

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: 7				
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST James	MI G	OFFICE USE ONLY Date Received JAN 11 2023 			
	NICKNAME Glenn	LAST Harwood	SUFFIX				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 306 W Wall St, Suite 415 Midland, TX 79701		ZIP CODE	Date Hand-delivered or Date Postmarked			
			Receipt #	Amount			
			Date Processed				
			Date Imaged				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Lowell	MI S.				
	NICKNAME Shane	LAST Stokes	SUFFIX				
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 300 N. Marienfeld, Suite 700		APT / SUITE #;	CITY; Midland	STATE; TX	ZIP CODE 79701	
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(432)	683-3351					
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)						
9 PERIOD COVERED	Month	Day	Year	THROUGH	Month	Day	Year
	07	01	2022		12	31	2022
10 ELECTION	ELECTION DATE Month Day Year 03/05/2024		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special				
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT (if known) District Attorney			

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**

2 of 7

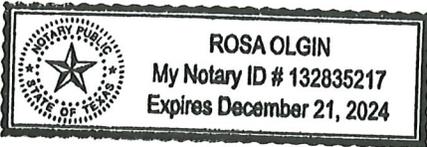
13 C / OH NAME Harwood, James	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE COMMITTEE NAME
		COMMITTEE ADDRESS
		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)	\$	43,850.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	600.30
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 Rosa Olgin, this the 10th day of January, 2023, to certify which, witness my hand and seal of office.



 Signature of officer administering

Rosa Olgin

 Printed name of officer administering

Notary public

 Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Harwood, James	19 Filer ID
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20 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 43,850.00
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 checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 600.30
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/3 Rpt: 4/7
2 FILER NAME Harwood, James		3 Filer ID
4 Date 11/15/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Mary (Mrs.) ----- 6 Contributor address; City; State; Zip Code 2101 Cedar Springs Road, Ste 1900 Dallas, TX 75201	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Deans Stepp LLP
Date 10/09/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergman, Matthew (Mr.) ----- Contributor address; City; State; Zip Code 5003 Hilltop Midland, TX 79707	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Oil Executive		Employer (See Instructions) Self-Employed
Date 08/18/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyt, Eric (Mr.) ----- Contributor address; City; State; Zip Code 601 W Texas Ave Midland, TX 79701	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Oil Executive		Employer (See Instructions) Self-Employed
Date 09/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Derek (Mr.) ----- Contributor address; City; State; Zip Code 300 N Marienfeld St, Ste 700 Midland, TX 79701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Lynch Chappel & Alsup
Date 11/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowden, Linda (Ms.) ----- Contributor address; City; State; Zip Code 5 Lakes Drive Midland, TX 79705	Amount of Contribution (\$) \$15,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/3 Rpt: 5/7
2 FILER NAME Harwood, James		3 Filer ID
4 Date 07/29/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldsmith, Grant (Mr.) <hr/> 6 Contributor address; City; State; Zip Code 2180 Andover Way Mount Pleasant, SC 29466	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Insurance Executive		9 Employer (See Instructions) Roanoke Insurance Group
Date 07/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harwood, Glenn (Mr.) <hr/> Contributor address; City; State; Zip Code 306 W Wall St Suite 415 Midland, TX 79701	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed
Date 07/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Raymond (Mr.) <hr/> Contributor address; City; State; Zip Code 117 Lyndon St Hermosa Beach, CA 90254	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) City of Hermosa Beach
Date 09/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scharbauer, John (Mr.) <hr/> Contributor address; City; State; Zip Code 1108 Washita Midland, TX 79705	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Rancher		Employer (See Instructions) Self-Employed
Date 08/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stokes, Shane and Kim <hr/> Contributor address; City; State; Zip Code TX	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Lynch Chappel & Alsup

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/3 Rpt: 6/7
2 FILER NAME Harwood, James		3 Filer ID
4 Date 08/31/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swallow, Jack and Julia 6 Contributor address; City; State; Zip Code 1307 W Texas Ave Midland, TX 79701	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Oil Executive		9 Employer (See Instructions) Self-Employed
Date 12/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Denzil and Kathy Contributor address; City; State; Zip Code 400 W Illinois Ave, Suite 970 Midland, TX 79701	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Chief Executive Officer		Employer (See Instructions) Admiral Permian Resources

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 F1: Sch: 1/1 Rpt: 7/7	2 FILER NAME Harwood, James	3 Filer ID						
4 Date 11/15/2022	5 Payee name Anedot, Inc.							
6 Amount (\$) \$600.30	7 Payee address; City; State; Zip Code 1340 Poydras St. Suite 1770 New Orleans, LA 70112							
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Commission Fees for processing contributions electronically						
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH								
<table border="0" style="width:100%"> <tr> <td style="width:40%">Candidate/Officeholder name</td> <td style="width:30%">Office sought</td> <td style="width:30%">Office held</td> </tr> <tr> <td style="height:500px"></td> <td></td> <td></td> </tr> </table>			Candidate/Officeholder name	Office sought	Office held			
Candidate/Officeholder name	Office sought	Office held						