

# 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 (Ethics Commission Filers)	2 Total pages filed:		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS <input checked="" type="checkbox"/> MR	FIRST <i>B</i>	MI <i>KENT</i>	OFFICE USE ONLY		
	NICKNAME	LAST <i>Cooper</i>	SUFFIX	Date Received <i>FILED</i> JAN 15 2026		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #: CITY; STATE; ZIP CODE <i>1805 Friway Ln N Mt. Pleasant Tx 75455</i>			TITUS COUNTY ELECTIONS ADMINISTRATOR DATE RECEIVED: JAN 15 2026		
<input type="checkbox"/> Change of Address						
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE <i>(903)</i>	PHONE NUMBER <i>593 - 1505</i>	EXTENSION	Receipt #   Amount \$		
6 CAMPAIN TREASURER NAME	MS / MRS <input checked="" type="checkbox"/> MR	FIRST <i>KENT</i>	MI	Date Processed		
	NICKNAME	LAST <i>Cooper</i>	SUFFIX	Date Imaged		
7 CAMPAIN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: CITY; STATE; ZIP CODE <i>1805 Friway Lane N Mt. Pleasant Tx 75455</i>					
8 CAMPAIN TREASURER PHONE	AREA CODE <i>(903)</i>	PHONE NUMBER <i>593 - 1505</i>	EXTENSION			
9 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)					
10 PERIOD COVERED	Month <i>07</i>	Day <i>01</i>	Year <i>2025</i>	Month <i>01</i>	Day <i>15</i>	Year <i>2026</i>
11 ELECTION	ELECTION DATE Month <i>03</i> Day <i>03</i> Year <i>2026</i>	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special				
12 OFFICE	OFFICE HELD (if any) <i>County Judge</i>	13 OFFICE SOUGHT (if known) <i>County Judge</i>				
14 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.					
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS				
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRESS				

GO TO PAGE 2

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<p>The Instruction Guide explains how to complete this form.</p>				1 Total pages Schedule A1:
<p>2 FILER NAME</p> <p><b>KENT Cooper</b></p>				3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	<input type="checkbox"/> out-of-state PAC (ID#: <p><b>01/01/20</b> <b>David Mabie</b></p>		
	6 Contributor address;	City;	State;	Zip Code
				<b>MT. Pleasant Tx 75455</b>
7 Amount of contribution (\$)	<b>5000.00</b>			
<p>8 Principal occupation / Job title (See Instructions)</p> <p><b>Retired</b></p>			<p>9 Employer (See Instructions)</p> <p><b>Self Employer</b></p>	
Date	Full name of contributor	<input type="checkbox"/> out-of-state PAC (ID#: <p><b>01/01/20</b> <b>Jimmy McCloud</b></p>		
	Contributor address;	City;	State;	Zip Code
				<b>MT. Pleasant Tx 75455</b>
Amount of contribution (\$)	<b>1000.00</b>			
<p>Principal occupation / Job title (See Instructions)</p> <p><b>Owner Longhorns Tractor</b></p>			<p>Employer (See Instructions)</p> <p><b>Self Employer</b></p>	
Date	Full name of contributor	<input type="checkbox"/> out-of-state PAC (ID#: <p><b>01/01/20</b> <b>William Hogan</b></p>		
	Contributor address;	City;	State;	Zip Code
				<b>Sherwood AR 72120</b>
Amount of contribution (\$)	<b>1000.00</b>			
<p>Principal occupation / Job title (See Instructions)</p> <p><b>Retired</b></p>			<p>Employer (See Instructions)</p> <p><b>Self Employer</b></p>	
Date	Full name of contributor	<input type="checkbox"/> out-of-state PAC (ID#: 		
	Contributor address;	City;	State;	Zip Code
Amount of contribution (\$)				
<p>Principal occupation / Job title (See Instructions)</p>			<p>Employer (See Instructions)</p>	
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>				

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME	16 Filer ID (Ethics Commission Filers)	
KENT Cooper		
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)	\$ 7000 00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 313 36
	4. TOTAL POLITICAL EXPENDITURES	\$ 7400 01
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 0
	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0
OUTSTANDING LOAN TOTALS		

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.



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 KENT Cooper, and my date of birth is 05/09/1968.  
My address is 1005 Fairway Lane, MT. Pleasant TX 75456 USA.  
(street) (city) (state) (zip code) (country)

Executed in Titus County, State of Texas, on the 15 day of May, 20 26.



Signature of Candidate/Officeholder (Declarant)

**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3**

<b>19</b> FILER NAME	<b>20</b> Filer ID (Ethics Commission Filers)	
<i>KENT Cooper</i>		
<b>21</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT	
1. <input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	<i>0</i>
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	<i>0</i>
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	<i>0</i>
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$	<i>0</i>
5. <input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$	<i>7000</i>
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	<i>0</i>
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$	<i>0</i>
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	<i>0</i>
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$	<i>0 47761</i>
10. <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	<i>0</i>
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$	<i>0</i>
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	<i>0</i>