

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

1 Filer ID (Ethics Commission Filers) 2 Total pages filed:

The C/OH Instruction Guide explains how to complete this form.

3 CANDIDATE /
OFFICEHOLDER
NAME

MR

MI

OFFICE USE ONLY

D

Date Received

FIRST NAME

LAST

SUFFIX

19-18-19
7-19
7-5-

OFFICEHOLDER
MAILING
ADDRESS

2110

E. 1st

ELECTION TYPE

Runoff

Other
Description

Special

MONETARY POLITICAL CONTR BUT ONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME JASON D WN

3 Filer ID (Ethics Commission Filers)

4 Date for [] te (ID) Hal St

7 Amount of contribution (\$)

00

2614 Cockrell Fw TX 76109

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date Full name of contributor [] out-of-state PAC (ID#: _____)

Amount of contribution (\$)

5.2.17 t h Br 3116 ish Oak Dr Fw Tx 76110

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor [] out-of-state PAC (ID#: _____)

Amount of contribution (\$)

5.3.17 Bill & Toni Boecker Contributor address; City; State; Zip Code 200 Rivercrest Dr. Fw Tx 761

00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date ontributor stat)

Amount of contribution (\$)

5.6.17 G t Che Contributor address; 5107 Collinwood Fw Tx 76107

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

2
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4 TOTAL OF UNITEMIZED LOANS

\$

5 Date of loan 7 Name of lender out-of-state PAC

9 Loan Amount (\$)

6 Is lender a financial institution? 8 Lender address; City; State; Zip Code

10 Interest rate

Y N

11 Maturity date

12 13 Employer (See Instructions)

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14 Description of Collateral

15 Check if personal funds were deposited into political

none

16 17 Name of guarantor

19 Amount Guaranteed (\$)

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

(a) Category (See Categories listed at the top of this schedule)

(b) Description

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1 2 FILER NAME

3 Filer ID (Ethics Commission Filers)

4 Date

5.3.17

5

MAILER

Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct

10 Expenditure to benefit C/OH

8

PURPOSE OF EXPENDITURE

Marketing

Candidate / Officeholder name

Office sought

Office held

Date

5.3.17

Payee name

IS PALMER

1,383.71

5719 E. Rosemeade

Ge 809 FW TX 76112

Category (See categories listed at the top of this schedule)

Description

Check if travel outside of Texas. Complete Schedule T.

Check If Austin, TX, officeholder living expense

