CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1
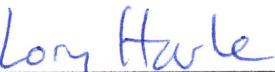
The C/OH Instruction Guide explains how to complete this form.	**1** Filer ID	**2** Total pages filed: 4

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR	FIRST Jay	MI
NICKNAME	LAST Miller	SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ Change of Address

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

P.O. Box 234

Gilmer, TX 75644

5 CAMPAIGN TREASURER NAME

MS / MRS / MR	FIRST Kimberly	MI
NICKNAME	LAST Miller	SUFFIX

6 CAMPAIGN TREASURER ADDRESS

(Residence or Business)

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

1617 Machen Lane

Gilmer, TX 75644

7 CAMPAIGN TREASURER PHONE

AREA CODE   PHONE NUMBER   EXTENSION

(903) 530-8160

8 REPORT TYPE

☐ January 15   ☒ 30th day before election   ☐ Runoff   ☐ 15th day after campaign treasurer appointment (officeholder only)

☐ July 15   ☐ 8th day before election   ☐ Exceeded modified reporting limit   ☐ Final Report (Attach C/OH-FR)

9 PERIOD COVERED

Month   Day   Year
01/01/2026   THROUGH   Month   Day   Year   01/22/2026

10 ELECTION

ELECTION DATE
Month   Day   Year
03/03/2026

ELECTION TYPE
☒ Primary   ☐ Runoff   ☐ Other
☐ General   ☐ Special

11 OFFICE

OFFICE HELD (if any)
Upshur County Commissioner Precinct 4

12 OFFICE SOUGHT (if known)
Upshur County Commissioner Precinct 4

GO TO PAGE 2

13 C / OH NAME	Miller, Jay	**14** Filer ID

15 NOTICE FROM POLITICAL COMMITTEE(S)

[ ] 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	COMMITTEE NAME
[ ] GENERAL	
	COMMITTEE ADDRESS
[ ] SPECIFIC	
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	$	0.00
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$	0.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURES	$	0.00
	4.	**TOTAL POLITICAL EXPENDITURES**	$	7,243.51
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	$	0.00
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$	0.00

17 AFFIDAVIT

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.
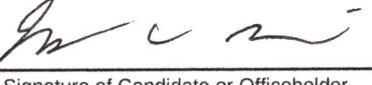
_____
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said ___Jay Miller___ , this the ___30th___ day of ___January___ , 20_26_ , to certify which, witness my hand and seal of office.

_____	_____	_____
Signature of officer administering	Lony Hovle Printed name of officer administering	EA Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME	**19** Filer ID
Miller, Jay	

20 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		$
5. ☐ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		$
6. ☐ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		$
7. ☐ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS		$
8. ☐ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		$
9. ☒ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		$ 7,243.51
10. ☐ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		$
11. ☐ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		$
12. ☐ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		$

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE **G**

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: Sch: 1/1 Rpt: 4/4	2 FILER NAME Miller, Jay	3 Filer ID

4 Date 01/17/2026	5 Payee name CWJ Strategies

6 Amount ($) $6,502.37 ☐ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 314 S Broadway Ave. Tyler, TX 75702

8 **PURPOSE OF EXPENDITURE**	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Consulting & Marketing Services, Video Production, Digital Ad Campaign, Survey Campaign, Text Campaign

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date 01/12/2026	Payee name Country Mailer Longview

Amount ($) $691.14 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code 122 Shady Grove St. Big Sandy, TX 75755

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Mail Services & Postage

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date 01/12/2026	Payee name Medshop Longview

Amount ($) $50.00 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code 472 E Loop 281 Longview, TX 75605

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Print Work

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held