

# 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:					
				28						
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST BRENT	MI D	OFFICE USE ONLY						
	NICKNAME	LAST HILLIARD	SUFFIX	Date Received <i>RECEIVED AT 10:59 O'CLOCK AM JAN 15 2026 Mona Clegg</i> RAINS COUNTY ELECTIONS DEPARTMENT, TEXAS						
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX:	APT / SUITE #:	CITY:	STATE:	ZIP CODE					
P.O. Box 1149      EMORY      TX      75440										
<input type="checkbox"/> Change of Address <b>5 CANDIDATE/</b> <b>OFFICEHOLDER</b> <b>PHONE</b>										
AREA CODE      PHONE NUMBER      EXTENSION (903)      913-6003										
<b>6 CAMPAIN</b> <b>TREASURER</b> <b>NAME</b>										
MS / MRS / MR      FIRST ELISA      MI NICKNAME      LAST ALLEN      SUFFIX										
<b>7 CAMPAIN</b> <b>TREASURER</b> <b>ADDRESS</b> <small>(Residence or Business)</small>										
STREET ADDRESS (NO PO BOX PLEASE);      APT / SUITE #;      CITY; P.O. Box 1149      EMORY      TX      75440										
<b>8 CAMPAIN</b> <b>TREASURER</b> <b>PHONE</b>										
AREA CODE      PHONE NUMBER      EXTENSION (903)      913-6003										
<b>9 REPORT TYPE</b>										
<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> <input type="checkbox"/> Final Report (Attach C/OH - FR)										
<b>10 PERIOD</b> <b>COVERED</b>										
Month      Day      Year      Month      Day      Year 09 / 29 / 2025      THROUGH      01 / 14 / 2026										
<b>11 ELECTION</b>										
ELECTION DATE Month      Day      Year 03 / 03 / 2026			ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Other Description <input type="checkbox"/> <input type="checkbox"/> Special							
<b>12 OFFICE</b>										
OFFICE HELD (if any) COUNTY JUDGE			13 OFFICE SOUGHT (if known) COUNTY JUDGE							
<b>14 NOTICE FROM</b> <b>POLITICAL</b> <b>COMMITTEE(S)</b>										
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.										
<table border="1"> <tr> <td rowspan="4">COMMITTEE TYPE   <input type="checkbox"/> GENERAL   <input type="checkbox"/> SPECIFIC       </td> <td>COMMITTEE NAME</td> </tr> <tr> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>						COMMITTEE TYPE  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE NAME	COMMITTEE ADDRESS	COMMITTEE CAMPAIGN TREASURER NAME	COMMITTEE CAMPAIGN TREASURER ADDRESS
COMMITTEE TYPE  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE NAME									
	COMMITTEE ADDRESS									
	COMMITTEE CAMPAIGN TREASURER NAME									
	COMMITTEE CAMPAIGN TREASURER ADDRESS									
GO TO PAGE 2										

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

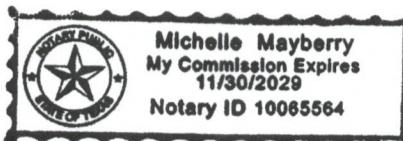
FORM JC/OH  
COVER SHEET PG 2

15 JC/OH NAME	BRENT D HILLIARD		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)	\$ —	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ —	
	4. TOTAL POLITICAL EXPENDITURES	\$ 33,888.88	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ —	
	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ —	
OUTSTANDING LOAN TOTALS			

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 Brent D. Hilliard this the 15th day of January, 2026, to certify which, witness my hand and seal of office.

Michelle Mayberry Signature of officer administering oath

Michelle Mayberry 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****BRENT D HILLIARD****20 Filer ID (Ethics Commission Filers)****21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE****SUBTOTAL  
AMOUNT**

1. <input type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
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 type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
6. <input checked="" type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 20,411.00
7. <input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8. <input checked="" type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 3,726.34
9. <input checked="" type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 9,751.54
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	\$

## UNPAID INCURRED OBLIGATIONS

## SCHEDULE F2

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

### EXPENDITURE CATEGORIES FOR BOX 10(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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	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 F2: 05	2 FILER NAME BRENT D HILLIARD	3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		\$ 20,411.00	
5 Date 1-5-2026	6 Payee name RAINS COUNTY LEADER		
7 Amount (\$) \$4,851.00	8 Payee address: 126 N. PLANTERS ST.	City; State; Zip Code EMORY, TX 75440	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) ADVERTISING EXP.	(b) Description CAMPAIGN FULL + 1/2 PAGE ADS	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH BRENT D HILLIARD	Candidate / Officeholder name	Office sought COUNTY JUDGE	Office held CO. JUDGE
Date 1-1-2026	Payee name MIKE STEVENS		
Amount (\$) \$11,710.00	Payee address: 6923 INDIANA AVE.	City; State; Zip Code LUBBOCK TX 79413	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ADVERTISING + CONSULTING EXP	Description CAMPAIGN CONSULTING, DESIGN, MAILERS	
	<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 BRENT D HILLIARD	Candidate / Officeholder name	Office sought COUNTY JUDGE	Office held CO. JUDGE

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

## UNPAID INCURRED OBLIGATIONS

## SCHEDULE F2

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

### EXPENDITURE CATEGORIES FOR BOX 10(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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	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 F2: 05	2 FILER NAME BRENT D HILLIARD	3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		\$ 20,411.00	
5 Date 1-1-2026	6 Payee name MIKE STEVENS		
7 Amount (\$) \$3,850.00	8 Payee address; 4923 INDIANA AVE. LUBBOCK TX 79413	City; State; Zip Code	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) ADVERTISING & CONSULTING EXPENSE	(b) Description WEBSITE DESIGN, SOCIAL MEDIA	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name BRENT D HILLIARD	Office sought COUNTY JUDGE	Office held CO. JUDGE
Date	Payee name		
Amount (\$)	Payee address;	City;	State; Zip Code
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political		
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			

**Rains County Leader**

PO Box 127 -- 126 N Planters St.  
Emory, TX 75440 US  
+19034732653  
subscription@rainscountyleader.com  
www.rainscountyleader.com

## Receipt

**Received From**

BRENT HILLIARD  
PO Box 1149  
Emory, TX 75440

**Date:** 01/05/2026**Payment Method:****Reference No:** CC-PoA

Invoice Number	Invoice Date	Due Date	Original Amount	Balance	Payment
1613427	01/08/2026	01/15/2026	1449.00	1449.00	1449.00
1613428	01/08/2026	01/15/2026	504.00	504.00	504.00
1613423	01/15/2026	01/22/2026	724.50	724.50	724.50
1613424	01/22/2026	01/29/2026	724.50	724.50	724.50
1613425	01/29/2026	02/05/2026	724.50	724.50	724.50
1613426	02/05/2026	02/12/2026	724.50	724.50	724.50

Memo: CC-PoA

VISA BLACK

Amount Credited:	\$0.00
Total:	\$4,851.00

# INVOICE

Mike Stevens  
6923 Indiana Ave  
Lubbock, TX 79413-6111

mikes@action-printing.com  
+1 (806) 790-0709

## Bill to

Elect Brent Hilliard Rains County Judge  
Elect Brent Hilliard Rains County Judge

## Ship to

Elect Brent Hilliard Rains County Judge  
Elect Brent Hilliard Rains County Judge

## Invoice details

Invoice no.: 1183

Terms: Due on receipt

Invoice date: 01/01/2026

Due date: 01/10/2026

#	Date	Product or service	Description	Qty	Rate	Amount
1.		Hours	consulting and Christmas Card mail out to all voters homes, \$7210. Web site design, Social Media design and political ad dis, registration. registration for campaign texting from web site \$3500 , printing brochure and delivery \$1000.00	1	\$11,710.00	\$11,710.00

## Ways to pay

    BANK  

VISA BLACK

Total	<b>\$11,710.00</b>
Payment	-\$11,710.00
Balance due	<b>\$0.00</b>

**Paid in Full**

Rains

# INVOICE

Mike Stevens  
6923 Indiana Ave  
Lubbock, TX 79413-6111

mikes@action-printing.com  
+1 (806) 790-0709

## Bill to

Elect Brent Hilliard Rains County Judge  
Elect Brent Hilliard Rains County Judge

## Ship to

Elect Brent Hilliard Rains County Judge  
Elect Brent Hilliard Rains County Judge

## Shipping info

Ship date: 01/01/2026

## Invoice details

Invoice no.: 1186

Terms: Net 30

Invoice date: 01/01/2026

Due date: 01/31/2026

#	Date	Product or service	Description	Qty	Rate	Amount
1.		Hours	social media creating, applying for certification for boosting and political ad disclaimer. Content build 1-1-2026 to 1-10-2026 boosting budget	1	\$950.00	\$950.00
2.		Hours	consulting hours on web site build out hosting, e mail services. changes and posting to web. SEO registration, key words. registration for texting	1	\$2,100.00	\$2,100.00
3.		Services	brochures 500 of each shipping	1000	\$0.80	\$800.00

## Ways to pay

    BANK  

View and pay

VISA, BLACK

# EXPENDITURES MADE BY CREDIT CARD

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

## SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4: 03	2 FILER NAME BRENT D. HILLIARD		3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD			\$ 3,337.67
5 CREDIT CARD ISSUER	Name of financial institution SOUTHWEST VISA BLACK		
6 PAYMENT	(a) Amount Charged \$ 3,337.67	(b) Date Expenditure Charged 12/23/2025	(c) Date(s) Credit Card Issuer Paid 1/7/2026
7 PAYEE	(a) Payee name BRENT D HILLIARD	(b) Payee address; PO Box 1149	City, State, Zip Code EMORY, TX 75440
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	(b) Description SIGNS	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name BRENT D HILLIARD COUNTY JUDGE CO. JUDGE		
PAYMENT	(a) Amount Charged \$	(b) Date Expenditure Charged	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name	(b) Payee address;	City, State, Zip Code
PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)	(b) Description	(c) <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		
PAYMENT	(a) Amount Charged \$	(b) Date Expenditure Charged	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name	(b) Payee address;	City, State, Zip Code
PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)	(b) Description	(c) <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

Designer Graphics  
12404 Hwy 155 South Tyler, TX 75703  
dana@maildg.com  
(903) 581-0777

www.designergraphics.com

PAID



## Invoice 627809

Brent Hilliard - 24x18 and 96x48

SALES REP INFO  
Amanda Smith  
Customer Service  
amanda@danwal.com  
QT#  
12499

INVOICE DATE  
12/23/2025  
INV.DUE DATE  
12/23/2025

TERMS  
Deposit

SHIPPING METHOD  
Customer Pickup

ORDERED BY  
Hilliard Camp - Brent  
Account Number: 93888  
Attn: Brent Hilliard  
Hilliard Camp - Brent  
900 RS CR 1325  
Emory, TX 75440

CONTACT INFO  
Brent Hilliard  
hilliard@mmbo.com  
(432) 352-2821

#	ITEM	QTY	UOM	U.PRICE	TOTAL (EXCL. TAX)	TAXABLE
1	<b>Coro Yard Sign 24x18 digital print</b> 24" X 18" Yard Sign 4mm coro digital printed See asset Colors: Two Color Sides: Double Sided	100	Each	\$5.36	\$536.00	Y
2	<b>Coro Yard Sign 96x48 digital printed w/grommets</b> 4mm coro digital printed **5 grommets on top and 5 grommets on bottom (corners and every 2 ft)** See asset Colors: Two Color Sides: Single Sided	30	Each	\$47.47	\$1,424.10	Y
3	<b>Coro Yard Sign 96x48 digital printed w/grommets</b> 4mm coro digital printed **Grommets on 4 corners** See asset Colors: Two Color Sides: Double Sided	20	Each	\$52.41	\$1,048.20	Y
4	<b>Step Stake - Standard Wire</b>	100	Each	\$0.75	\$75.00	Y

#	PAID ON	METHOD	AMOUNT	
1	12/12/2025	:-XXXX-7923 Auth: 08638Z	\$64.95	-
2	12/11/2025	:-XXXX-7923 Auth: 08284Z	\$3,272.72	-

Subtotal:	\$3,083.30
Sales Tax (8.25%):	\$254.37
Total:	\$3,337.67
Total Paid:	\$3,337.67
<b>Balance Due:</b>	<b>\$0.00</b>

**SIGNATURE:**

**DATE:**

# EXPENDITURES MADE BY CREDIT CARD

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

## SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4: 07	2 FILER NAME BRENT D. HILLIARD	3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 388.67
5 CREDIT CARD ISSUER AMERICAN EXPRESS	Name of financial institution AMERICAN EXPRESS	
6 PAYMENT	(a) Amount Charged \$ 197.14	(b) Date Expenditure Charged 12/7/2025
	(c) Date(s) Credit Card Issuer Paid 1/13/2026	
7 PAYEE	(a) Payee name BRENT D HILLIARD	(b) Payee address; City, State, Zip Code PO Box 1149 EMORY TX 75440
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	(b) Description WEBSITE DOMAIN
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name BRENT D HILLIARD COUNTY JUDGE CO. JUDGE	
PAYMENT	(a) Amount Charged \$ 92.96	(b) Date Expenditure Charged 12/7/2025
	(c) Date(s) Credit Card Issuer Paid 1/13/2026	
PAYEE	(a) Payee name BRENT D HILLIARD	(b) Payee address; City, State, Zip Code PO Box 1149 EMORY, TX 75440
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	(b) Description WEBSITE DOMAIN
	(c) <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 BRENT D HILLIARD COUNTY JUDGE CO. JUDGE	
PAYMENT	(a) Amount Charged \$ 98.57	(b) Date Expenditure Charged 12/8/2025
	(c) Date(s) Credit Card Issuer Paid 1/13/2026	
PAYEE	(a) Payee name BRENT D HILLIARD	(b) Payee address; City, State, Zip Code PO Box 1149 EMORY TX 75440
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	(b) Description WEBSITE DOMAIN
	(c) <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 BRENT D HILLIARD COUNTY JUDGE CO. JUDGE	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

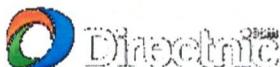
From: Lee Leonard [lleonard@mmbo.com](mailto:lleonard@mmbo.com)  
Subject: Fw: Your order from Directnic  
Date: Jan 5, 2026 at 8:06:27 AM  
To: Brent D. Hilliard [hilliard@mmbo.com](mailto:hilliard@mmbo.com)



---

**From:** Directnic Support <[support@directnic.com](mailto:support@directnic.com)>  
**Sent:** Sunday, December 7, 2025 8:36 AM  
**To:** HilliardIT <[hilliardit@hilliardos.com](mailto:hilliardit@hilliardos.com)>  
**Subject:** Your order from Directnic

**WARNING: EXTERNAL SENDER - Only open links and attachments from known senders**



[support@directnic.com](mailto:support@directnic.com)  
[504.355.0081](tel:504.355.0081)

Hello Brent Hilliard,  
Thank you for purchasing the following services with Directnic:

## Invoice Details

Directnic, LLC  
9029 Jefferson Hwy.. Suite D #298  
River Ridge, LA 70123

### Order Info:

Invoice/Draft#: [9415114](#)

Date/Time: 12/07/2025 02:36 pm

Payment Method: Credit Card

\*\*\*\*\*1057 AMEX 12/2027

Account: 505587

### Billed to:

Brent Hilliard  
Hilliard Office Solutions  
P.O. Box 52510,  
Midland, TX 79710  
+1.4326839100  
129.222.77.62

Type	Description	Quantity	Price	Subtotal
ICANN Fees	NA	10	\$0.20	\$2.00
Register .COM Domain	<a href="#">votebrenthilliard.com</a>	5	\$14.51	\$72.57
Direct Privacy	<a href="#">votebrenthilliard.com</a>	5	\$5.00	\$25.00
Register .COM Domain	<a href="#">electbrenthilliard.com</a>	5	\$14.51	\$72.57
Direct Privacy	<a href="#">electbrenthilliard.com</a>	5	\$5.00	\$25.00

Invoice Total: \$197.14  
Credit Card: -\$197.14  
Amount Due: \$0.00

Thank you! Your payment has been accepted.

Please print or save a copy of this page, as it is your proof of payment.

Purchaser's IP Address: 129.222.77.62

This is your official receipt for proof of payment. Please note that [Directnic.com](#) is run by DNC Holdings, Inc. and

that either name may appear on your credit card statement.

If you have any questions about your purchase, please contact Directnic Customer Support either by phone at [+1.504.355.0081](tel:1.504.355.0081) (Mon-Fri 013:00 to 22:00 GMT (8 am to 5 pm CST) Mon-Fri Central) or by e-mail at [support@directnic.com](mailto:support@directnic.com).

-Your Directnic Team



Want to add something to this page? [here](#) to learn how.

9029 Jefferson Hwy., Suite D #298  
River Ridge, LA 70123  
[+1.504.355.0081](tel:+15043550081)



From: Lee Leonard [lleonard@mmbo.com](mailto:lleonard@mmbo.com)  
Subject: Fw: Your order from Directnic  
Date: Jan 5, 2026 at 8:06:27 AM  
To: Brent D. Hilliard [hilliard@mmbo.com](mailto:hilliard@mmbo.com)

LEE LEONARD  
Director of Service  
**HILLIARD**  
OFFICE SOLUTIONS  
150 Tawakoni Dr, Emory, TX, 75440, United States  
Officer: (972) 972-8876  
Email: [lleonard@hilliardos.com](mailto:lleonard@hilliardos.com)  
Web: [HilliardOS.com](http://HilliardOS.com)  
*Let Us Know How We're Doing!*  
[\(click to submit survey\)](#)  
Follow us: [\(Facebook\)](#) [\(Twitter\)](#)  
This e-mail message along with any files transmitted with it contains PROPRIETARY and CONFIDENTIAL information and are intended only for the use of the specific individual or individuals to whom it is addressed. If you are not an intended recipient of this e-mail, you are hereby notified that any unauthorized use, dissemination or copying of this e-mail or the information contained herein is strictly prohibited. If you receive this e-mail by mistake, kindly delete the message and please advise us. Any views or opinions expressed in this e-mail are solely those of the author and do not necessarily represent those of the company. Disclosures of the company are expressly required not to make defamatory statements and not to damage or damage any legitimate or legal rights by such communication. You must communicate in conformity with company policy and within the scope of the employment of the individual concerned. The company does not accept any liability in respect of such communication, and the employee responsible will be personally liable for any damages or other liability arising therefrom.

**From:** Directnic Support <[support@directnic.com](mailto:support@directnic.com)>  
**Sent:** Sunday, December 7, 2025 8:37 AM  
**To:** HilliardIT <[hilliardit@hilliardos.com](mailto:hilliardit@hilliardos.com)>  
**Subject:** Your order from Directnic

**WARNING: EXTERNAL SENDER - Only open links and attachments from known senders**



[support@directnic.com](mailto:support@directnic.com)  
[504.355.0081](tel:504.355.0081)

Hello Brent Hilliard,  
Thank you for purchasing the following services with Directnic:

## Invoice Details

Directnic, LLC  
9029 Jefferson Hwy.. Suite D #298  
River Ridge, LA 70123

### Order Info:

Invoice/Draft#: **9415115**  
Date/Time: 12/07/2025 02:37 pm  
Payment Method: Credit Card  
\*\*\*\*\*1057 AMEX 12/2027  
Account: 505587

### Billed to:

Brent Hilliard  
Hilliard Office Solutions  
P.O. Box 52510,  
Midland, TX 79710  
+1.4326839100  
129.222.77.62

Type	Description	Quantity	Price	Subtotal
ICANN Fees	NA	5	\$0.20	\$1.00
Register .NET Domain	<a href="http://brenthilliard.net">brenthilliard.net</a>	5	\$13.39	\$66.96
Direct Privacy	<a href="http://brenthilliard.net">brenthilliard.net</a>	5	\$5.00	\$25.00

Invoice Total: \$92.96

Credit Card: -\$92.96  
Amount Due: \$0.00

Thank you! Your payment has been accepted.

Please print or save a copy of this page, as it is your proof of payment.

Purchaser's IP Address: 129.222.77.62

This is your official receipt for proof of payment. Please note that [Directnic.com](http://Directnic.com) is run by DNC Holdings, Inc. and that either name may appear on your credit card statement.

If you have any questions about your purchase, please contact Directnic Customer Support either by phone at [+1.504.355.0081](tel:1.504.355.0081) (Mon-Fri 013:00 to 22:00 GMT (8 am to 5 pm CST) Mon-Fri Central) or by e-mail at [support@directnic.com](mailto:support@directnic.com).

-Your Directnic Team



Click to upload a photo or [here](#) to upload a photo.

9029 Jefferson Hwy., Suite D #298  
River Ridge, LA 70123  
[+1.504.355.0081](#)



From: Lee Leonard [lleonard@mmbo.com](mailto:lleonard@mmbo.com)  
Subject: Fw: Your order from Directnic  
Date: Jan 5, 2026 at 8:06:27 AM  
To: Brent D. Hilliard [hilliard@mmbo.com](mailto:hilliard@mmbo.com)

LEE LEONARD  
Director of Service

Office: (972) 972-8876  
Email: [lleonard@hilliardos.com](mailto:lleonard@hilliardos.com)

Web: [HilliardOS.com](http://HilliardOS.com)

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**HILLIARD**  
OFFICE SOLUTIONS

150 Tawakoni Dr, Emory, TX 75440, United States

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**From:** Directnic Support <[support@directnic.com](mailto:support@directnic.com)>  
**Sent:** Sunday, December 7, 2025 8:53 PM  
**To:** HilliardIT <[hilliardit@hilliardos.com](mailto:hilliardit@hilliardos.com)>  
**Subject:** Your order from Directnic

**WARNING: EXTERNAL SENDER - Only open links and attachments from known senders**



[support@directnic.com](mailto:support@directnic.com)  
[504.355.0081](tel:504.355.0081)

Hello Brent Hilliard,  
Thank you for purchasing the following services with Directnic:

## Invoice Details

Directnic, LLC  
9029 Jefferson Hwy., Suite D #298  
River Ridge, LA 70123

### Order Info:

Invoice/Draft#: [9415216](#)  
Date/Time: 12/08/2025 02:53 am  
Payment Method: Credit Card  
\*\*\*\*\*1057 AMEX 12/2027  
Account: 505587

### Billed to:

Brent Hilliard  
Hilliard Office Solutions  
P.O. Box 52510,  
Midland, TX 79710  
+1.4326839100  
129.222.77.62

Type	Description	Quantity	Price	Subtotal
ICANN Fees	NA	5	\$0.20	\$1.00
Register .COM Domain	<a href="http://brenthilliardforcountyjudge.com">brenthilliardforcountyjudge.com</a>	5	\$14.51	\$72.57
Direct Privacy	<a href="http://brenthilliardforcountyjudge.com">brenthilliardforcountyjudge.com</a>	5	\$5.00	\$25.00

Invoice Total: \$98.57

Credit Card: -\$98.57  
Amount Due: \$0.00

Thank you! Your payment has been accepted.

Please print or save a copy of this page, as it is your proof of payment.

Purchaser's IP Address: 129.222.77.62

This is your official receipt for proof of payment. Please note that [Directnic.com](http://Directnic.com) is run by DNC Holdings, Inc. and that either name may appear on your credit card statement.

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-Your Directnic Team

ADD  
IMAGE

View larger image [here](#)

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River Ridge, LA 70123  
[+1.504.355.0081](#)



# 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	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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
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 G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)						
108	BRENT D HILLIARD							
4 Date	5 Payee name							
1-5-2026	AMAZON							
6 Amount (\$)	7 Payee address;	City: State: Zip Code						
99.23								
<input type="checkbox"/> Reimbursement from political contributions intended								
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description						
	ADVERTISING EXPENSE	NAME TAGS						
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense							
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table> <tr> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> <tr> <td>BRENT D HILLIARD</td> <td>COUNTY JUDGE</td> <td>CO. JUDGE</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held	BRENT D HILLIARD	COUNTY JUDGE	CO. JUDGE
Candidate / Officeholder name	Office sought	Office held						
BRENT D HILLIARD	COUNTY JUDGE	CO. JUDGE						
Date	Payee name							
1-8-2026	B RAINS COUNTY LEADER							
Amount (\$)	Payee address;	City: State: Zip Code						
6.00	126 PLANTERS ST.	EMORY TX 75440						
<input type="checkbox"/> Reimbursement from political contributions intended								
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description						
	ADVERTISING EXPENSE	EXTRA COPIES OF NEWSPAPER						
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense							
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table> <tr> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> <tr> <td>BRENT D HILLIARD</td> <td>COUNTY JUDGE</td> <td>CO. JUDGE</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held	BRENT D HILLIARD	COUNTY JUDGE	CO. JUDGE
Candidate / Officeholder name	Office sought	Office held						
BRENT D HILLIARD	COUNTY JUDGE	CO. JUDGE						
Date	Payee name							
1-9-2026	BUCKS LANDSCAPING, LLC							
Amount (\$)	Payee address;	City: State: Zip Code						
6,750.00	P.O. Box 594	EMORY TX 75440						
<input type="checkbox"/> Reimbursement from political contributions intended								
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description						
	ADVERTISING EXPENSE	SIGN FRAMES						
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense							
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table> <tr> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> <tr> <td>BRENT D HILLIARD</td> <td>COUNTY JUDGE</td> <td>CO. JUDGE</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held	BRENT D HILLIARD	COUNTY JUDGE	CO. JUDGE
Candidate / Officeholder name	Office sought	Office held						
BRENT D HILLIARD	COUNTY JUDGE	CO. JUDGE						

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# 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  
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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: <b>108</b>	2 FILER NAME <b>BRENT D HILLIARD</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>1-13-2026</b>	5 Payee name <b>RAINS COUNTY LEADER</b>	
6 Amount (\$) <b>1228.50</b>	7 Payee address;  <b>126 PLANTERS ST. EMORY TX 75440</b>	City; State; Zip Code
<input type="checkbox"/> Reimbursement from political contributions intended		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>ADVERTISING EXPENSE</b>	(b) Description <b>FULL + 1/2 PAGE ADS</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>BRENT D HILLIARD</b> Office sought <b>COUNTY JUDGE</b> Office held <b>Co. JUDGE</b>	
Date <b>1-14-2026</b>	Payee name <b>DEEP SOUTH COOKIE</b>	
Amount (\$) <b>850.00</b>	Payee address;  <b>1001 St. Hwy 276 EMORY TX 75440</b>	City; State; Zip Code
<input type="checkbox"/> Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	Description <b>COOKIES FOR MEET &amp; GREET</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>BRENT D. HILLIARD</b> Office sought <b>COUNTY JUDGE</b> Office held <b>Co. JUDGE</b>	
Date <b>1-15-2026</b>	Payee name <b>WALMART</b>	
Amount (\$) <b>62.81</b>	Payee address;  <b>1750 S. BROADWAY SULPHUR SPRINGS, TX 75482</b>	City; State; Zip Code
<input type="checkbox"/> Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	Description <b>REFRESHMENTS</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>BRENT D HILLIARD</b> Office sought <b>COUNTY JUDGE</b> Office held <b>Co JUDGE</b>	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

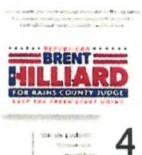
If the requested information is not applicable, **DO NOT** include this page in the report.

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
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 G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
10	BRENT D HILLIARD		
4 Date	5 Payee name	6 Amount (\$)	
11-13-2025	RAINS COUNTY REPUBLICAN PRIMARY FUND	750.00	
<input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) FEES	(b) Description FILING FEE FOR JUDICIAL CANDIDATE	
<input type="checkbox"/> (c) Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name BRENT D HILLIARD	Office sought COUNTY JUDGE	Office held Co JUDGE
Date	Payee name		
11-13-2025	COMMERCIAL BANK OF TEXAS		
Amount (\$)	Payee address; City; State; Zip Code		
<input type="checkbox"/> Reimbursement from political contributions intended		5.00 EMORY TX 75440	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) FEES	Description CASHIER CHECK BANK FEE	
<input type="checkbox"/> (c) Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name BRENT D HILLIARD	Office sought COUNTY JUDGE	Office held Co. JUDGE
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
<input type="checkbox"/> Reimbursement from political contributions intended			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
<input type="checkbox"/> (c) Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			



4

## Custom Name Tags - Full Color Log...

Sold by: [Gem Awards](#)

Return items: Eligible through February 7, 2026

\$11.99

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[Problem with order](#)

[Track package](#)

[Return items](#)

[Write a product review](#)

## Order summary

Order placed January 5, 2026

Order # 112-4848293-2605842

Item(s) Subtotal:	\$47.96
Shipping & Handling:	\$44.99
Total before tax:	\$92.95
Estimated tax to be collected:	\$6.28
<b>Grand Total:</b>	<b>\$99.23</b>

[View invoice](#)

## Payment method

Mastercard ending in 8351

[View related transactions](#)

1 Pd. DEBIT CARD

>

## Ship to

Brent Hilliard  
900 RS COUNTY ROAD 1325  
EMORY, TX 75440-5984  
United States

<b>RECEIPT</b>		No. 462332	
DATE	1/8/26		
FROM	Brent Hilliard		\$ 6 <sup>00</sup>
			DOLLARS
<input type="radio"/> FOR RENT			
<input checked="" type="radio"/> FOR	6 papers		
ACCT.		<input checked="" type="radio"/> CASH	
PAID	6 00	<input type="radio"/> CHECK	FROM _____ TO _____
DUE		<input type="radio"/> MONEY ORDER	BY _____
		<input type="radio"/> CREDIT CARD	CF
A-1152 T-4161			

# Proposal

Page # \_\_\_\_\_ of \_\_\_\_\_ pages

PROPOSAL SUBMITTED TO <i>Brent Hilliard</i>	JOB NAME	JOB #
ADDRESS	JOB LOCATION	
	DATE <i>Jan 9, 2026</i>	DATE OF PLANS
PHONE #	FAX #	ARCHITECT

We hereby submit specifications and estimates for:

*25/2" x 2" 8' x 8' sign stands.*

*25/1" x 1" 4' x 8' sign frames.*

*Paint*

*15 / Red*

*10 / Blue*

*mount signs in frames 3/4" strap & screws.*

*\* 25 total*

*270.00 each*

*\$ 6,750.00*

*#1086  
1/11/26*

We propose hereby to furnish material and labor – complete in accordance with the above specifications for the sum of:

\$ \_\_\_\_\_ Dollars

with payments to be made as follows: \_\_\_\_\_

Any alteration or deviation from above specifications involving extra costs will be executed only upon written order, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents, or delays beyond our control.

Respectfully  
submitted \_\_\_\_\_

Note — this proposal may be withdrawn by us if not accepted within \_\_\_\_\_ days.

## Acceptance of Proposal

The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payments will be made as outlined above.

Signature \_\_\_\_\_

Date of Acceptance \_\_\_\_\_

Signature \_\_\_\_\_

<b>RECEIPT</b>		No. <b>462344</b>	
DATE	1/13/26		
FROM	Brent Hillard		\$1228 <u>50</u>
Campaign fullpage color			DOLLARS
<input type="radio"/> FOR RENT		<input type="radio"/> CASH	
<input type="radio"/> FOR		<input checked="" type="radio"/> CHECK	
1/2 page B/w		<input type="radio"/> MONEY ORDER	
		<input type="radio"/> CREDIT CARD	
ACCT.		FROM	TO
PAID	1228 <u>50</u>	Check 1088	
DUE		BY	Lea

A-1152  
T-4161



Deep South Cookies  
1001 State Hwy 278  
EMORY, TX 75440 United States  
(903) 930-1162

Invoice #000048  
Issue date  
Jan 14, 2026

## Invoice #000048

We appreciate your business.

Customer  
Stacy Hillard  
(432) 362-2964  
Emory, TX 75440

Invoice Details  
PDF created January 14, 2026  
\$850.00

Payment  
Due January 14, 2026  
\$850.00

Items	Quantity	Price	Amount
Elect Brent Hillard Cookies January 2: 1 dozen [paid] January 18: 4 dozen January 26: 3 dozen February 2: 3 dozen February 9: 4 dozen February 16: 2 dozen	1	\$850.00	\$850.00
Subtotal			\$850.00
<b>Total Due</b>			<b>\$850.00</b>

I  
Pd. CASH \$100  
& VENMO \$750

Give us feedback @ [survey.walmart.com](http://survey.walmart.com)  
Thank you! ID #: 7WQKL74J481



WM Supercenter  
903-439-3144 Mgr. CRYSTAL  
1750 S BROADWAY ST  
SULPHUR SPRINGS TX 75482  
ST# 00417 OP# 009028 TE# 28 TR# 04833

# ITEMS SOLD 14  
TC# 2030 4269 8045 3669 9840



FG 25.90Z CR 025500304070 F	13.86	N
COFFEE STIR 714415824240	2.73	X
COFFEE STIR 714415824240	2.73	X
SNL_PKT 100 044800001020 F	2.67	N
CH_PKTS 015800090200 F	3.12	N
CHNT 90Z CUP 037700383450	6.58	X
CHNT 90Z CUP 037700383450	6.58	X
COFFEE MATE 050000207080 F	5.12	N
UTZ TAILGATE 041780352560 F	2.98	N
UTZ TAILGATE 041780352560 F	2.98	N
UTZ TAILGATE 041780352560 F	2.98	N
UTZ TAILGATE 041780352560 F	2.98	N
UTZ TAILGATE 041780352560 F	2.98	N

SUBTOTAL	61.27
TAX1 8.2500 %	1.54
TOTAL	62.81
CASH TEND	102.81
CHANGE DUE	40.00



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01/14/26 16:24:10

Commercial Bank of Texas, N.A.  
Emory

(936) 715-4100

Member F.D.I.C.

\*\*\* \*\*\* \*\*\* \*\*\* \*\*\* \*\*\* \*\*\* \*\*\*  
Teller#:0040 Trace#:0041-04635 PH

Current Date: 11/13/2025  
Business Date: 11/13/2025

Cash In: \$805.00  
Cash Out: \$50.00

\*\*\* \*\*\* \*\*\* \*\*\* \*\*\*  
Issued Cashiers Check  
Payee: RAINS COUNTY REPUBLICAN PRIMAR  
Y FUND  
Remitter: BRENT HILLIARD  
Serial#: 232182  
Check Amount: \$700.00

\*\*\* \*\*\* \*\*\* \*\*\* \*\*\*  
Assess Fee  
Account Number: 1XXXXXX0000  
Transaction Amount: \$5.00

All Items Credited are Subject  
to Verification and Collection

We Appreciate your business  
Thank you and Have a Great Day!

Commercial Bank of Texas, N.A.  
www.cbttxonline.com