

# 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:

|                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                      |                             |                                                                |                 |
|-----------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|-----------------------------|----------------------------------------------------------------|-----------------|
| 3 CANDIDATE /<br>OFFICEHOLDER<br>NAME               | MS / MRS / MR                                                                                                                                                                                                                                                                                                                                                                                                                        | FIRST                                | MI                          | <b>OFFICE USE ONLY</b>                                         |                 |
|                                                     | Mr.                                                                                                                                                                                                                                                                                                                                                                                                                                  | Joe                                  | D                           |                                                                |                 |
|                                                     | NICKNAME                                                                                                                                                                                                                                                                                                                                                                                                                             | LAST                                 | SUFFIX                      | Date Received<br><br>January 8, 2025<br>Email at 4:42 pm<br>BR |                 |
|                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                      | Tolbert                              |                             |                                                                |                 |
| 4 CANDIDATE /<br>OFFICEHOLDER<br>MAILING<br>ADDRESS | ADDRESS / PO BOX;                                                                                                                                                                                                                                                                                                                                                                                                                    | APT / SUITE #;                       | CITY;                       | STATE;                                                         | ZIP CODE        |
| Change of Address                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                      |                             |                                                                |                 |
| 5 CANDIDATE/<br>OFFICEHOLDER<br>PHONE               | AREA CODE                                                                                                                                                                                                                                                                                                                                                                                                                            | PHONE NUMBER                         | EXTENSION                   |                                                                |                 |
|                                                     | (                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                      |                             |                                                                |                 |
| 6 CAMPAIGN<br>TREASURER<br>NAME                     | MS / MRS / MR                                                                                                                                                                                                                                                                                                                                                                                                                        | FIRST                                | MI                          | Receipt # Amount \$                                            |                 |
|                                                     | Mr.                                                                                                                                                                                                                                                                                                                                                                                                                                  | Joe                                  | D                           | Date Processed                                                 |                 |
|                                                     | NICKNAME                                                                                                                                                                                                                                                                                                                                                                                                                             | LAST                                 | SUFFIX                      | Date Imaged                                                    |                 |
|                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                      | Tolbert                              |                             |                                                                |                 |
| 7 CAMPAIGN<br>TREASURER<br>ADDRESS                  | STREET ADDRESS (NO PO BOX PLEASE);                                                                                                                                                                                                                                                                                                                                                                                                   |                                      | APT / SUITE #;              | CITY;                                                          | STATE; ZIP CODE |
| (Residence or Business)                             |                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                      |                             |                                                                |                 |
| 8 CAMPAIGN<br>TREASURER<br>PHONE                    | AREA CODE                                                                                                                                                                                                                                                                                                                                                                                                                            | PHONE NUMBER                         | EXTENSION                   |                                                                |                 |
|                                                     | (                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                      |                             |                                                                |                 |
| 9 REPORT TYPE                                       | <input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)<br><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) |                                      |                             |                                                                |                 |
| 10 PERIOD COVERED                                   | Month Day Year                                                                                                                                                                                                                                                                                                                                                                                                                       |                                      | Month Day Year              |                                                                |                 |
|                                                     | 7 / 1 / 24                                                                                                                                                                                                                                                                                                                                                                                                                           |                                      | THROUGH 12 / 31 / 24        |                                                                |                 |
| 11 ELECTION                                         | ELECTION DATE                                                                                                                                                                                                                                                                                                                                                                                                                        |                                      | ELECTION TYPE               |                                                                |                 |
|                                                     | Month Day Year                                                                                                                                                                                                                                                                                                                                                                                                                       | Primary                              | Runoff                      | Other Description                                              |                 |
|                                                     | / /                                                                                                                                                                                                                                                                                                                                                                                                                                  | General                              | Special                     |                                                                |                 |
| 12 OFFICE                                           | OFFICE HELD (if any)                                                                                                                                                                                                                                                                                                                                                                                                                 |                                      | 13 OFFICE SOUGHT (if known) |                                                                |                 |
|                                                     | BISD, Place 1                                                                                                                                                                                                                                                                                                                                                                                                                        |                                      |                             |                                                                |                 |
| 14 NOTICE FROM<br>POLITICAL<br>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.                                              |                                      |                             |                                                                |                 |
| Additional Pages                                    | COMMITTEE TYPE                                                                                                                                                                                                                                                                                                                                                                                                                       | COMMITTEE NAME                       |                             |                                                                |                 |
|                                                     | GENERAL                                                                                                                                                                                                                                                                                                                                                                                                                              | COMMITTEE ADDRESS                    |                             |                                                                |                 |
|                                                     | SPECIFIC                                                                                                                                                                                                                                                                                                                                                                                                                             | 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**

Joe D. Tolbert

**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)

\$ 0.00

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

\$ 0.00

**EXPENDITURE  
TOTALS**

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

\$ 0.00

**CONTRIBUTION  
BALANCE**

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

\$ 375.00

**OUTSTANDING  
LOAN TOTALS**

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

\$ 1,023.73

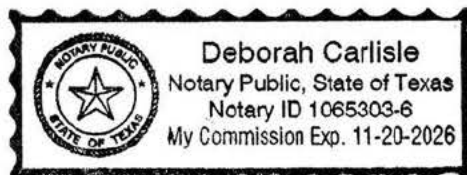
**18 SIGNATURE**

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.

*Joe D. Tolbert*  
Signature of Candidate or Officeholder

**Please complete either option below:**

**(1) Affidavit**



NOTARY STAMP/SEAL

Sworn to and subscribed before me by Joe D. Tolbert this the 8<sup>th</sup> day of January

20 25, to certify which, witness my hand and seal of office.

*Deborah Carlisle*

Deborah Carlisle

Notary

Signature of officer administering oath

Printed name of officer administering oath

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\_\_\_\_.  
(month) (year)

Signature of Candidate/Officeholder (Declarant)