

**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

FORM C/OH  
ER SHEET PG 1

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**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS**
**FORM C/OH  
COVER SHEET PG 2**

14 C/OH NAME

15 ACCOUNT # (Ethics Commission Filers)

16 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

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

 GENERAL

 SPECIFIC

 additional pages

COMMITTEE NAME

Scott Dyer for JPI

COMMITTEE ADDRESS

13850 Hwy 87 N Milam TX 75959

COMMITTEE CAMPAIGN TREASURER NAME

Daphane Dyer

COMMITTEE CAMPAIGN TREASURER ADDRESS

13850 Hwy 87 N Milam TX 75959

17 CONTRIBUTION  
TOTALS

1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 2,195.00
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2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2195.00
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3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 3,707.29
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4.	TOTAL POLITICAL EXPENDITURES	\$ 3,707.29
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5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 94.14
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CONTRIBUTION  
BALANCE

6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0
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18 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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

Sworn to and subscribed before me, by the said Scott Dyer, this the  
14 day of 01, 20 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

## 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: 1
2 FILER NAME <i>Scott Dyer</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>10/21/2025</i>	5 Full name of contributor <i>Gonzalez AC &amp; Heating</i> □ out-of-state PAC (ID#: _____)	7 Amount of contribution (\$) <i>\$500.00</i>
6 Contributor address; <i>211 Fears St Pineland TX 75968</i>		City; State; Zip Code
8 Principal occupation / Job title (See Instructions) <i>Gonzalez A/c</i>		9 Employer (See Instructions) <i>Self</i>
Date <i>11/9/25</i>	Full name of contributor <i>Mitchell &amp; Kristy Hanning</i> □ out-of-state PAC (ID#: _____)	Amount of contribution (\$) <i>\$ 500.00</i>
Contributor address; <i>386 Rebel CV Milam TX 75959</i>		City; State; Zip Code
Principal occupation / Job title (See Instructions) <i>Individual Friend</i>		Employer (See Instructions)
Date <i>11/1/25</i>	Full name of contributor <i>Mary Dyer</i> □ out-of-state PAC (ID#: _____)	Amount of contribution (\$) <i>\$195.00</i>
Contributor address; <i>PO Box</i>		City; State; Zip Code <i>Conroe TX 77305</i>
Principal occupation / Job title (See Instructions) <i>Retired</i>		Employer (See Instructions) <i>n/a</i>
Date <i>11/14/25</i>	Full name of contributor <i>James &amp; April Mills</i> □ out-of-state PAC (ID#: _____)	Amount of contribution (\$) <i>\$1000.00</i>
Contributor address; <i>PO Box 1718</i>		City; State; Zip Code <i>Hemphill TX 76948</i>
Principal occupation / Job title (See Instructions) <i>Individual Friend</i>		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.		

**POLITICAL EXPENDITURES  
MADE FROM PERSONAL FUNDS**

**SCHEDULE G**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:  1/4	2 FILER NAME  Scott Dyer	3 ACCOUNT # (Ethics Commission Filers)
4 Date  09-16-2025	5 Payee name  Traffic Boost Marketing Agency	
6 Amount (\$)  \$703.60 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code  http://trafficboostmarketing.com	
8 PURPOSE OF EXPENDITURE  Advertising Expense	(a) Category (See categories listed at the top of this schedule)  Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T)  yard signs
Date  10-01-2025	Payee name  Sabine County Reporter Newspaper	
Amount (\$)  \$200.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code  610 North St Hemphill TX 75948	
PURPOSE OF EXPENDITURE  Advertising Expense	Category (See categories listed at the top of this schedule)  Advertising Expense	Description (If travel outside of Texas, complete Schedule T)  Ad I continued listing in paper
Date  10-29-2025	Payee name  Traffic Boost Marketing Agency	
Amount (\$)  \$112.34 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code  https://trafficboostmarketing.com	
PURPOSE OF EXPENDITURE  Advertising Expense	Category (See categories listed at the top of this schedule)  Advertising Expense	Description (If travel outside of Texas, complete Schedule T)  2500 Business Cards
Date  10/29/25	Payee name  Decals.com	
Amount (\$)  \$90.03 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code  Decals.com	
PURPOSE OF EXPENDITURE  Advertising Expense	Category (See categories listed at the top of this schedule)  Advertising Expense	Description (If travel outside of Texas, complete Schedule T)  custom stickers
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**POLITICAL EXPENDITURES  
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**SCHEDULE G**
**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: <b>2/4</b>	2 FILER NAME <b>Scott Dyer</b>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <b>11-07-25</b>	5 Payee name <b>Shelby Savings Bank</b>	
6 Amount (\$) <b>\$7.50</b> <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <b>Worth St. Hemphill TX 75948</b>	
8 PURPOSE OF EXPENDITURE <b>Fees</b>	(a) Category (See categories listed at the top of this schedule) <b>Fees</b>	(b) Description (If travel outside of Texas, complete Schedule T) <b>service charge</b>
Date <b>11-06-2025</b>	Payee name <b>Traffic Boost Marketing Agency</b>	
Amount (\$) <b>\$205.66</b> <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <b>trafficboostmarketing.com</b>	
PURPOSE OF EXPENDITURE <b>Advertising Expense</b>	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description (If travel outside of Texas, complete Schedule T) <b>truck magnet signs</b>
Date <b>12-01-2025</b>	Payee name <b>Crowell Advertising</b>	
Amount (\$) <b>\$900.00</b> <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <b>PO Box 1299 Hemphill TX 75948</b>	
PURPOSE OF EXPENDITURE <b>Advertising Fee</b>	Category (See categories listed at the top of this schedule) <b>Advertising Fee</b>	Description (If travel outside of Texas, complete Schedule T) <b>Billboard Rental</b>
Date <b>12-06-25</b>	Payee name <b>Shelby Savings Bank</b>	
Amount (\$) <b>\$7.50</b> <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <b>Worth St. Hemphill TX 75948</b>	
PURPOSE OF EXPENDITURE <b>Fees</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>	Description (If travel outside of Texas, complete Schedule T) <b>service charge</b>
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**POLITICAL EXPENDITURES  
MADE FROM PERSONAL FUNDS**

**SCHEDULE G**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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1 Total pages Schedule G:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
3/4	Scott Dyer	
4 Date	5 Payee name.	
12-17-2025	Sabine County Newspaper	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$ 191.75 <input type="checkbox"/> Reimbursement from political contributions intended	610 Worth St Hemphill TX 75948	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T.)
	Advertising Expense	Display Ad (14 ft ps)
Date	Payee name	
01-03-2026	2 Hour Banners	
Amount (\$)	Payee address; City; State; Zip Code	
\$ 415.68 <input type="checkbox"/> Reimbursement from political contributions intended	11600 Cypress North Houston Rd Cypress TX 77429	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Advertising Expense	Custom Banners
Date	Payee name	
01-07-26	Shelby Savings Bank	
Amount (\$)	Payee address; City; State; Zip Code	
\$ 7.50 <input type="checkbox"/> Reimbursement from political contributions intended	Worth St Hemphill TX 75948	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Fees	Service Charge
Date	Payee name	
01-11-2026	Tractor Supply	
Amount (\$)	Payee address; City; State; Zip Code	
\$ 84.86 <input type="checkbox"/> Reimbursement from political contributions intended	Sabine St Hemphill TX 75948	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Advertising Expense	T Posts for Banners
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Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

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1 Total pages Schedule G:	2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)
4 / 4	Scott Dyer		
4 Date	5 Payee name Traffic Boost Marketing Agency		
6 Amount (\$) <b>\$ 677.83</b>	7 Payee address; City; State; Zip Code trafficboostmarketing.com		
<input type="checkbox"/> Reimbursement from political contributions intended			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) 100 yardsigns / vinyl stickers	
Date 12/06/25	Payee name Ritter Lumber		
Amount (\$) <b>\$ 53.02</b>	Payee address; City; State; Zip Code Sabine St Hemphill TX 75948		
<input type="checkbox"/> Reimbursement from political contributions intended			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) parade equip	
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 (If travel outside of Texas, complete Schedule T)	
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 (If travel outside of Texas, complete Schedule T)	
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