JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

| 100,977 | | | | | |
|---|--|---|-----------------------------------|--|--|
| The IC/OH Instruction | Guide explains how to complete | | er ID (Ethics Commission Filers) | 2 Total pages filed: | |
| The JC/OH instruction | adide explains now to complete | e tins form. | | 4 Pages | |
| 3 CANDIDATE / OFFICEHOLDER | | RST | MI | OFFICE USE ONLY | |
| NAME | Mr. E | Brian | K | Date Received | |
| | NICKNAME LA | AST | SUFFIX | was makena manananananananananananananananananan | |
| | l | | DECEIVED | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS | ADDRESS / PO BOX; APT / SUIT 6350 FM 1810 | re#; city; Chic | so TX 76431 | JUL 1 1 2022 | |
| Change of Address | | | U U | | |
| 5 CANDIDATE/ OFFICEHOLDER PHONE | AREA CODE PHONE N (940) 229-9 | | EXTENSION | Date Hand-delivered or Date Postmarked | |
| 6 CAMPAIGN | | RST | MI | Receipt # Amount \$ | |
| TREASURER NAME | B | rian | | Date Processed | |
| NAME | | AST | SUFFIX | Date Imaged | |
| | U | mphress | | | |
| 7 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PL 6350 FM 1810 | EASE); APT / SUITE #; | Chico, TX | 76431 | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE PHONE N (940) 229-93 | | EXTENSION | | |
| 9 REPORT TYPE | January 15 XX July 15 | 30th day before election 8th day before election | Runoff Exceeded \$500 limit | 15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR) | |
| 10 PERIOD COVERED | Month Day Year 2 / 23 / 2022 | THROUGH | Month Day 06 / 30 / | Year / 2022 | |
| 11 ELECTION | ELECTION DATE Month Day Year | Primary General | Runoff Other Description Special | | |
| 12 OFFICE | OFFICE HELD (if any) County Judge | | 13 OFFICE SOUGHT (if known |) | |
| GO TO PAGE 2 | | | | | |

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 2

| 14 JC/OH NAME | 15 Filer ID (Ethics Commission Filers) | | | | | |
|---|---|---|--|--|--|--|
| Brian Keith Umphress | | | | | | |
| 16 NOTICE FROM POLITICAL 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 | | | | |
| | | None | | | | |
| | GENERAL | COMMITTEE ADDRESS | JUL 1 1 2022 | | | |
| Additional Pages | | COMMITTEE CAMPAIGN TREASURER NAME | | | | |
| | | COMMITTEE CAMPAIGN TREASURER ADDRESS | en transverse en | | | |
| 17 CONTRIBUTION TOTALS | | POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THATS, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ | | | | |
| | | POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$0.00 | | | |
| EXPENDITURE TOTALS | 1 3 TOTAL POLITICAL EXPENDITIBLES OF \$100 OB LESS | | | | | |
| | | | | | | |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 116.40 | | | | | |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00 | | | | | |
| 18 AFFIDAVIT | | | | | | |
| I swear, or affirm, under penalty of perjury, that the accompanying report is true and corect and includes all information required to be reported by me under Title 15. Election Code. | | | | | | |
| My Commission Expires May 04, 2024 NOTARY ID 705852-3 | | | | | | |
| Signature of Candidate or Officeholder | | | | | | |
| AFFIX NOTARY STAMP / SEALABOVE | | | | | | |
| Sworn to and subscribed before me, by the said, this the, | | | | | | |
| day of Jul, , 20 dd, , to certify which, witness my hand and seal of office. | | | | | | |
| Debra Tillen Watary Public | | | | | | |
| Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath | | | | | | |

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

| 19 | 9 FILER NAME 20 Filer ID | | r ID (Ethics Commission Filers) | |
|-----|--|------------------|---------------------------------|--|
| | Brian Keith Umphress | | | |
| 21 | SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT | |
| 1. | SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) | | \$ | |
| 2. | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ | | |
| 3. | SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) | | \$ | |
| 4. | SCHEDULE E(J): LOANS (JUDICIAL) | | \$ | |
| 5. | X SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONT | FRIBUTIONS | \$ 799.98 | |
| 6. | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | | \$ | |
| 7. | SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CO | ONTRIBUTIONS | \$ | |
| 8. | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | | \$ | |
| 9. | SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS | | \$ | |
| 10. | SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A E | BUSINESS OF C/OH | \$ | |
| 11. | SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CON | ITRIBUTIONS | \$ | |
| 12. | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | | \$ | |



POLITICAL EXPENDITURES MADE 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

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

| Candidate/Officeholder/Political Committee Credit Card Payment Legal Services Salaries/Wages/Contract Labor Other (enter a category not listed above) The Instruction Guide explains how to complete this form. | | | | |
|---|--|--|--|--|
| 1 Total pages Schedule F1: Pages 1 of 1 | 2 FILER NAME Brian Keith Umphress 3 Filer ID (Ethics Commission Filers) | | | |
| 4 Date | · · · · · · · · · · · · · · · · · · · | | | |
| March 2, 2022 | J.R. Chophouse | | | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | | | |
| \$349.98 | North Main Street, Jacksboro, TX 76457 | | | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| PURPOSE | 2 | Check if travel outside of Texas. Complete Schedule T. | | |
| OF | | Check if Austin, TX, officeholder living expense | | |
| EXPENDITURE | Food/Beverage Expense - Election Watch | | | |
| | | | | |
| 9 Complete ONLY if direct | Candidate / Officeholder name | Office sought Office held | | |
| expenditure to benefit C/O | Brian Keith Umphress | County Judge | | |
| Date | Payee name | | | |
| March 7, 2022 | Matti Umphress | | | |
| Amount (\$) | Payee address; City; State; Zip Code | | | |
| \$200.00 | Haslet, TX 76052 | * | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE | , | Check if travel outside of Texas. Complete Schedule T. | | |
| OF | | Check if Austin, TX, officeholder living expense | | |
| EXPENDITURE | Salary/Wages/Contract Labor | | | |
| | | 22 | | |
| Complete ONLY if direct | Candidate / Officeholder | Office sought Office held | | |
| expenditure to benefit C/O | Brian Keith Umphress | DECE! Volume lidge | | |
| Date | Payee name | | | |
| March 21 | Kayla Lewis - VENMO Payment - JISD Elementry School Fun Run Sponsor 1 1 2022 | | | |
| Amount (\$) | Payee address; City; State; Zip Code | | | |
| \$250.00 | Jacksboro, TX 76458 | And the second s | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE | | Check if travel outside of Texas. Complete Schedule T. | | |
| OF | | Check if Austin, TX, officeholder living expense | | |
| EXPENDITURE | Contributions Made by Candidate | | | |
| | | | | |
| Complete ONLY if direct | Candidate / Officeholder name | Office sought Office held | | |
| expenditure to benefit C/O | H Brian Keith Umphress | County Judge | | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | | | |