CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains ho	w to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	Ms/MRs/MR Mr.	FIRST Matthew	MI W.	OFFICE USE ONLY
	NICKNAME	Regan	SUFFIX	Date Received RECEIVED AT G o'clock
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BO 1030 Mary	ox; APT / SUITE #; Street Quinlan, To	JAN 11 2024 JEANNIE ASH Elections Administrator, Hunt County, TX	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (903)	PHONE NUMBER 217-9999	EXTENSION	Date Hand of Date Postmarked
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr. NICKNAME	Steven	MI W. SUFFIX	Date Invessed
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)		Yeager (NO PO BOX PLEASE); APT Ore Drive Greenvi	•	STATE
8 CAMPAIGN TREASURER PHONE	(903)	PHONE NUMBER 217-8500	EXTENSION	
9 REPORT TYPE	January 15	30th day before	r -	15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month 10	Day Year / 5 / 23	THROUGH 12	Day Year / 31 / 23
11 ELECTION	ELECTION D Month Day 11 / 7	Year Primar	Description	
12 OFFICE	OFFICE HELD (if any	LE PRECINCT	13 OFFICE SOUGHT (If known)	
14 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE ! OFFI	JENULUER. JAESE EKPENNITUR	NS ACCEPTED OR POLITICAL EXPENDITURES MARES MAY HAVE BEEN MADE WITHOUT THE CAND WITHOUT THE CAND WILLIAM TO REPORT THIS INFORMATION ONLY IF THE CAND WILLIAM TO REPORT THIS INFORMATION ONLY IF THE CAND WILLIAM TO REPORT THIS INFORMATION ONLY IF THE CAND WILLIAM THE CAND WILLIAM THE CAND	ADE BY POLITICAL COMMITTEES TO SUPPORT
Additional Pages	GENERAL SPECIFIC	COMMITTEE ADDRESS COMMITTEE CAMPAIGN TF	REASURER NAME	
	SPECIFIC	COMMITTEE CAMPAIGN TO		
		GO TO	PAGE 2	

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Matthew Regan			16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS		TICAL CONTRIBUTIONS (OTHER THA JARANTEES OF LOANS, OR ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CON' (OTHER THAN PLEDGES, I	TRIBUTIONS LOANS, OR GUARANTEES OF LOANS	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLIT	FICAL EXPENDITURE.	\$	0.00
	4. TOTAL POLITICAL EXPE	NDITURES	\$	375.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRI OF REPORTING PERIOD	BUTIONS MAINTAINED AS OF THE LA	AST DAY \$	25.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUN LAST DAY OF THE REPOR	T OF ALL OUTSTANDING LOANS AS (TING PERIOD	OF THE \$	400.00
(1) Affidavit	KATELYNN NICHOLE KNEIFL	Signature of C	andidate or Off	iceholder
NOTARY STAMP/S ALL Sworn to and subscribed to 20 24 , to certify to	Notary ID 134649102 Defore me by	Regan this the		of San.
Signature of officer administeri		officer administering oath		of officer administering oath
心里不是是而他是在		OR	S WOMEN	
(2) Unsworn Declaratio	n			
My name is		and my date of hirth is		
	(street)	(oity)	state) (zip co	de) (country)
Executed in	County, State of	, on the day of (month	, 20	year)
		Signature of Candid	date/Officeholde	r (Declarant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

	FILER NAME atthew Regan	mmissi	on Filers)
	SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	SCHEDULE E: LOANS	\$	400.00
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$	375.00
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	Herein.
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$	
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
1.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$	
2,	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		

LOANS

SCHEDULE E

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

The	e Instruction Guide explains how to comp	plete this form.	1 Total pages Schedule E:	
2 FILER NAME	747	3 Filer ID (Ethics Commission Filers)		
Matthew Reg	gan	3 FIRST ID (Editor Continuesion Filets)		
4 TOTAL OF U	NITEMIZED LOANS		\$ 400.00	
5 Date of loan	7 Name of lender	PAC (ID#:)	9 Loan Amount (\$)	
11/09/2023	Matthew Regan	,	400.00	
6 Is lender a financial	8 Lender address; City;	State; Zip Code	10 Interest rate	
Institution?	1030 Mary Street Quinlan, Tex	as,75474	0.00	
YIN			11 Maturity date	
12 Principal occupate Constable Pr	ion / Job title (See Instructions) ecinct 4	13 Employer (See Instructions)	dk'-	
14 Description of Col	lateral	15		
■ none		Check if personal fun account (See Instruct	ds were deposited into political tions)	
16 GUARANTOR INFORMATION	17 Name of guarantor		19 Amount Guaranteed (\$)	
	18 Guarantor address; City;	State; Zip Code		
 not applicable 	,			
20 Principal Occupa	tion (See Instructions)	21 Employer (See Instructions)		
Date of loan	Name of lender out-of-state i	PAC (ID#:)	Loan Amount (\$)	
Is lender a financial Institution?	Lender address; City;	State; Zip Code	Interest rate	
I Y I N			Maturity date	
Principal occupation	on / Job title (See Instructions)	Employer (See Instructions)		
Description of Colla	ateral	Check if personal fund	s were deposited into political	
none		account (See Instructi	ons)	
GUARANTOR INFORMATION	Name of guarantor		Amount Guaranteed (\$)	
	Guarantor address; City;	State; Zip Code		
not applicable				
Principal Occupation	on (See Instructions)	Employer (See Instructions)		
If ler	ATTACH ADDITIONAL COPIE	ES OF THIS SCHEDULE AS NEED	DED	
	nder is out-of-state PAC, please see Inst	incubit dring for additional rep	orting requirements.	

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

		EXPENDI	TURE CATE	GORIES	FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	iy al Committee	Event Expense Fees Food/Beverage Exp Gift/Awards/Memor Legal Services The Instruction	rials Expense	Office Ove Polling Exp Printing Ex Salaries/W		Transport Travel In Travel Ou	District ut Of District	ment & Related Expense
1 Total pages Schedule F1:	2 FILER N		T GUING ORPLING	9 HVW 12 C	Ombiete rine 1011111	3 Filer	ID /Fthics	Commission Filers)
		EW REGAN				J	10 (Commission i norsy
4 Date 11/11/2023	5 Payee na REPUBI	ame LICAN PAR	TY OF HU	NT CO	UNTY			
6 Amount (\$)	7 Payee ac	•			City;		State;	Zip Code
375.00	2606 LE	E STREET	GREENV	/ILLE T	EXAS 75402			
8		y (See Calegories liste	ed at the top of this s	schedule)	(b) Description			
PURPOSE OF EXPENDITURE	FEES				FILING FEE			
	(c)	Check if travel outside of	f Texas. Complete Sci	hedule T.	Check if Aust	tin, TX, officeh	nolder living e	expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		late / Officeholder HEW REGAN		C	Office sought	CT 4		Office held TABLE PCT 4
Date	Payee na	me						
Amount (\$)	Payee ad	dress;			City;	S	State;	Zip Code
PURPOSE OF EXPENDITURE	Category	(See Categories listed	at the top of this sol	hedule)	Description			
		Check if travel outside of	Texas, Complete Sch	nedule T.	Check if Austin	n, TX, officeho	older living e	xpense
Complete ONLY if direct expenditure to benefit C/OH	Candida	ate / Officeholder r	name		Office sought		0	office held
Date	Payee nai	me						
Amount (\$)	Payee add	iress;			City;	S	tate;	Zip Code
PURPOSE OF EXPENDITURE	Category ((See Categories listed a	at the lop of this scho	edule)	Description			
	c	Check if travel outside of Te	exas. Complete Sche	adule T.	Check If Austin	, TX, officeho	lder living ex	ponse

Complete ONLY if direct

expenditure to benefit C/OH

Office sought

Candidate / Officeholder name

Office held

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Matthew Regan			16	Filer ID (Ethics	Commission Filers)
17 CONTRIBUTION TOTALS	PLEDGES, LOANS,	POLITICAL CONTRIBUTIONS (OTHER OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY)	THAN	\$	0.00
Hatte ook two ook rood	2. TOTAL POLITICAL (OTHER THAN PLED	CONTRIBUTIONS GES, LOANS, OR GUARANTEES OF LO	DANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURE.		\$	0.00
	4. TOTAL POLITICAL	TOTAL POLITICAL EXPENDITURES			
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CO	ONTRIBUTIONS MAINTAINED AS OF TH	E LAST DA	Y \$	25.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AI LAST DAY OF THE R	MOUNT OF ALL OUTSTANDING LOANS EPORTING PERIOD	AS OF THE	\$	400.00
		Simpature	-		
		Signature o	of Candidat	e or Officeholo	ier
	Please	complete either option be	low:		
		e e e e e e e e e e e e e e e e e e e	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
(1) Affidavit					
NOTARY STAMP/SEAL					
Sworn to and subscribed b	efore me by	this	the	day of	
	hich, witness my hand and seal of			,	,
Signature of officer administering	g oath Printed na	me of officer administering oath		Title of office	r administering oath
		OR			
(2) Unsworn Declaration	1				
My name is		, and my date of birt	h is		
My address is				,	
	(street)	(city)	(state)	(zip code)	(country)
Executed in	County, State of	, on the day of (m	onth)	, 20 (year)	
		Signature of Ca			

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

	FILER NAME 20 Filer ID (Ethics Cor	mmission Filers)		
Ma	atthew Regan			
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT		
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$		
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$		
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$		
4.	SCHEDULE E: LOANS	\$ 400.00		
5.	5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS			
6.	6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS			
7.	7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS			
8.	8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD			
9.	9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS			
10.	10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH			
11.	11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS			
12.	2. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER			
	Land the second			

LOANS

SCHEDULE E

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

. The	e Instruction Guide explains how to com	plete this form.	1 Total pages Schedule E:
² FILER NAME Matthew Reg	gan		3 Filer ID (Ethics Commission Filers
4 TOTAL OF U	NITEMIZED LOANS		\$ 400.00
5 Date of loan 11/09/2023	7 Name of lender out-of-state Matthew Regan	9 Loan Amount (\$) 400.00	
6 Is lender a financial Institution?	8 Lender address; City; 1030 Mary Street Quinlan, Tex	State; Zip Code Xas,75474	10 Interest rate 0.00 11 Maturity date
^{12 Principal occupati} Constable Pr	ion / Job title (See Instructions)	13 Employer (See Instructions)	
14 Description of Col	lateral	Check if personal fur account (See Instruc	nds were deposited into political
16 GUARANTOR INFORMATION	17 Name of guarantor		19 Amount Guaranteed (\$)
■ not applicable	18 Guarantor address; City;	State; Zip Code	
0 Principal Occupat	tion (See Instructions)	21 Employer (See Instructions)	
Date of loan	Name of lender	PAC (ID#:)	Loan Amount (\$)
ls lender a financial Institution?	Lender address; City;	State; Zip Code	Interest rate
YN			Maturity date
Principal occupation	on / Job title (See Instructions)	Employer (See Instructions)	
Description of Colla	ateral	Check if personal fund account (See Instruct	ds were deposited into political ions)
GUARANTOR INFORMATION	Name of guarantor		Amount Guaranteed (\$)
	Guarantor address; City;	State; Zip Code	
not applicable			

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)

Gredit Oald Fayment	The Instruction Guide explains how t	o complete this form.	,
1 Total pages Schedule F1	2 FILER NAME MATTHEW REGAN		3 Filler ID (Ethics Commission Filers)
4 Date 11/11/2023	5 Payee name		
6 Amount (\$)	REPUBLICAN PARTY OF HUNT C		
	7 Payee address;	City;	State; Zip Code
375.00	2606 LEE STREET GREENVILLE	TEXAS 75402	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	FEES	FILING FEE	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin	, TX, officeholder living expense
9 Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OF	MATTHEW REGAN	CONSTABLE PO	CT 4 CONSTABLE PCT 4
Date	Payee name		
Amount (\$)	Payee address;	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE			
	Check if travel outside of Texas. Complete Schedule T.	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	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, 7	TX, officeholder fiving 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 NEED!	ED