CANDIDATE / OFFICEHOLDER FORM C/OH CAMPAIGN FINANCE REPORT 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: MR. | FIRST: John | MI: A

NICKNAME | LAST: Martinez | SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

373 Bredan Rd
Port Lavaca, Tx 77979

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION ( )

361-571-5980

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: MRS. | FIRST: Quay | MI: C.

NICKNAME | LAST: Martinez | SUFFIX

7 CAMPAIGN TREASURER ADDRESS (Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

373 Bredan Rd
Port Lavaca, Tx 77979

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

( ) 361-550-3770

9 REPORT TYPE

☐ January 1530th day ☐ before electionRunoff15th ☐ day after campaign ☐ treasurer appointment (Officeholder Only)

☑ July 158th day before election ☐ Exceeded Modified Reporting Limit ☐ Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year: 2 / 24 / 2026 THROUGH Month Day Year: 6 / 30 / 2026

11 ELECTION

ELECTION: Month Day Year: 11 / 3 / 2026

DATEELECTION TYPE: ☑ Primary ☐ Runoff ☐ General ☐ Special ☐ Other Description

12 OFFICE

OFFICE HELD (if any): Commissioner Pct. 1

13 OFFICE SOUGHT (if known): Commissioner Pct. 1

14 NOTICE FROM POLITICAL

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

OFFICE USE ONLY

Date Received

RECEIVED
JUL 14 2026
BY: M. Salinas

Date Hand-delivered or Date Postmarked

Receipt # | Amount $

Date Processed

Date Imaged

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME	John Martinez	**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)	$ 0
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 0
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	$ 0
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 0
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 0
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0

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.

John A. Martinez

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 John Martinez, and my date of birth is 4-23-62.

My address is 373 Bredan Rd (street), Port Lavaca (city), TX (state), 77979 (zip code), USA (country).

Executed in Calhoun County, State of TEXAS, on the 13 day of July (month), 2026 (year).

John A. Martinez

Signature of Candidate/Officeholder (Declarant)