

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 <input checked="" type="checkbox"/> MR	FIRST <i>Michael</i>	MI <i>R</i>
	NICKNAME <i>Mike</i>	LAST <i>Hale</i>	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;	APT / SUITE #;	CITY; STATE; ZIP CODE
	<i>PO Box 732, Alledo, TX 76018</i>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	<i>(817) 637-2215</i>		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <input checked="" type="checkbox"/> MR	FIRST <i>Randall</i>	MI <i>Es</i>
	NICKNAME <i>Cupp</i>	LAST	SUFFIX
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #; CITY; STATE; ZIP CODE
	<i>200 Falcon Ridge, Alledo, TX 76008</i>		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	<i>(817) 475-2453</i>		
9 REPORT TYPE	<input 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)		
	<input checked="" 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
	<i>1 / 1 / 2025</i>		THROUGH <i>6 / 30 / 25</i>
11 ELECTION	ELECTION DATE		ELECTION TYPE
	Month	Day	Year
<i>11 / 8 / 22</i>		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known)
	<i>Public Co Commissioner</i>		
14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> 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	
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	
	<input type="checkbox"/> 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		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)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 35,192. ⁰³
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,945.-
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 20,000.-

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.



Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

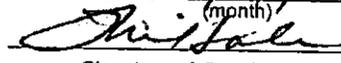
Sworn to and subscribed before me by _____ this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Michael Hale and my date of birth is 12.14.72
 My address is 144 Tramberland Ln, Aledo Tx. 76008 Parker
(street) (city) (state) (zip code) (country)
 Executed in Parker County, State of Texas, on the 15th day of July, 2025
(month) (year)



Signature of Candidate/Officeholder (Declarant)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Mike Hale</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3-21-25</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Deyle Hanley</i>	7 Amount of contribution (\$) <i>\$800.-</i>
6 Contributor address; City; State; Zip Code <i>745 W. Hill Dr., Alledo, TX 76008</i>		
8 Principal occupation / Job title (See Instructions) <i>Developer</i>		9 Employer (See Instructions) <i>Self</i>
Date <i>3-21-25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Rob Helms</i>	Amount of contribution (\$) <i>\$1,500.-</i>
Contributor address; City; State; Zip Code <i>555 Chandler Dr, Alledo, TX 76008</i>		
Principal occupation / Job title (See Instructions) <i>Manager</i>		Employer (See Instructions) <i>Self</i>
Date <i>3-28-25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Robert Beall</i>	Amount of contribution (\$) <i>\$1,000.-</i>
Contributor address; City; State; Zip Code <i>5300 Miramar Ln, Colleyville, TX 76034</i>		
Principal occupation / Job title (See Instructions) <i>Developer</i>		Employer (See Instructions) <i>Self</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Mike Hale

3 Filer ID (Ethics Commission Filers)

4 Date

3/31/25

5 Full name of contributor

out-of-state PAC (ID#: _____)

Lloyd Douglas

6 Contributor address;

City;

State;

Zip Code

PO Box 1745, Alledo, TX 76008

7 Amount of contribution (\$)

\$250.-

8 Principal occupation / Job title (See Instructions)

Entrepreneur

9 Employer (See Instructions)

Self

Date

5/30/25

Full name of contributor

out-of-state PAC (ID#: _____)

Brandon Tatarovich

Contributor address;

City;

State;

Zip Code

PO Box 58, Alledo, TX 76008

Amount of contribution (\$)

\$1,000.-

Principal occupation / Job title (See Instructions)

Director

Employer (See Instructions)

JPM

Date

3/30/25

Full name of contributor

out-of-state PAC (ID#: _____)

Chriz Roberts

Contributor address;

City;

State;

Zip Code

134 Timberbowl Ln, Alledo, TX 76008

Amount of contribution (\$)

\$100.-

Principal occupation / Job title (See Instructions)

Sales

Employer (See Instructions)

First on-light

Date

3/30/25

Full name of contributor

out-of-state PAC (ID#: _____)

Aime Hardick

Contributor address;

City;

State;

Zip Code

307 Nolan Dr, Southlake, TX 76092

Amount of contribution (\$)

\$2,500.-

Principal occupation / Job title (See Instructions)

Dealer

Employer (See Instructions)

Montz Dealerships

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Naive Hale</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3/30/25</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Stephan Watson</i>	7 Amount of contribution (\$) <i>\$2,225.</i>
	6 Contributor address; City; State; Zip Code <i>107 Bluestem Ln, Alledo, TX 76008</i>	
8 Principal occupation / Job title (See Instructions) <i>Fire Chief</i>		9 Employer (See Instructions) <i>ESD1</i>
Date <i>3/30/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Marcus Gleason</i>	Amount of contribution (\$) <i>\$144.09</i>
	Contributor address; City; State; Zip Code <i>1240 Tidwell Rd, Weatherford, TX 76087</i>	
Principal occupation / Job title (See Instructions) <i>Optometrist</i>		Employer (See Instructions) <i>Self</i>
Date <i>3/30/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Larry Rath</i>	Amount of contribution (\$) <i>\$500.-</i>
	Contributor address; City; State; Zip Code <i>405 Quail Ridge, Alledo, TX 76008</i>	
Principal occupation / Job title (See Instructions) <i>Self</i>		Employer (See Instructions) <i>Self</i>
Date <i>3/30/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Evelyn White</i>	Amount of contribution (\$) <i>24.01</i>
	Contributor address; City; State; Zip Code <i>1211 W Bull St, Weatherford, TX 76086</i>	
Principal occupation / Job title (See Instructions) <i>Domestic</i>		Employer (See Instructions) <i>Self</i>

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Mike Hale</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3/30/25</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Heather Dorniny</i>	7 Amount of contribution (\$) <i>\$ 25.5</i>
	6 Contributor address; City; State; Zip Code <i>212 Arista Tr., Rockville, TX 76487</i>	
8 Principal occupation / Job title (See Instructions) <i>Retired</i>		9 Employer (See Instructions) <i>Retired</i>
Date <i>3/30/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Patricia Grissam</i>	Amount of contribution (\$) <i>\$ 50.-</i>
	Contributor address; City; State; Zip Code <i>2170 Country Brook Dr, Weatherford, TX 76087</i>	
Principal occupation / Job title (See Instructions) <i>Retired</i>		Employer (See Instructions) <i>Retired</i>
Date <i>3/30/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Chap Reed</i>	Amount of contribution (\$) <i>\$ 50.-</i>
	Contributor address; City; State; Zip Code <i>3516 Alameda St, FW, TX 76126</i>	
Principal occupation / Job title (See Instructions) <i>Retired</i>		Employer (See Instructions) <i>Retired</i>
Date <i>3/30/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Trey Gonzales</i>	Amount of contribution (\$) <i>\$ 48.03</i>
	Contributor address; City; State; Zip Code <i>503 E Oak St, Abledo, TX 76008</i>	
Principal occupation / Job title (See Instructions) <i>Superintendent</i>		Employer (See Instructions) <i>BTC</i>

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Mike Hale</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3-30-25</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Ron Becker</i>	7 Amount of contribution (\$) <i>\$125.-</i>
6 Contributor address; City; State; Zip Code <i>111 Concorde Cir, Cresson, TX 76035</i>		
8 Principal occupation / Job title (See Instructions) <i>Fire Chief</i>		9 Employer (See Instructions) <i>Cresson</i>
Date <i>3-30-25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Donna Lang</i>	Amount of contribution (\$) <i>\$200.-</i>
Contributor address; City; State; Zip Code <i>1206 Heathington Rd, W Ford, TX 76088</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>3-30-25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Steve Bartley</i>	Amount of contribution (\$) <i>\$250.-</i>
Contributor address; City; State; Zip Code <i>PO Box 1046 Alledo, TX 76008</i>		
Principal occupation / Job title (See Instructions) <i>Bunker</i>		Employer (See Instructions) <i>Ciervo Ranch</i>
Date <i>3-30-25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Russ Rathke</i>	Amount of contribution (\$) <i>\$250.-</i>
Contributor address; City; State; Zip Code <i>112 Bent Oak Rd, W Ford, TX 76086</i>		
Principal occupation / Job title (See Instructions) <i>Sheriff</i>		Employer (See Instructions) <i>Furber County, TX</i>
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Becky McCallough
Mike Hoba

3 Filer ID (Ethics Commission Filers)

4 Date

3.30.25

5 Full name of contributor

out-of-state PAC (ID# _____)

Becky McCallough

6 Contributor address;

City;

State;

Zip Code

3006 Sunrise Trl, W'ford, TX 76088

7 Amount of contribution (\$)

\$ 50.-

8 Principal occupation / Job title (See Instructions)

HR / Treasurer

9 Employer (See Instructions)

Furber County

Date

3.30.25

Full name of contributor

out-of-state PAC (ID# _____)

Richard Sloan

Contributor address;

City;

State;

Zip Code

265 Valley Ln, Weatherford, TX 76085

Amount of contribution (\$)

\$ 50.-

Principal occupation / Job title (See Instructions)

Owner

Employer (See Instructions)

Sloan Drywall

Date

3.30.25

Full name of contributor

out-of-state PAC (ID# _____)

Rachael Watson

Contributor address;

City;

State;

Zip Code

160 Falcon Dr. Weatherford, TX 76088

Amount of contribution (\$)

\$ 600.-

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

Date

3.30.25

Full name of contributor

out-of-state PAC (ID# _____)

Angie McElroy

Contributor address;

City;

State;

Zip Code

152 Walsh Dr, Abledo, TX 76008

Amount of contribution (\$)

\$ 200.-

Principal occupation / Job title (See Instructions)

Manager

Employer (See Instructions)

Molson Coors

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Mike Hale

3 Filer ID (Ethics Commission Filers)

4 Date

3-30-25

5 Full name of contributor

Paul Thompson

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$100.-

6 Contributor address;

City;

State;

Zip Code

100 Jenkins Rd, Abledo TX 76008

8 Principal occupation / Job title (See Instructions)

Doctor

9 Employer (See Instructions)

Thompson Clinic

Date

3-30-25

Full name of contributor

Pat Deea

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$100.-

Contributor address;

City;

State;

Zip Code

136 S. Fork Dr, Hudson Oaks, TX 76087

Principal occupation / Job title (See Instructions)

Judge

Employer (See Instructions)

Tarke County

Date

3-30-25

Full name of contributor

Michael Barron

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$100.-

Contributor address;

City;

State;

Zip Code

424 Marsden Rd, Mineral Wells, TX 76067

Principal occupation / Job title (See Instructions)

Fin. Advisor

Employer (See Instructions)

Self

Date

3-30-25

Full name of contributor

Wayne Davidson

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$200.-

Contributor address;

City;

State;

Zip Code

1054 Floyd Rd, Weatherford, TX 76087

Principal occupation / Job title (See Instructions)

Auto Finance

Employer (See Instructions)

Self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Mike Hale

3 Filer ID (Ethics Commission Filers)

4 Date

1-30-25

5 Full name of contributor out-of-state PAC (ID#: _____)

Doyle Moss

7 Amount of contribution (\$)

\$50.-

6 Contributor address; City; State; Zip Code

348 Crown Rd, Willow Park, TX 76084

8 Principal occupation / Job title (See Instructions)

Insurance

9 Employer (See Instructions)

Agency Owner - Self

Date

3-30-25

Full name of contributor out-of-state PAC (ID#: _____)

Penny Shelton

Amount of contribution (\$)

\$50.-

Contributor address; City; State; Zip Code

1417 Kennelwood Hill Rd, Alledo, TX 76008

Principal occupation / Job title (See Instructions)

Fundraiser

Employer (See Instructions)

Self

Date

3-30-25

Full name of contributor out-of-state PAC (ID#: _____)

Rudy Gonzalez

Amount of contribution (\$)

\$100.-

Contributor address; City; State; Zip Code

503 E. Dale St, Alledo TX 76008

Principal occupation / Job title (See Instructions)

Roofing Mgr

Employer (See Instructions)

Weather Shield

Date

3-30-25

Full name of contributor out-of-state PAC (ID#: _____)

Randy Watkins

Amount of contribution (\$)

\$200.-

Contributor address; City; State; Zip Code

907 Highlands Ave, Alledo TX 76008

Principal occupation / Job title (See Instructions)

Title Insurance

Employer (See Instructions)

Stewart

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

4 Date

5 Full name of contributor out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

3.30.25

Pailee Roberts

6 Contributor address; City; State; Zip Code

184 Timberland Ln, Alledo, TX 76008

\$ 50.-

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Restoration

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

3.30.25

Dash Epley

Contributor address; City; State; Zip Code

214 Observation Dr, Alledo, TX 76008

\$ 25.-

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Legistics

Self

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

3.30.25

Kenny Blaucho

Contributor address; City; State; Zip Code

127 Esther G, Millsep, TX 76066

\$ 25.-

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Project Mgr

Burns + McDonnell

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

3.30.25

Michael Pierce

Contributor address; City; State; Zip Code

*524 Meadow Hill, Ft Worth, TX 76108
~~Alledo, TX 76008~~*

\$ 50

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Designer

Self - Bertech Engineer

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Mike Hale</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3-30-25</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Alexa Crocker</i>	7 Amount of contribution (\$) <i>\$50.-</i>
6 Contributor address; Apt 2302 City; State; Zip Code <i>2501 Cibolillo Hills, Ft. Worth, TX 76179</i>		
8 Principal occupation / Job title (See Instructions) <i>Insurance Sales</i>		9 Employer (See Instructions) <i>Mike Hale Agency</i>
Date <i>3-30-25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Stephanie Carter</i>	Amount of contribution (\$) <i>\$50.-</i>
Contributor address; City; State; Zip Code <i>10336 Deauville Circle N, F.W., TX 76108</i>		
Principal occupation / Job title (See Instructions) <i>Insurance Sales</i>		Employer (See Instructions) <i>Mike Hale Agency</i>
Date <i>3-30-25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jake Patterson</i>	Amount of contribution (\$) <i>\$75.-</i>
Contributor address; City; State; Zip Code <i>8016 Modera Dr, Ft Worth, TX 76126</i>		
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Wimbarger</i>
Date <i>3-30-25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Tammy McFee</i>	Amount of contribution (\$) <i>\$125.-</i>
Contributor address; City; State; Zip Code <i>14808 Reims Way, Aledo, TX 76008</i>		
Principal occupation / Job title (See Instructions) <i>Retail Sales</i>		Employer (See Instructions) <i>Self</i>

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Mike Hale</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3/10/25</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>John Boswell</i> 6 Contributor address; City; State; Zip Code <i>1320 Lake St, FW, TX 76102</i>	7 Amount of contribution (\$) <i>\$480.30</i> <i>\$100.00</i>
8 Principal occupation / Job title (See Instructions) <i>CEO</i>		9 Employer (See Instructions) <i>Boswell Interests</i>
Date <i>3/23/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Corey Brasher</i> Contributor address; City; State; Zip Code <i>320 Parkview Dr, Alledo, TX 76008</i>	Amount of contribution (\$) <i>\$100.-</i>
Principal occupation / Job title (See Instructions) <i>LT.</i>		Employer (See Instructions) <i>TX OPS</i>
Date <i>3/30/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Helen Hyles</i> Contributor address; City; State; Zip Code <i>9347 S. FM 1184, Alledo, TX 76008</i>	Amount of contribution (\$) <i>\$150.-</i>
Principal occupation / Job title (See Instructions) <i>Retired</i>		Employer (See Instructions) <i>Retired</i>
Date <i>3-30-25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Phil Trax</i> Contributor address; City; State; Zip Code <i>100 S. Lakeshore Dr, W-Ford, TX 76084</i>	Amount of contribution (\$) <i>\$100.-</i>
Principal occupation / Job title (See Instructions) <i>Att'y</i>		Employer (See Instructions) <i>Self</i>
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Mike Hale</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3/30/25</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Tony Miller</i>	7 Amount of contribution (\$) <i>\$1,150.-</i>
	6 Contributor address; City; State; Zip Code <i>491 Green Branch, W'ford, TX 76085</i>	
8 Principal occupation / Job title (See Instructions) <i>work</i>		9 Employer (See Instructions) <i>Miller's Towing</i>
Date <i>3/30/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Cassandra Hadfield</i>	Amount of contribution (\$) <i>\$1,600.-</i>
	Contributor address; City; State; Zip Code <i>1336 Crown Valley Dr, W'ford, TX 76087</i>	
Principal occupation / Job title (See Instructions) <i>Manager</i>		Employer (See Instructions) <i>Pfizer</i>
Date <i>3/30/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Michelle Burron</i>	Amount of contribution (\$) <i>\$250.-</i>
	Contributor address; City; State; Zip Code <i>424 Marsden Rd, Mansfield, TX 76064</i>	
Principal occupation / Job title (See Instructions) <i>Sales</i>		Employer (See Instructions) <i>Sage Therapeutics</i>
Date <i>3/30/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Madelyn Walsh</i>	Amount of contribution (\$) <i>\$100.-</i>
	Contributor address; City; State; Zip Code <i>4618 Vumbroe Dr, FW, TX 76132</i>	
Principal occupation / Job title (See Instructions) <i>Sales</i>		Employer (See Instructions) <i>Baker Firm</i>

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Mike Hale

3 Filer ID (Ethics Commission Filers)

4 Date

4.4.25

5 Full name of contributor

out-of-state PAC (ID#: _____)

Stanton Pearce & Co, LLC

6 Contributor address;

City;

State;

Zip Code

6023 Cooperative Hwy, Fu, TX 76126

7 Amount of contribution (\$)

\$1,000.-

8 Principal occupation / Job title (See Instructions)

Owner

9 Employer (See Instructions)

Stanton Co LLC

Date

4.1.25

Full name of contributor

out-of-state PAC (ID#: _____)

Zane Prince

Contributor address;

City;

State;

Zip Code

100 Willow Bend Dr, F12, Wilbur Park, TX 76008

Amount of contribution (\$)

\$500.-

Principal occupation / Job title (See Instructions)

Chairman

Employer (See Instructions)

Frost Bank Texas

Date

4.4.25

Full name of contributor

out-of-state PAC (ID#: _____)

Charlie Calhoun

Contributor address;

City;

State;

Zip Code

365 Shaes Turn, Abledo, TX 76008

Amount of contribution (\$)

\$500.-

Principal occupation / Job title (See Instructions)

President

Employer (See Instructions)

St Land / Selt

Date

3.30.25

Full name of contributor

out-of-state PAC (ID#: _____)

Rusty + Peckie Branner

Contributor address;

City;

State;

Zip Code

1178 CR 3790 Paradise TX 76073

Amount of contribution (\$)

\$100.-

Principal occupation / Job title (See Instructions)

Inspector Pennington

Employer (See Instructions)

Parker County

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Mike Hale

3 Filer ID (Ethics Commission Filers)

4 Date

5 Full name of contributor

out-of-state PAC (ID#: _____)

Lois Ruth

7 Amount of contribution (\$)

\$5,100.

6 Contributor address;

City;

State;

Zip Code

3008 Emmaus Rd Pockville, TX 76484

8 Principal occupation / Job title (See Instructions)

Retired

9 Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: _____)

4/11/25

Deanna Pruitt

Amount of contribution (\$)

\$50.00

Contributor address;

City;

State;

Zip Code

192 Crooked Creek Ln, Aledo, TX 76108

Principal occupation / Job title (See Instructions)

HTA

Employer (See Instructions)

Bowland Wall + Menzel

Date

Full name of contributor

out-of-state PAC (ID#: _____)

4/10/25

Taylor Faird

Amount of contribution (\$)

\$960.⁰⁰

Contributor address;

City;

State;

Zip Code

4421 Belclaire Ave, Dallas, TX 75205

Principal occupation / Job title (See Instructions)

Self Employed

Employer (See Instructions)

Flynn Holdings David Holdings LLC

Date

Full name of contributor

out-of-state PAC (ID#: _____)

4/4/25

Gordana Formby

Amount of contribution (\$)

\$700.

Contributor address;

City;

State;

Zip Code

302 Highland Ct, Aledo, TX 76108

Principal occupation / Job title (See Instructions)

Sales

Employer (See Instructions)

Blue Jack Ranch

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Mike Hale

3 Filer ID (Ethics Commission Filers)

4 Date

3. 30-25

5 Full name of contributor

Colin Lanier

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$ 2,100.-

6 Contributor address;

City;

State;

Zip Code

14169 Walsh Ave, Alledo, TX 76008

8 Principal occupation / Job title (See Instructions)

Real Estate

9 Employer (See Instructions)

Self

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:

2 FILER NAME

Mike Hite

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date

6 Full name of contributor out-of-state PAC (ID#: _____)

8 Amount of Contribution \$

9 In-kind contribution description

3-30-25

Kerrin Musselwhite

7 Contributor address; City; State; Zip Code

100.-

Gift card

149 Noverly Way, Akeda, TX 76008

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Manager

11 Employer (FOR NON-JUDICIAL) (See Instructions)

Brookshire's

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of Contribution \$

In-kind contribution description

3-30-25

Braudi Haupton

Contributor address; City; State; Zip Code

\$2100.-

Chair

1100 Old Amettes Rd, Akeda, TX 76008

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Furniture Designer

Employer (FOR NON-JUDICIAL) (See Instructions)

Self

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:

2 FILER NAME

Mike Hale

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$ -

5 Date

3-30-25

6 Full name of contributor out-of-state PAC (ID#: _____)

Tammy McBees

8 Amount of Contribution \$

\$250

9 In-kind contribution description

Cow hide

7 Contributor address; City; State; Zip Code

14808 Reims Way, Aledo, TX 76008

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)

Freight Sales

11 Employer (FOR NON-JUDICIAL)(See Instructions)

Self

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL)(See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

3-30-25

Full name of contributor out-of-state PAC (ID#: _____)

Doyle Hawley

Amount of Contribution \$

\$600

In-kind contribution description

Contributor address; City; State; Zip Code

745 W. Hill Dr, Aledo, TX 76008

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)

Developer

Employer (FOR NON-JUDICIAL)(See Instructions)

Self

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL)(See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:

2 FILER NAME

Mike Hale

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date

6 Full name of contributor out-of-state PAC (ID#: _____)

Rob Helms

8 Amount of Contribution \$

9 In-kind contribution description

3.30.25

7 Contributor address; City; State; Zip Code

555 Chandler, Alledo, TX 76008

\$3,500.

Cowboys Suite

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)

Manager

11 Employer (FOR NON-JUDICIAL)(See Instructions)

Self

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL)(See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Quin Martin

Amount of Contribution \$

In-kind contribution description

3.30.25

Contributor address; City; State; Zip Code

704 Hayden Way, Alledo, TX 76008

\$2,000

1/2 Beef

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)

Real Estate

Employer (FOR NON-JUDICIAL)(See Instructions)

Self

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL)(See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
if contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME <i>Mike Hall</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <i>3.30.25</i>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Dustin Haney</i>	8 Amount of Contribution \$ <i>\$ 700.-</i>	9 In-kind contribution description <i>Gym Membership</i>
7 Contributor address; City: State; Zip Code <i>137 Angelina Dr, Abledo, TX 76008</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) <i>Leasing Contractor</i>		11 Employer (FOR NON-JUDICIAL) (See Instructions) <i>Self</i>	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of Contribution \$	In-kind contribution description
			<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME <i>Mike Hale</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <i>3-30-25</i>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Shane Cartwright</i>	8 Amount of Contribution \$ <i>\$ 500</i>	9 In-kind contribution description <i>Knife</i>
7 Contributor address; City; State; Zip Code <i>4580 Bear Creek Rd, Alledo, TX 76008</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) <i>Law Enforcement</i>		11 Employer (FOR NON-JUDICIAL) (See Instructions) <i>Texas DPS</i>	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of Contribution \$	In-kind contribution description
			<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.