed in Dewitt County, State of Texas, on the 23 day of April, 2025
(month) (year)

Signature of Filer (Declarant)

**FILERS WHO ARE EXEMPT FROM THE ELECTRONIC FILING REQUIREMENT
ARE STILL REQUIRED TO FILE CAMPAIGN FINANCE REPORTS ON PAPER**