CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	Guide explains how to	o complete this form.	1 Filer ID (Ethics C	Commission Filers)	2 Total pages filed: 2	
3 CANDIDATE / OFFICEHOLDER NAME	Ms/MRs/MR Mr.	FIRST John		мі Т	OFFICE USE ONLY	
	NICKNAME Tom	LAST Berry		SUFFIX	Date Received LECTIONS AUMILIA	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	3607 FM 842	APT / SUITE #;	CITY; STATE;	75901	ANGELLY S	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (936)	PHONE NUMBER 240-3406	EXTENS	ION	Date Hand-delivered UNTA Postmarked	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs. NICKNAME Jill	FIRST Perri LAST Berry		мі J. suffix	Date Processed SEP 0 8 2025 Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (N	The Telephone Processor Supplemental States	SUITE #; CITY	75901	STATE; ZIP CODE	
8 CAMPAIGN TREASURER PHONE	(936)	PHONE NUMBER 676-0595	EXTENS	ION		
9 REPORT TYPE	January 15 July 15	30th day before	election Ex	noff ceeded Modified porting Limit	15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month 1	Day Year / 16 / 25	THROUGH	Month 7	Day Year / 15 / 25	
11 ELECTION	ELECTION DAT	Year Primary Genera	27 SYLORGONIA	Other Description		
12 OFFICE	OFFICE HELD (if any)	4		SOUGHT. (if know)		
14 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. 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	COMMITTEE NAME			2492	
	GENERAL COMMITTEE ADDRESS					
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN T	REASURER ADDRESS			
		GO TO	PAGE 2			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Tom Berry	16 Filer ID (Ethics Commission Filers)					
17 CONTRIBUTION 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 00					
TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ O					
EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$					
4. TOTAL POLITICAL EXPENDITURES	\$					
CONTRIBUTION BALANCE 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	* 354.21					
OUTSTANDING 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LOAN TOTALS LAST DAY OF THE REPORTING PERIOD	THE \$ 3700.00					
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 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 OR	S. B. Charles and D. Karan					
(2) Unsworn Declaration						
My name is, and my date of birth is	12/20/1958					
My address is 3607 FM 842 Lufkin TX	(, <u>75901</u> , <u>USA</u>					
Executed in Angelina County, State of Texas , on the 15th day of July (month	tate) (zip code) (country) , 20 25 (year) ate/Officeholder (Declarant)					