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 / OFFICEHOLDER NAME		MS / MRS / MR MR	FIRST JEFFREY	MI J		OFFICE USE ONLY	
	NAME	NICKNAME JEFF	LAST LARGE		SUFFIX JR.	Guadalupe Co Elections	
4	CANDIDATE / OFFICEHOLDER MAILING	ADDRESS / PO BOX;		BOLO TX	ZIP CODE 78108	JUL 15 2025	
	ADDRESS Change of Address					Received AMP	
5	CANDIDATE/	AREA CODE	PHONE NUMBER	EXTENSI	ON	Date Hand-delivered or Date Postmarked	
	OFFICEHOLDER PHONE	(210)	867-1040				
6	CAMPAIGN	MS / MRS / MR	FIRST		MI	Receipt # Amount \$	
	TREASURER NAME	MR	KURT		E	Date Processed	
	17 1111	NICKNAME	LAST		SUFFIX	Date Imaged	
			HOUSLEY			Date Imaged	
7	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT / SU	JITE #; CITY,		STATE; ZIP CODE	
TREASURER ADDRESS 321 E. LANGLEY			GLEY BLVD	UNIV	ERSAL C	ITY TX 78148	
8	Residence or Business) CAMPAIGN AREA CODE PHONE NUMBER EXTENSION						
	TREASURER PHONE	(210)	215-3281				
9	REPORT TYPE	January 15	30th day before e	lection Run	off	15th day after campaign treasurer appointment (Officeholder Only)	
		July 15	8th day before ele	CLIOIT	eeded Modified orting Limit	Final Report (Attach C/OH - FR)	
10	PERIOD	Month	Day Year		Month	Day Year	
	COVERED	1 / 1 / 25 THROUGH 6 / 30 / 25					
11 ELECTION ELECTION DATE ELECTION TYPE							
		Month Day	Year Primary	Runoff	Other Description		
		3 /	Z8 General	Special			
12	OFFICE	OFFICE HELD (if any)		13 OFFICE S	OUGHT (if known)	
		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				
	Additional Pages	GENERAL	COMMITTEE ADDRESS				
		SPECIFIC	COMMITTEE CAMPAIGN TRE	ASURER NAME		-	
			COMMITTEE CAMPAIGN TRE	EASURER ADDRESS			
	GO TO PAGE 2						

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Jeffrey J Large Jr.	16 Filer ID (Ethics Commission Filers)					
17 CONTRIBUTION TOTALS	 TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAI PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) 	s 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	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LA OF REPORTING PERIOD	\$ 4,052.73				
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS C LAST DAY OF THE REPORTING PERIOD	\$ 0.00				
	wear, or affirm, under penalty of perjury, that the accompanying report is truluired to be reported by me under Title 15, Election Code.	ue and correct and includes all information				
	11/11					
	System of C.	andidate or Officeholder				
	Please complete either option below	w:				
(1) Affidavit						
NOTARY STAMP/SEA		den let				
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 administe		Title of officer administering oath				
(2) Unsworn Declaration						
My name is JEFFIL	EY LARGE, and my date of birth is	s 5/20/87				
My address is 110 SWEETIGHT LN CIBOLO TX 78108 USA						
		(state) (zip code) (country)				
Executed in GCHOACO	County, State of TEXIS, on the 15 day of 1000	th), 20 <u>75</u> . (year)				
	Signature of Carid	lidate/Officeholder (Declarant)				

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER Jeffrey	NAME J Large Jr.	20 Filer ID (Ethics Co	mmission Fi	lers)	
	SCHEDULE SUBTOTALS NAME OF SCHEDULE				
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$		
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS				
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS			\$	
4.	SCHEDULE E: LOANS				
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS				
6.	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			457.06	
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH				
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	ONTRIBUTIONS	\$		
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER				

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 By Event Expense Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Transportation Equipment & Related Expense Travel In District

Travel Out Of District

Solicitation/Fundraising Expense

Candidate/Officeholder/Polit Credit Card Payment	Cal Committee Legal Services Salaries The Instruction Guide explains how to	/Wages/Contract Labor complete this form.	Other (enter a catego	ry not listed above)	
1 Total pages Schedule G:	2 FILER NAME Jeffrey J Large Jr.	e Jr. 3 Filer ID (Ethics Commis			
4 Date 01/20/2025	Data Ecology LLC				
6 Amount (\$) 52.00 Reimbursement from political contributions intended	Payee address: PO Box 118 Still River, MA 01467	City;	State;	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Website	(b) Description Website Hosting	g		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin,	xpense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held	
Date 02/20/2025	Payee name Data Ecology LLC				
Amount (\$) 52.00 Reimbursement from political contributions intended	Payee address: PO Box 118 Still River, MA 01467	City;	State;	Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Website	Website Hosting	g		
	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 OH	Office sought		Office held	
Date 03/20/2025	Payee name Data Ecology LLC				
Amount (\$) 52.00 Reimbursement from political contributions intended	Payee address: PO Box 118 Still River, MA 01467	City;	State;	Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Website	Website Hostin	g		
	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 S	SCHEDULE AS NEEDE	D		

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/Openations Made By
Candidate/Openations/Openations/Openations/Openations/Openations/Openations/Openations/Openations/Openations/Openations/Openations

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Printing Expense T
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)

Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 3 Jeffrey J Large Jr. 4 Date 5 Payee name 04/20/2025 Data Ecology LLC 6 Amount (\$) 7 Payee address; City: State Zip Code 52.00 PO Box 118 Still River, MA 01467 Reimbursement from political contributions intended (b) Description 8 (a) Category (See Categories listed at the top of this schedule) PURPOSE Website Hosting Website OF **EXPENDITURE** (c) Check if travel outside of Texas, Complete Schedule T Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Payee name Date Data Ecology LLC 05/20/2025 Payee address; Amount (\$) City: State: Zip Code 52.00 PO Box 118 Still River, MA 01467 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description **PURPOSE** Website Hosting Website OF **EXPENDITURE** Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Payee name Date Data Ecology LLC 06/20/2025 Payee address; Amount (\$) City; State: Zip Code 52.00 PO Box 118 Still River, MA 01467 Reimbursement from political contributions intended Description Category (See Categories listed at the top of this schedule) **PURPOSE** Website Website Hosting OF **EXPENDITURE** Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

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 By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Out of territor a caregory	not noted above)		
1 Total pages Schedule G: 3	2 FILER NAME Jeffrey J Large Jr.	3 Filer ID (Ethics Commission Filers)				
4 Date	5 Payee name					
06/18/2025	Hostgator					
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code		
24.94 Reimbursement from political contributions intended	ntributions					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Website	(b) Description Website Hosting				
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin,	ustin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held		
Date	Payee name					
03/23/2025	Namecheap Inc.					
Amount (\$)	Payee address;	City;	State;	Zip Code		
120.12 Reimbursement from political contributions intended	4600 East Washington Street Suite	e 305 Phoenix, A	Z 85034			
	Category (See Categories listed at the top of this schedule)	Description				
PURPOSE OF EXPENDITURE	Website	Website Hostin	ig			
	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	Payee name	3				
Amount (\$)	Payee address;	City;	State;	Zip Code		
Reimbursement from political contributions intended						
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description				
	Check if travel outside of Texas. Complete Schedule T.	edule 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 S	SCHEDULE AS NEED!	ED			