

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: 7	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Jason		OFFICE USE ONLY Date Received		
	NICKNAME LAST SUFFIX Thomas				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE P.O. BOX 61 MANSFIELD, TX 76063		Date Hand-delivered or Date Postmarked		
			Receipt #		Amount
			Date Processed		
			Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms Jill				
	NICKNAME LAST SUFFIX McGrew				
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 6413 Friar Court Forest Hill, TX 76119				
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	817	919-7481			
8 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)				
9 PERIOD COVERED	Month Day Year 04/24/2025		THROUGH Month Day Year 06/30/2025		
10 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE		
			☐ Primary ☐ Runoff ☐ Other ☐ General ☐ Special		
11 OFFICE	OFFICE HELD (if any) Mansfield ISD School Board Trustee, Place 3		12 OFFICE SOUGHT (if known)		

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME	Thomas, Jason	14 Filer ID
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15 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. <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.	
	COMMITTEE TYPE	COMMITTEE NAME
	☐ GENERAL	COMMITTEE ADDRESS
	☐ SPECIFIC	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)	\$ 169.46
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,884.77
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 375.43
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFIDAVIT		
10/15/2028 135131444	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 <u>Jason Lynard Thomas</u> , this the <u>14th</u> day of <u>July</u> , 20 <u>25</u> , to certify which, witness my hand and seal of office.		
	Jade Collins	Notary Public, State of Texas
Signature of officer administering	Printed name of officer administering	Title of officer administering oath
Electronically signed and notarized online using the Proof platform.		

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

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18 FILER NAME Thomas, Jason		19 Filer ID	
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	169.46
2.	☐ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	☐ SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	☐ SCHEDULE E: LOANS	\$	
5.	☒ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	1,884.77
6.	☐ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	☐ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	☐ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	☐ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10.	☐ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	☐ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	☐ 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: 1/1 Rpt: 4/7
2 FILER NAME Thomas, Jason		3 Filer ID
4 Date 05/09/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Levern, Staples	7 Amount of Contribution (\$) \$104.48
	6 Contributor address; City; State; Zip Code [REDACTED] Inglewood, CA 90301	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 05/16/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Pharmacy, Kroger	Amount of Contribution (\$) \$64.98
	Contributor address; City; State; Zip Code 3300 E Broad St Mansfield, TX 76063	
Principal occupation / Job title (See Instructions) Refund		Employer (See Instructions) Kroger

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: 1/3 Rpt: 5/7	2 FILER NAME Thomas, Jason	3 Filer ID
4 Date 04/25/2025	5 Payee name ACADEMY SPORTS 5114656567 0 5941 %% Card 18	
6 Amount (\$) \$47.61	7 Payee address; City; State; Zip Code 1711 E Broad St Mansfield, TX 76063	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense CAMPAIGN EQUIPMENT FOR POLL GREETING
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/09/2025	Payee name ANEDOT INC	
Amount (\$) \$4.48	Payee address; City; State; Zip Code 1201 W Peachtree St NW Ste 2625 PMB 43460 Atlanta, GA 30309-3499	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense ANEDOT FEES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/21/2025	Payee name NOW MAGAZINES LLC	
Amount (\$) \$605.00	Payee address; City; State; Zip Code 327 N Grand Ave Waxahachie, TX 75165	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense MARKETING
Complete <u>ONLY</u> 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: 2/3 Rpt: 6/7	2 FILER NAME Thomas, Jason	3 Filer ID
4 Date 05/02/2025	5 Payee name JUMBO PROPERTY MANAGEMENT	
6 Amount (\$) \$350.00	7 Payee address; City; State; Zip Code 9700 Apex Fort Worth, TX 76108	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense LARGE SIGN INSTALL/REMOVAL
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/16/2025	Payee name KROGER PHARMACY	
Amount (\$) \$64.98	Payee address; City; State; Zip Code 3300 E Broad St Mansfield, TX 76063	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) SWIPE ERROR REFUNDED IN CONTRIB	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense ACCIDENTAL CHARGE CREDIT BACK ON ACCOUNT TO FOLLOW
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/19/2025	Payee name SIGNUP GENIUS	
Amount (\$) \$11.99	Payee address; City; State; Zip Code 1213 W Morehead St Ste 500 Charlotte, NC 28277	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense MARKETING
Complete <u>ONLY</u> 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: 3/3 Rpt: 7/7	2 FILER NAME Thomas, Jason	3 Filer ID
4 Date 05/18/2025	5 Payee name THE VAULT	
6 Amount (\$) \$312.88	7 Payee address; City; State; Zip Code 2300 Matlock Rd #4 Mansfield, TX 76063	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense EVENT
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/19/2025	Payee name AMM POLITICAL	
Amount (\$) \$487.83	Payee address; City; State; Zip Code 507 N Sylvania Ave Fort Worth, TX 76111	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense TEXTING SERVICE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held