# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

#### FORM C/OH COVER SHEET PG 1

The C/OH Instruction C	Guide explains how	to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 5		
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST JEFFREY	MI J	OFFICE USE ONLY		
NAME	NICKNAME JEFF	LARGE	SUFFIX JR.	Guadalupe Co Elections		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX:		CITY: STATE: ZIP CODE 78108	JAN 1 7 2025 AMP Received		
Change of Address		Marie Park				
5 CANDIDATE/ OFFICEHOLDER PHONE	(210 )	867-1040	EXTENSION	Date Hand-delivered or Date Postmarked  Receipt #   Amount \$		
6 CAMPAIGN TREASURER	MS / MRS / MR	FIRST KURT	мі Е			
NAME				Date Processed		
	NICKNAME	HOUSLEY	SUFFIX	Date Imaged		
7 CAMPAIGN	STREET ADDRESS (	NO PO BOX PLEASE); APT / S	SUITE #; CITY;	STATE; ZIP CODE		
TREASURER ADDRESS	321 E. LANG	SLEY BLVD	UNIVERSAL C	TITY TX 78148		
(Residence or Business)						
8 CAMPAIGN TREASURER	AREA CODE PHONE NUMBER EXTENSION					
PHONE	(210) 215-3281					
9 REPORT TYPE	January 15 30th day before election Runoff 15th day after campaign treasurer appointment (Officeholder Only)					
	July 15	8th day before ele	ection Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)		
10 PERIOD	Month	Day Year	Month	Day Year		
COVERED	7	/ 1 / 24	THROUGH 12	31 / 24		
11 ELECTION	ELECTION DA	TE	ELECTION TYPE			
	Month Day	Year Primary	Runoff Other			
		1000000	Description			
	11 / 5	24 General	Special			
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if know	n)		
	GUADALUPE COUNTY CONSTABLE, PCT.3 GUADALUPE COUNTY CONSTABLE, PCT.3					
14 NOTICE FROM POLITICAL	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(S)	COMMITTEE TYPE	COMMITTEE NAME				
		COMMITTEE ADDRESS				
Additional Pages	GENERAL					
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TR	REASURER ADDRESS			
GO TO PAGE 2						

### CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

#### FORM C/OH COVER SHEET PG 2

	5 A 5 A 5 A 5 A 5 A 5 A 5 A 5 A 5 A 5 A		
15 C/OH NAME Jeffrey J Large Jr.		16 Filer ID (Et	hics Commission Filers)
17 CONTRIBUTION TOTALS	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 OF REPORTING PERIOD	T DAY \$	4,051.72
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	THE \$	0.00
	swear, or affirm, under penalty of perjury, that the accompanying report is true quired to be reported by me under Title 15, Election Code.	and correct ar	nd includes all information
	A II I I I	,	
	Gelfelfe	ndidate or Office	no holder
	Signatura bircan	ididate of Office	Seriolder
	Please complete either option below		
(1) Affidavit	MEGAN NAVA NOTARY PUBLIC STATE OF TEXAS MY COMM. EXP. 08/31/27		
NOTARY STAMP	NOTARY ID 128496046		
Sworn to and subscribe	d before me by JEHRY JUGG JV. this the _	day	of January.
Meophill	which, witness my hand and seal of office.	CU	ust clerk
Signature of officer adminis	tering oath Printed name of officer administering oath  OR	Title o	of officer administering oath
(2) Unsworn Declara			
My name is	, and my date of birth is		
My name is			
	(street) (city) (st	tate) (zip co	de) (country)
Executed in	County, State of, on the day of(month)	, 20	(year)
	Signature of Candida	ate/Officeholde	r (Declarant)

### SUBTOTALS - C/OH

#### FORM C/OH COVER SHEET PG 3

	FILER NAME effrey J Large J	lr.	20 Filer ID (Ethics Co	mmission	Filers)
	SCHEDULE SUBTONAME OF SCHEDU	PTALS		10	JBTOTAL MOUNT
1.	SCHEDU	LEA1: MONETARY POLITICAL CONTRIBUTIONS		\$	
2.	SCHEDU	LE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS			
3.	SCHEDU	LE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDU	LE E: LOANS		\$	
5.	SCHEDU	LE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$	
6.	SCHEDU	LE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDU	LE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	CONTRIBUTIONS	\$	
8.	SCHEDU	JLE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	■ SCHEDU	DULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS			312.00
10.	SCHEDU	CHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH			
11.	SCHEDU	LEI: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$	
12.	SCHEDU	JLE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT TO FILER	TONS RETURNED	\$	

## 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 Candidate/Officeholder/Politi Credit Card Payment	By Gift Leg	es od/Beverage Expense t/Awards/Memorials Expense	Office Ove Polling Ex Printing E Salaries/V	xpense Vages/Contract Labor	Solicitation/Fundrais Transportation Equip Travel In District Travel Out Of Distric Other (enter a catego	ment & Related Expense
1 Total pages Schedule G:	2 FILER NAME				3 Filer ID (Ethics	Commission Filers)
4	Jeffrey J l	Large Jr.				
4 Date 07/20/2024	5 Payee name Data Ecol	logy LLC				
6 Amount (\$) 52.00  Reimbursement from political contributions intended	Payee address PO Box 1	s; 18 Still River, MA 01	467	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Website	Categories listed at the top of this sche	(b) Description Website Hosting			
	(c) Check	if travel outside of Texas. Complete Sched	dule T.	Check if Austin,	TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH		/ Officeholder name		Office sought		Office held
Date	Payee name					
08/20/2024	Data Ecol	logy LLC				
Amount (\$) 52.00  Reimbursement from  political contributions intended	Payee address PO Box 1	s; 18 Still River, MA 01	467	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Website	e Categories listed at the top of this sch	edule)	Description Website Hostin	ng	
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				expense	
Complete ONLY if direct expenditure to benefit C/	4	/ Officeholder name		Office sought	ce sought Office held	
Date 09/20/2024	Payee name Data Ecol	logy LLC				
Amount (\$) 52.00  Reimbursement from political contributions intended	Payee addres PO Box 1	ns; 18 Still River, MA 01	467	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Website	e Categories listed at the top of this scho	edule)	Description Website Hostin	ng	
	Check	k if travel outside of Texas. Complete Scheo	dule T.	Check if Austin,	, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	0.00.0000	/ 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 CATEGOR	RIES FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Politic	Fees   Of	ean Repayment/Reimbursement ffice Overhead/Rental Expense olling Expense inting Expense alaries/Wages/Contract Labor ow to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule G	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4	Jeffrey J Large Jr.		
4 Date 10/20/2024	5 Payee name Data Ecology LLC		
6 Amount (\$) 52.00  Reimbursement from political contributions intended	7 Payee address; PO Box 118 Still River, MA 014	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Website	(b) Description Website Hostin	ng
	(c) Check if travel outside of Texas. Complete Schedule	e T. Check if Austin,	TX, officeholder living expense
Omplete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
11/20/2024	Data Ecology LLC		
Amount (\$) 52.00  Reimbursement from political contributions intended	Payee address; PO Box 118 Still River, MA 014	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sched Website	Website Hostin	ng
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/	Candidate / Officeholder name	Office sought	Office held
Date 12/20/2024	Payee name Data Ecology LLC		
Amount (\$) 52.00  Reimbursement from   → political contributions intended	Payee address; PO Box 118 Still River, MA 014	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sched Website	Description Website Hostil	ng
	Check if travel outside of Texas. Complete Schedul	e 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		