

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH  
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: <b>12</b>
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI <b>Kirk D.</b> NICKNAME LAST SUFFIX <b>Martin</b>	<b>OFFICE USE ONLY</b>	
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <b>P.O. Box 1343 Weatherford, TX 76086</b>	Date Received  <b>JUN 30 '22 AM 8:55</b>  <i>[Signature]</i>	
<b>5</b> CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <b>( 817 ) 706-7898</b>	Date Hand-delivered or Date Postmarked	
<b>6</b> CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI <b>Mary A.</b> NICKNAME LAST SUFFIX <b>Williamson</b>	Receipt #	Amount \$
<b>7</b> CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <b>2106 Woodland Hills Lane, Weatherford, TX 76087</b>		
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <b>( 817 ) 304-0262</b>		
<b>9</b> 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)		
<b>10</b> PERIOD COVERED	Month Day Year     Month Day Year <b>02 / 20 / 2022</b> THROUGH <b>06 / 30 / 2022</b>		
<b>11</b> ELECTION	ELECTION DATE Month Day Year <b>11 / 08 / 2022</b>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
<b>12</b> OFFICE	OFFICE HELD (if any) <b>Justice of the Peace, Pct. 4</b>	<b>13</b> OFFICE SOUGHT (if known) <b>County Court at Law, No. 1</b>	
<b>14</b> 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 <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME <b>N/A</b> COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS	

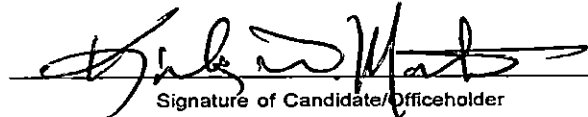
**GO TO PAGE 2**

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH  
COVER SHEET PG 2

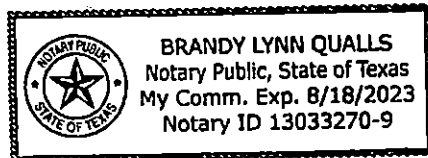
<b>15 JC/OH NAME</b> Kirk D. Martin		<b>16 Filer ID (Ethics Commission Filers)</b>
<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ -0-
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7,350.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ -0-
	4. TOTAL POLITICAL EXPENDITURES	\$ 24,468.64
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 6,715.92
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 20,000.00

**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/Officeholder

**Please complete either option below:**

**(1) Affidavit**



NOTARY STAMP / SEAL

Sworn to and subscribed before me by Kirk D. Martin this the 29 day of June, 2022, to certify which, witness my hand and seal of office.

Brandy Lynn Qualls Signature of officer administering oath     
 Brandy Lynn Qualls Printed name of officer administering oath     
 Notary Public Title of officer administering oath

OR

**(2) Unsworn Declaration**

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_ (street) \_\_\_\_\_ (city) \_\_\_\_\_ (state) \_\_\_\_\_ (zip code) \_\_\_\_\_ (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ (month) \_\_\_\_\_ (year).

\_\_\_\_\_  
Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - JC/OH

**FORM JC/OH  
COVER SHEET PG 3**

19 FILER NAME		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$7,350.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$24,468.64
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

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 A(J)1:
2 FILER NAME <b>Kirk D. Martin</b>		3 Filer ID (Ethics Commission Filers)
4 Date Feb. 21, 2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Laura Lee Vermandel</b>	7 Amount of contribution (\$) <b>\$350.00</b>
6 Contributor address; City; State; Zip Code <b>P.O. Box 50083 Billings MT 59105</b>		
8 Contributor's principal occupation <b>Legal Profession</b>		9 Contributor's job title <b>Attorney</b>
10 Contributor's employer/law firm <b>Self Employed</b>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date Feb. 24, 2022	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Brad McDavid</b>	Amount of contribution (\$) <b>\$250.00</b>
Contributor address; City; State; Zip Code <b>230 Jenkins Road Aledo TX 76008</b>		
Contributor's principal occupation <b>Retired</b>		Contributor's job title <b>N/A</b>
Contributor's employer/law firm <b>N/A</b>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date Feb. 24, 2022	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Debra Carney</b>	Amount of contribution (\$) <b>\$500.00</b>
Contributor address; City; State; Zip Code <b>400 Appleton Drive Weatherford TX 76088</b>		
Contributor's principal occupation <b>Construction</b>		Contributor's job title <b>Owner</b>
Contributor's employer/law firm <b>Cyberhorse Construction</b>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>                  If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

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 A(J)1:
2 FILER NAME <b>Kirk D. Martin</b>		3 Filer ID (Ethics Commission Filers)
4 Date Feb. 21, 2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>James A Perkins</b>	7 Amount of contribution (\$) <b>\$150.00</b>
6 Contributor address; City; State; Zip Code <b>435 Quail Ridge Aledo TX 76008</b>		
8 Contributor's principal occupation <b>Aircraft Remodeling</b>		9 Contributor's job title <b>Owner</b>
10 Contributor's employer/law firm <b>Self Employed</b>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date Feb. 23, 2022	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Denise Helms</b>	Amount of contribution (\$) <b>\$1000.00</b>
Contributor address; City; State; Zip Code <b>555 Chandler Dr. Aledo TX 76008</b>		
Contributor's principal occupation <b>Home Health</b>		Contributor's job title <b>Co-Owner</b>
Contributor's employer/law firm <b>Self Employed</b>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date Mar. 1, 2022	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Michael Brinkley</b>	Amount of contribution (\$) <b>\$200.00</b>
Contributor address; City; State; Zip Code <b>P.O. Box 820711 N. Richland Hills TX 76182</b>		
Contributor's principal occupation <b>Legal Profession</b>		Contributor's job title <b>Attorney</b>
Contributor's employer/law firm <b>Self Employed</b>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p><b>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</b></p>		

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

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 A(J)1:
2 FILER NAME Kirk D. Martin		3 Filer ID (Ethics Commission Filers)
4 Date March 30, 2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Gary Westenhover	7 Amount of contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code 2205 Lake Country Dr. Weatherford TX 76087	
8 Contributor's principal occupation Attorney		9 Contributor's job title Owner
10 Contributor's employer/law firm Law Office of Gary Westenhover		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date March 30, 2022	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Robert DuBoise	Amount of contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 3506 Chris Court Weatherford TX 76088	
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Harris, Finley & Bogle, P.C.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date March 30, 2022	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Kenneth Mullen	Amount of contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 211 S. Rusk Street Weatherford TX 76086	
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Law Office of Kenneth Mullen		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

**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  
(JUDICIAL)**

**SCHEDULE A(J)1**

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 A(J)1:
2 FILER NAME <b>Kirk D. Martin</b>		3 Filer ID (Ethics Commission Filers)
4 Date March 30, 2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Jim Renforth</b>	7 Amount of contribution (\$) <b>\$500.00</b>
6 Contributor address; City; State; Zip Code <b>916 W. Belknap Street Ft. Worth TX 76102</b>		
8 Contributor's principal occupation <b>Attorney</b>		9 Contributor's job title <b>Owner</b>
10 Contributor's employer/law firm <b>Law Office of Jim Renforth</b>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date March 30, 2022	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Amie Nelson</b>	Amount of contribution (\$) <b>\$250.00</b>
Contributor address; City; State; Zip Code <b>570 S. Sugartree Dr. Lipan TX 76462</b>		
Contributor's principal occupation <b>Title Agent/Closer</b>		Contributor's job title <b>Account Specialist</b>
Contributor's employer/law firm <b>McKnight Title</b>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date March 30, 2022	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Billy Holloway</b>	Amount of contribution (\$) <b>\$100.00</b>
Contributor address; City; State; Zip Code <b>302 Fingerbanks Lane Weatherford TX 76088</b>		
Contributor's principal occupation <b>Self Employed</b>		Contributor's job title <b>Owner</b>
Contributor's employer/law firm <b>Lucky's Floors</b>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

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 A(J)1:
2 FILER NAME <b>Kirk D. Martin</b>		3 Filer ID (Ethics Commission Filers)
4 Date March 30, 2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Ron Morgan</b>	7 Amount of contribution (\$) <b>\$500.00</b>
	6 Contributor address; City; State; Zip Code <b>185 Park Place Circle Cresson TX 76035</b>	
8 Contributor's principal occupation <b>Retired</b>		9 Contributor's job title <b>N/A</b>
10 Contributor's employer/law firm <b>N/A</b>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date March 30, 2022	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Yale Young</b>	Amount of contribution (\$) <b>\$100.00</b>
	Contributor address; City; State; Zip Code <b>125 Westridge Trail Weatherford TX 76087</b>	
Contributor's principal occupation <b>Oil &amp; Gas Producer</b>		Contributor's job title <b>Owner</b>
Contributor's employer/law firm <b>Self Employed - Yale Young Oil &amp; Gas</b>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date March 30, 2022	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Debra Wherry</b>	Amount of contribution (\$) <b>\$100.00</b>
	Contributor address; City; State; Zip Code <b>6736 FM 933 Blum TX 76627</b>	
Contributor's principal occupation <b>Retired</b>		Contributor's job title <b>N/A</b>
Contributor's employer/law firm <b>N/A</b>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p><b>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</b></p>		



# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1:
<b>2</b> FILER NAME Kirk D. Martin		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date March 30, 2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Colt Jones	<b>7</b> Amount of contribution (\$) \$1000.00
<b>6</b> Contributor address; City; State; Zip Code 544 Santa Fe Drive Weatherford TX 76086		
<b>8</b> Contributor's principal occupation Real Estate Broker		<b>9</b> Contributor's job title Owner
<b>10</b> Contributor's employer/law firm HBS Real Estate		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
<b>Date</b> March 30, 2022	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC ID#: _____ Leanne Ivey	<b>Amount of contribution (\$)</b> \$100.00
<b>Contributor address; City; State; Zip Code</b> 10505 Lee Trevino Ft. Worth TX 76126		
<b>Contributor's principal occupation</b> Political Assistant		<b>Contributor's job title</b> Administrative Assistant
<b>Contributor's employer/law firm</b> Congressman Roger Williams		<b>Law firm of contributor's spouse (if any)</b>
<b>If contributor is a child, law firm of parent(s) (if any)</b>		
<b>Date</b>	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC ID#: _____	<b>Amount of contribution (\$)</b>
<b>Contributor address; City; State; Zip Code</b>		
<b>Contributor's principal occupation</b>		<b>Contributor's job title</b>
<b>Contributor's employer/law firm</b>		<b>Law firm of contributor's spouse (if any)</b>
<b>If contributor is a child, law firm of parent(s) (if any)</b>		

**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 (JUDICIAL)

## SCHEDULE A(J)1

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 A(J)1:
2 FILER NAME <b>Kirk D. Martin</b>		3 Filer ID (Ethics Commission Filers)
4 Date April 11, 2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Eggleston, King LLP</b>	7 Amount of contribution (\$) <b>\$500.00</b>
6 Contributor address; City; State; Zip Code <b>102 Houston Avenue, Suite 300 Weatherford TX 76086</b>		
8 Contributor's principal occupation <b>Legal Services Partnership</b>		9 Contributor's job title <b>N/A</b>
10 Contributor's employer/law firm <b>Eggleston King, LLP</b>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date March 17, 2022	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Gerald Hobson</b>	Amount of contribution (\$) <b>\$100.00</b>
Contributor address; City; State; Zip Code <b>190 Measures Road Weatherford TX 76088</b>		
Contributor's principal occupation <b>Retired</b>		Contributor's job title <b>N/A</b>
Contributor's employer/law firm <b>N/A</b>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date June 6, 2022	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Doyle Hanley</b>	Amount of contribution (\$) <b>\$500.00</b>
Contributor address; City; State; Zip Code <b>745 West Hill Drive Aledo TX 76008</b>		
Contributor's principal occupation <b>Builder / Developer</b>		Contributor's job title <b>Owner</b>
Contributor's employer/law firm <b>Self Employed</b>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Kirk D. Martin	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date Mar. 7, 2022	<b>5</b> Payee name Flaggert Assoc. Consulting Team, LLC	
<b>6</b> Amount (\$) \$200.00	<b>7</b> Payee address; 14700 S. E. 51st St.	City; Choctaw State; OK Zip Code 73020
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description Social Media Mgt
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date Mar. 7, 2022	Payee name Go Big Media	
Amount (\$) \$11,989.32	Payee address; 44 Canal Center Plaza, Ste. 315	City; Alexandria State; VA Zip Code 22314
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Digital Media
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date Mar. 11, 2022	Payee name Go Big Media	
Amount (\$) \$11,989.32	Payee address; 44 Canal Center Plaza, Ste. 315	City; Alexandria State; VA Zip Code 22314
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Digital Media
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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 Credit Card Payment	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 Other (enter a category not listed above)
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The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Kirk D. Martin	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date April 25, 2022	<b>5</b> Payee name Squaw Creek Golf Course	
<b>6</b> Amount (\$) \$250.00	<b>7</b> Payee address; 1605 Ranch House Road	City: Willow Park State: TX Zip Code: 76087
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description Golf Tournament Deposit
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date April 29, 2022	Payee name Parker County Bar Association	
Amount (\$) \$40.00	Payee address; P.O. Box 323	City: Weatherford State: TX Zip Code: 76086
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Digital Media
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date	Payee name	
Amount (\$)	Payee address;	City;      State;      Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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**

# OUTSTANDING LOANS

## SCHEDULE L

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 L: 1	
2 FILER NAME Kirk D. Martin		3 Filer ID (Ethics Commission Filers)	
LENDER INFORMATION	4 Name of lender Kirk D. Martin		
	5 Lender address;	City;	State; Zip Code
	P.O. Box 1343	Weatherford	TX 76086
GUARANTOR INFORMATION	6 Name of guarantor		
	7 Guarantor address;	City;	State; Zip Code
<input checked="" type="checkbox"/> not applicable			
LENDER INFORMATION	Name of lender Kirk D. Martin		
	Lender address;	City;	State; Zip Code
	P.O. Box 1343	Weatherford	TX 76086
GUARANTOR INFORMATION	Name of guarantor		
	Guarantor address;	City;	State; Zip Code
<input checked="" type="checkbox"/> not applicable			
LENDER INFORMATION	Name of lender		
	Lender address;	City;	State; Zip Code
GUARANTOR INFORMATION	Name of guarantor		
	Guarantor address;	City;	State; Zip Code
<input type="checkbox"/> not applicable			
LENDER INFORMATION	Name of lender		
	Lender address;	City;	State; Zip Code
GUARANTOR INFORMATION	Name of guarantor		
	Guarantor address;	City;	State; Zip Code
<input type="checkbox"/> not applicable			

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**