CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Gu	DE explains how to complete this form.	1 ACCOUNT# (Ethics Commission filers) 00000001	2 PAGE# 1 of 23
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRST James L.	MI	OFFICE USE ONLY
NAME	NICKNAME LAST Noack	SUFFIX Jr.	Date Receiver ELECTOR RECEIVED
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; 2 Dancing Breeze Pl The Woodlands, TX 77382	CITY; STATE; ZIP CODE	Path Sang-delivered/gr.Pate Postman
Change of Address			27 pags
E CAMBAICN	MS / MRS / MR FIRST	MI	Receipt # Amount
5 CAMPAIGN TREASURER NAME	Mr. Billy R.	1911	Date Processed Date Imaged MM 1/16/65
IVAIVIE	NICKNAME LAST Smith	SUFFIX	Date Imaged MM 116/15
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	street address (NO PO BOX PLEASE); APT / SUI 28803 Champions Ridge Rd Magnolia, TX 77354	TE#, CITY; STATE;	ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (281) 252-8727	EXTENSION	
8 REPORT TYPE	X January 15 30th day before elec	tion Runoff	15th day after campaign treasurer appointment (officeholder only)
	July 15 Sth day before election	Exceeded \$500 limit	Final report (Attach C/OH - FR)
9 PERIOD COVERED	Month Day Year	Month Day	Year
	07/01/2014	и дн 12/31/20 ⁻	14
10 ELECTION	ELECTION DATE ELECTION TY Month Day Year Primar		General Special
11 OFFICE	OFFICE HELD (if any) Montgomery Co Commissioner P-3	12 OFFICE SOUGHT (if known)	
GO TO PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET BG 2

SUFFURIA	IOIALS		COVER	C SHEEL PG Z
13 C/OH NAME Noac	k, James L. Jr. (Mr)	14 ACCOUNT # 00000001	(Ethics Commission filers)
15 NOTICE FROM	have been made with	tice of political expenditures by political committees to support the ca rout the candidate's or officeholder's knowledge or consent. Candida by receive notice of such expenditures		
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME			
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS		
16 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	22,725.00
EXPENDITURE TOTALS	3. TOTAL F	POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZE	\$	2,645.29
	4. TOTAL POLITICAL EXPENDITURES \$ 21			
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LY OF THE REPORTING PERIOD	\$	98,482.69
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LY OF THE REPORTING PERIOD	\$	0.00
17 AFFIDAVIT				
		I swear, or affirm, under penalty is true and correct and includes me under Title 15, Election Cod	all information requ	
DEBORAH ARRAZATE Notary Public, State of Texas My Commission Expires Sentember 17, 2018				
Signature of Candidate or Officeholder				
AFFIX NOTARY STAMP / SEAL ABOVE				
Sworn to and subscribed before me, by the said <u>James Noack</u> , this the <u>13</u> day				
on January, 20 5 , to certify which, witness my hand and seal of office.				
Signature of officer administering oath Print name of officer administering oath Title of officer administering oath				

The Instructi	ON GUIDE explains how to complet	te this form.		1 PAGE# Schedule: 1/7	7 Report: 3/23
2 FILER NAME	Noack, James L. Jr. (Mr.)			3 ACCOUNT# 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor Dalmos, David C.	out-of-state PAC (ID#	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
11/11/2014	6 Contributor address; City 13623 Waverly Crest Ct Cypress, TX 77429-6830	r; State; Zip Code		\$2,500.00	
				(If travel outside of	Texas, complete Schedule T)
9 Principal occur	pation / Job title (See Instructions)		10 Employer (See In	structions)	
Date .	Full name of contributor Buscha, Timothy E.	out-of-state PAC (ID#	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
12/02/2014	Contributor address; City 12714 New Kentucky Rd Cypress, TX 77429	; State; Zip Code		\$500.00	! !
				(If travel outside of	Texas, complete Schedule T)
B 1	the file (Contrations)		Fundamen (Cas In	'	Texas, complete scriedule 1)
Principal occup	pation / Job title (See Instructions)		Employer (See In:	structions)	
Date	Full name of contributor Cantwell, Dane L.	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
11/25/2014	Contributor address; City 142 N Shawnee Ridge Cir Spring, TX 77382-2558	; State; Zip Code		\$250.00	
				(If travel outside of	Texas, complete Schedule T)
Principal occur	Loation / Job title (See Instructions)		Employer (See Ins		, <u> </u>
				,	
Date	Full name of contributor Collins, Jeff	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
12/01/2014	Contributor address; City 13510 Cahill Ln Cypress, TX 77429-5148	; State; Zip Code		\$500.00 	
				(If travel outside of	Texas, complete Schedule T)
Principal occup	nation / Job title (See Instructions)		Employer (See Ins	structions)	
Date	Full name of contributor Fowlkes, William J.	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
12/03/2014	Contributor address; City, 263 Tortoise Creek Pl Spring, TX 77389-4336	; State; Zip Code		\$500.00 	
	1			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)		Employer (See Ins	structions)	······

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 2/2	7 Report: 4/23
2 FILER NAME	Noack, James L. Jr. (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Friends of Brandon Creighton	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
11/24/2014	6 Contributor address; City; State; Zip Code 2257 N Loop 336 Ste 140 Conroe, TX 77304-3566		\$250.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/24/2014	Contributor address; City; State; Zip Code 1301 McKinney Suite 5100 Houston, TX 77010		\$500.00	 -
	Trousion, TX 77010		(If travel outside of	I Texas, complete Schedule T) ☐
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
11/24/2014	Contributor address; City; State; Zip Code 7703 Breezeway Bend Lane Katy, TX 77494		\$1,000.00	
	,		(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In:	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/27/2014	Contributor address; City; State; Zip Code 55 Chancery Pl The Woodlands, TX 77381-6438		\$250.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In:	structions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/15/2014	Contributor address; City; State; Zip Code 6915 Alderney Dr Houston, TX 77055-7638		\$500.00	
	11000011, 17/1/00/1/00		(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In:	structions)	

	The Instruction	אס Guide explains how to complete thi	s form.		1 PAGE# Schedule: 3/	7 Report: 5/23
2	FILER NAME	Noack, James L. Jr. (Mr.)			3 ACCOUNT# 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out- Joskowicz, Isaac	of-state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/30/2014	6 Contributor address; City; Si 1803 Talcott Ln Sugarland, TX 77479	tate; Zip Code		\$1,000.00	 - -
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)		10 Employer (See In	structions)	
	Date	Full name of contributor	of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/31/2014	Contributor address; City; Si 7130 Blenheim Palace Ln Houston, TX 77095	ate; Zip Code		\$250.00	!
					/// /	T
_				- · · · · · · ·		Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)		Employer (See In:	structions)	
	Date	Full name of contributor	of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/30/2014	Contributor address; City; Si 94 Heathrow Lane Sugarland, TX 77479	ate; Zip Code		\$250.00	1
					<u> </u>	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)		Employer (See In	structions)	
	Date	Full name of contributor	of-state PAC (ID#_)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/01/2014	Contributor address; City; St 4903 Candletree Dr Houston, TX 77018-1342	ate; Zip Code		\$500.00	! ! !
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)		Employer (See In:	structions)	
	Date	Full name of contributor	of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/10/2014	Contributor address; City; St 1450 Lake Robbins Drive Ste 400 The Woodlands, TX 77380	ate; Zip Code		\$2,500.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)		Employer (See Ins	structions)	

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 4/7	7 Report: 6/23
2	FILER NAME	Noack, James L. Jr. (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID∌ Michalk, Lisa B.	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	12/03/2014	6 Contributor address; City; State; Zip Code 14 Player Pines Court The Woodlands, TX 77382		\$100.00	 -
				(if travel outside of	Texas, complete Schedule T)
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor ☐ out-of-state PAC (ID# Othon, F. William	<u>‡ </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/04/2014	Contributor address; City; State; Zip Code 10802 Overbrook Houston, TX 77042		\$250.00	
				(If travel outside of	Texas, complete Schedule T)
	Drineinal accur	ation / Job title (See Instructions)	Employer (See In:	1	· · · · · · · · · · · · · · · · · · ·
	Filicipal occup	audit 7 300 due (3ee filsa dellotis)	Employer (See in	su dellons)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/13/2014	Contributor address; City; State; Zip Code 19005 Aldine Westfield Rd Houston, TX 77073		\$250.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	_	
	T Tillepat cocap				
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/25/2014	Contributor address; City; State; Zip Code 1235 North Loop W Suite 600 Houston, TX 77008		\$500.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	
	Date	Full name of contributor uut-of-state PAC (ID# Pinnapureddy, Sujatha R.	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/02/2014	Contributor address; City; State; Zip Code 51 Highland Cir The Woodlands, TX 77381-3886		\$500.00	
		The state of the s			_
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	
					i

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The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 5/	7 Report: 7/23
2 FILER NAME	Noack, James L. Jr. (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID: Price & Price	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/23/2014	6 Contributor address; City; State; Zip Code 101 Simonton Conroe, TX 77301		\$250.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
12/01/2014	Contributor address; City; State; Zip Code 5005 Riverway Suite 500 Houston, TX 77056		\$500.00	I [[
			,	Texas, complete Schedule T)
Principal occup	ection / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Roberts, Jeff C.	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/30/2014	Contributor address; City; State; Zip Code 20110 Misty River Way Cypress, TX 77433		\$1,000.00	1
			(If travel outside of	Texas, complete Schedule T)
Principal occup	eation / Job title (See Instructions)	Employer (See In:	structions)	
Date	Full name of contributor ☐ out-of-state PAC (ID# Smith, Robert	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
11/03/2014	Contributor address; City; State; Zip Code 16800 Falcon Sound Montgomery, TX 77356		\$2,500.00	! ! !
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
11/02/2014	Contributor address; City; State; Zip Code 26 Waterway Court The Woodlands, TX 77380		\$250.00	! [!
	,		(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	_

The Instructi	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 6/	7 Report: 8/23
2 FILER NAME	Noack, James L. Jr. (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID: Sutton, Alex	<u>'</u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
10/27/2014	6 Contributor address; City; State; Zip Code 8 Waterway Ct The Woodlands, TX 77380-2641		\$250.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
11/18/2014	Contributor address; City; State; Zip Code 2 Clubview Court The Woodlands, TX 77382		\$2,000.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occur	pation / Job title (See Instructions)	Employer (See In	<u> </u>	10x40, 00111p1000 001104110 1,7
771131941 3004	addition to the coordinate of			
Date	Full name of contributor 🗵 out-of-state PAC (ID: The GEO Group, Inc PAC	<u># C00382150</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
11/10/2014	Contributor address; City; State; Zip Code 621 Northwest 53rd Street One Park Place, Suite 700		\$500.00	1
	Boca Raton, FL 33487		(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor out-of-state PAC (ID:	'	Amount of	In-kind contribution
Date	Treutle, Andrew		contribution (\$)	description (if applicable)
12/13/2014	Contributor address; City; State; Zip Code 19 Latticeleaf PI The Woodlender TX 77393		\$500.00	I I
	The Woodlands, TX 77382			
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/28/2014	Contributor address; City; State; Zip Code		\$250.00	
	The Woodlands, TX 77381			l
			•	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	

	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 7/7	7 Report: 9/23
2	FILER NAME	Noack, James L. Jr. (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4	Date 12/03/2014	5 Full name of contributor ☐ out-of-state PAC (ID#) Whitehead, Jodell 6 Contributor address; City; State; Zip Code 10702 Anchor Way Magnolia, TX 77354		7 Amount of contribution (\$) \$275.00	8
				-	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In:	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/23/2014	Contributor address; City; State; Zip Code 1516 N San Jacinto Conroe, TX 77301-1944		\$100.00	
				-	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/24/2014	Contributor address; City; State; Zip Code 2504 Bayfront Dr Pearland, TX 77584-4312		\$500.00 }	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	_
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/03/2014	Contributor address; City; State; Zip Code 1005 Shepard Houston, TX 77019		\$1,000.00 	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES
ense Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (corter a crispon part licited above)

Fees Fees	Printing Expense Office Overhead The Instruction Guide explains ho	I/Rental Expense OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME	3 ACCOUNT# (TEC filers)
Schedule: 1/14 F	NI N	00000001
4 Date	5 Payee name	
09/25/2014	Bath & Body Works	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$45.47	1201 Lake Woodlands Drive The Woodlands, TX 77380	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) OTHER - Supplies	(b) Description (If travel outside of Texas, complete Schedule T) Office Supplies- Soap, other
EXPENDITURE		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 10/27/2014	Payee name Bath & Body Works	
Amount (\$)	Payee address City; State; Zip Code	
\$21.65	1201 Lake Woodlands Drive The Woodlands, TX 77380	
PURPOSE OF	Category (See Categories listed at the top of this schedule) OTHER - Supplies	Description (If travel outside of Texas, complete Schedule T) Office Supplies- Soap, other
EXPENDITURE		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	
11/26/2014	Bath & Body Works	
Amount (\$)	Payee address City; State; Zip Code	
\$75.23	1201 Lake Woodlands Drive The Woodlands, TX 77380	
PURPOSE OF	Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	Description (If travel outside of Texas, complete Schedule T) Employee Recognition
EXPENDITURE		
		Check if Austin, TX, officeholder living expense Office sought: Office held:
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
12/30/2014	Bob's Steak and Chop House	
Amount (\$)	Payee address City; State; Zip Code	-
\$99.08	1700 Research Forest Drive Shenandoad, TX 77381	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Political Lunch
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense

Texas Ethics Commission

EXPENDITURE CATEGORIES Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By

Event Expense Fees	Polling Expense Travel Out Of Dis Printing Expense Office Overhead/ The Instruction Guide explains hor	(Rental Expense OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME	3 ACCOUNT# (TEC filers)
Schedule: 2/14 F	Report: 11/23 Noack, James L. Jr. (Mr.)	0000001
4 Date	5 Payee name	
12/31/2014	Bob's Steak and Chop House	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$350.11	1700 Research Forest Drive Shenandoad, TX 77381	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T) Staff Apppreciation
OF	Food/Beverage Expense	olan / ppploolation
EXPENDITURE		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
12/12/2014	Children's Safe Harbor	
Amount (\$)	Payee address City; State; Zip Code	
\$200.00	1500 N Frazier St Conroe, TX 77301	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T) Donation 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	
12/12/2014	Cube Smart	
Amount (\$)	Payee address City; State; Zip Code	
\$810.00	29101 FM 2978 Magnolia, TX 77354	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER - Supplies	Description (If travel outside of Texas, complete Schedule T) Campaign Supplies-Annual Storage
		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	
10/31/2014	Facebook Advertising	
Amount (\$)	Payee address City; State; Zip Code	
\$391.04	1601 S California Ave Palo Alto, CA 94304-1111	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Facebook-Events
	0 71 10 70 11	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

to benefit C/OH

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Travel Out Of District Office Overhead/Rental Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)

Printing Expense The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 1 PAGE# 2 FILER NAME Noack, James L. Jr. (Mr.) 00000001 Schedule: 3/14 Report: 12/23 Date 5 Payee name Facebook Advertising 11/30/2014 6 Amount (\$) Payee address City; State; Zip Code 1601 S California Ave \$81.28 Palo Alto, CA 94304-1111 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 Facebook- Events **PURPOSE** Advertising Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense 9 Complete ONLY if Office sought: Office held: Candidate / Officeholder name direct expenditure to benefit C/OH Payee name 12/31/2014 Facebook Advertising Amount (\$) Payee address City; State; Zip Code 1601 S California Ave \$213.10 Palo Alto, CA 94304-1111 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Facebook-Events **PURPOSE** Advertising Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Office held: Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Payee name Gable, Ryan 10/11/2014 Amount (\$) Payee address City; State; Zip Code P. O. Box 130966 \$100.00 Spring, TX 77393 Description (If travel outside of Texas, complete Schedule T) Donation for Veterans Event Category (See Categories listed at the top of this schedule) **PURPOSE** Contributions/Donations Made By OF Candidate/Officeholder/Political Committee EXPENDITURE __ Check if Austin, TX, officeholder living expense Office held: Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Pavee name GiGi's Cupcakes 12/03/2014 Pavee address City; State; Zip Code Amount (\$) 4747 Research Forest Drive #150 \$275.00 The Woodlands, TX 77381 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Toys for Tots Cupcakes **PURPOSE Event Expense** OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Office sought: Office held: Candidate / Officeholder name direct expenditure

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out of District

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (orders a refugery part listed above)

Fees	Printing Expense Office Overhead The Instruction Guide explains ho	/Rental Expense OTHER (enter a category not listed above) w to complete this form
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 4/14 F	T No. 1 1 1 7 2 2 3	00000001
4 Date	5 Payee name	0000001
12/11/2014	Gun Emporium	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$389.69	11400 FM 2854	
	Conroe, TX 77304	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	(b) Description (If travel outside of Texas, complete Schedule T) Retirement Gifts-County Judge and Commissioner
OF EXPENDITURE	Citto/Awardo/Methoridio Expense	, ,
EXPENDITURE		Check if Austin, TX, officeholder living expense
9 Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name	
09/02/2014	Hobby Lobby	
Amount (\$)	Payee address City; State; Zip Code	
\$24.95	501 Sawdust Rd	
	Spring, TX 77380	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	OTHER - Supplies	Supplies-Office
OF EXPENDITURE		<u> </u>
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
09/22/2014	Hobby Lobby	
Amount (\$)	Payee address City; State; Zip Code	
\$142.10	501 Sawdust Rd Spring, TX 77380	
	Spring, 1X 77 300	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	OTHER - Supplies	Office Decor
EXPENDITURE		
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
11/12/2014	Hobby Lobby	, , , , , , , , , , , , , , , , , , ,
Amount (\$)	Payee address City; State; Zip Code	
\$207.84	501 Sawdust Rd Spring, TX 77380	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	OTHER - Supplies	Office Decor
EXPENDITURE		
	Out Politic I Office In 1997	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

to benefit C/OH

Texas Ethics Commission

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Office Overhead/Rental Expense

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Printing Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 PAGE# 3 ACCOUNT # (TEC filers) Noack, James L. Jr. (Mr.) 00000001 Schedule: 5/14 Report: 14/23 4 Date 5 Payee name 11/25/2014 Hobby Lobby Payee address Zip Code City; State; Amount (\$) 501 Sawdust Rd \$89.45 Spring, TX 77380 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** Toys for Tots **Event Expense** OF **EXPENDITURE** Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 12/02/2014 Hobby Lobby Amount (\$) Payee address City; State; Zip Code 501 Sawdust Rd \$11.85 Spring, TX 77380 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE** Office Christmas Decorations OTHER - Supplies OF EXPENDITURE Check if Austin, TX, officeholder living expense Office held: Candidate / Officeholder name Office sought: Complete ONLY if direct expenditure to benefit C/OH Date Payee name Honor Trophies 07/04/2014 Payee address City; State; Zip Code Amount (\$) 26111 I-45 North \$40.00 The Woodlands, TX 77380 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) **PURPOSE** Employee Recognition Gifts/Awards/Memorials Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Office held: Candidate / Officeholder name Office sought: Complete ONLY if direct expenditure to benefit C/OH Date Pavee name 08/11/2014 Honor Trophies Payee address City; State; Zip Code Amount (\$) 26111 I-45 North \$40.00 The Woodlands, TX 77380 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description Employee Recognition **PURPOSE** Gifts/Awards/Memorials Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

to benefit C/OH

EXPENDITURE CATEGORIES Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Polling Expense Printing Expense OTHER (enter a category not listed above) Office Overhead/Rental Expense The INSTRUCTION GUIDE explains how to complete this form. 3 ACCOUNT # (TEC filers) 1 PAGE# Noack, James L. Jr. (Mr.) 00000001 Schedule: 6/14 Report: 15/23 4 Date 5 Payee name Honor Trophies 10/30/2014 6 Amount (\$) Payee address City; State; Zip Code 26111 I-45 North \$80.00 The Woodlands, TX 77380 (a) Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description 8 Employee Recognition **PURPOSE** Gifts/Awards/Memorials Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: 9 Complete ONLY if direct expenditure to benefit C/OH Payee name 11/19/2014 Honor Trophies Amount (\$) Payee address State: Zip Code City; 26111 I-45 North \$140.00 The Woodlands, TX 77380 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description Employee Recognition **PURPOSE** Gifts/Awards/Memorials Expense ΩF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Honor Trophies 12/02/2014 Payee address Amount (\$) City; State; Zip Code 26111 I-45 North \$30.00 The Woodlands, TX 77380 (If travel outside of Texas, complete Schedule T) Description Category (See Categories listed at the top of this schedule) PURPOSE Community Recognition Gifts/Awards/Memorials Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH Date Pavee name Kirby's Prime Steakhouse 08/07/2014 Pavee address City: State: Zip Code Amount (\$) 1111 Timberloch Pl \$222.71 The Woodlands, TX 77380 Description Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE** Political Dinner Food/Beverage Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Office held: Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense

Texas Ethics Commission

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By

Event Expense Fees	Polling Expense Travel Out of Dis Printing Expense Office Overhead, The Instruction Guide explains ho	Rental Expense OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 7/14 F	Report: 16/23 Noack, James L. Jr. (Mr.)	0000001
4 Date 10/23/2014	5 Payee name Kirby's Prime Steakhouse	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$80.11	1111 Timberloch Pl The Woodlands, TX 77380	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description (If travel outside of Texas, complete Schedule T) Political Dinner
EXPENDITURE		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 12/10/2014	Payee name Kirby's Prime Steakhouse	
Amount (\$)	Payee address City; State; Zip Code	
\$83.39	1111 Timberloch Pl The Woodlands, TX 77380	
PURPOSE OF	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Political Dinner
EXPENDITURE		☐ 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	
12/15/2014	Macy's	
Amount (\$)	Payee address City; State; Zip Code	
\$81.19	1201 Lake Woodlands The Woodlands, TX 77380	
PURPOSE OF	Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	Description (If travel outside of Texas, complete Schedule T) Employee Recognition
EXPENDITURE		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	
12/16/2014	Macy's	
Amount (\$)	Payee address City; State; Zip Code	
\$173.18	1201 Lake Woodlands The Woodlands,TX 77380	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	Description (If travel outside of Texas, complete Schedule T) Employee Recognition
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

Candidate / Officeholder name

Complete ONLY if direct expenditure to benefit C/OH

SCHEDULE F

	EXPENDITURE CATE	
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Fun nse Food/Beverage Expense Travel In Distric Polling Expense Travel Out Of D	District Candidate/Officeholder/Political Committee d/Rental Expense OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME	3 ACCOUNT# (TEC filers)
Schedule: 8/14 F	Report: 17/23 Noack, James L. Jr. (Mr.)	00000001
4 Date	5 Payee name Pallotta's Mexican Grill	
12/18/2014 6 Amount (\$)	7 Payee address City; State; Zip Code	
\$136.13	[
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T) Staff Luncheon/Christmas Party
OF	Food/Beverage Expense	Otali Editoliooliioliiiotilao i alty
EXPENDITURE		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
11/06/2014	Pickett Fences	
Amount (\$)	Payee address City; State; Zip Code	
\$127.74	19193 I-45 Shenandoah, TX 77385	
PURPOSE OF	Category (See Categories listed at the top of this schedule) OTHER - Supplies	Description (If travel outside of Texas, complete Schedule T) Office Christmas Decor
EXPENDITURE		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	
07/19/2014	Sam's Club Stores	
Amount (\$)	Payee address City; State; Zip Code	
\$79.91	19091 Interstate 45 S Conroe, TX 77385	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER - Supplies	Description (If travel outside of Texas, complete Schedule T) Office Meetings
		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	
08/13/2014	Sam's Club Stores	
Amount (\$)	Payee address City; State; Zip Code	
\$82.50	19091 Interstate 45 S Conroe, TX 77385	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Event Expense	Employee Recognition
EXPENDITURE		ļ _o

Office held:

Check if Austin, TX, officeholder living expense

Office sought:

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (order a retreated part listed above)

Fees	Printing Expense Office Overhead The Instruction Guide explains ho	//Rental Expense OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME	3 ACCOUNT# (TEC filers)
Schedule: 9/14 F	historia i la compania de la compania del compania del compania de la compania del	00000001
4 Date	5 Payee name	
09/28/2014	Sam's Club Stores	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$132.89	19091 Interstate 45 S Conroe, TX 77385	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) OTHER - Supplies	(b) Description (If travel outside of Texas, complete Schedule T) Office Meetings
EXPENDITURE		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 11/10/2014	Payee name Sam's Club Stores	,
Amount (\$)	Payee address City; State; Zip Code	
\$449.96	19091 Interstate 45 S Conroe, TX 77385	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER - Supplies	Description (If travel outside of Texas, complete Schedule T) Office Meetings
0 1 0 0 1 1 7	Odid-to / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought. Office field.
Date	Payee name	
11/24/2014	Sam's Club Stores	
Amount (\$)	Payee address City; State; Zip Code	
\$135.83	19091 Interstate 45 S Conroe, TX 77385	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	OTHER - Supplies	Office Meetings
EXPENDITURE		
		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	
12/03/2014	Sam's Club Stores	
Amount (\$)	Payee address City; State; Zip Code	
\$77.53	19091 Interstate 45 S Conroe, TX 77385	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) Supplies-Toys for Tots
EAFENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

EXPENDITURE CATEGORIES Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Fees	Printing Expense Office Overhead The Instruction Guide explains ho	VRental Expense OTHER (enter a category not listed above) ow to complete this form.
1 PAGE#	2 FILER NAME	3 ACCOUNT# (TEC filers)
Schedule: 10/14	_ NI I - I I - I NI - N	0000001
4 Date	5 Payee name	
12/15/2014	Sam's Club Stores	
6 Amount (\$)	7 Payee address City; State; Zip Code	
	1	
\$183.85	19091 Interstate 45 S Conroe, TX 77385	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Gifts/Awards/Memorials Expense	Employee Recognition
EXPENDITURE		
		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
12/31/2014	Sam's Club Stores	
Amount (\$)	Payee address City; State; Zip Code	
\$356.08		
\$350.00	Conroe, TX 77385	
		•
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	OTHER - Supplies	Office Meetings
OF	OTTIER - Supplies	
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure	Candidate / Cinocholdor Hamo	Office dought.
to benefit C/OH	<u> </u>	
Date	Payee name	
07/30/2014	South County Football League	
Amount (\$)	Payee address City; State; Zip Code	
\$750.00	P. O. Box 7882	
\$750.00	The Woodlands, TX 77387	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Contributions/Donations Made By	Donation
OF	Candidate/Officeholder/Political Committee	
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure	Odificiale / Officerolder Fairie	5.1155 554g/15
to benefit C/OH		
Date	Payee name	
12/09/2014	Texas Patriots PAC	
Amount (\$)	Payee address City; State; Zip Code	
\$1,000.00	1	
φ 1,000.00	The Woodlands, TX 77380	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Contributions/Donations Made By	Donation (In layer obtaine or rexas, complete ochecute 1)
OF	Candidate/Officeholder/Political Committee	
EXPENDITURE		Charlet Austin TV office balder bidge a
Complete ONESC	Condidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office field.

SCHEDULE F

Advertising Expense Accounting/Banking

Gifts/Awards/Memorial Expense Legal Services

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense

Loan Repayment/Reimbursement Transportation Equipment & Related Expense

Consulting Expe Event Expense	Polling Expense Travel Out O	f District Candid	ons/Donations Made By ate/Officeholder/Political Committee
Fees	Printing Expense Office Overh The Instruction Guide explains		enter a category not listed above)
1 PAGE#	2 FILER NAME		3 ACCOUNT# (TEC filers)
Schedule: 11/14	NiI- I I I- (Min)		00000001
4 Date	5 Payee name		-
12/03/2014	The East Golf Course		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$9,797.64	2301 N Millbend Dr		
	The Woodlands, TX 77380		
		100000000000000000000000000000000000000	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description (If travel out Toys for Tots	side of Texas, complete Schedule T)
OF	Lvent Expense		
EXPENDITURE		Check if Austin, TX, officer	nolder living expense
9 Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH			
	I		
Date 10/24/2014	Payee name The Woodlands Chamber of Commerce		
Amount (\$)	Payee address City; State; Zip Code		
\$230.00	1400 Woodlach Forest Dr #300		
\$230.00	The Woodlands, TX 77380		
	Category (See Categories listed at the top of this schedule)		side of Texas, complete Schedule T)
PURPOSE OF	Fees	Membership	
EXPENDITURE	·	<u></u>	
9			
	Olid-t- / Office helder name	Check if Austin, TX, officeh	
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office held:
	Candidate / Officeholder name		
direct expenditure to benefit C/OH Date	Payee name		
direct expenditure to benefit C/OH Date 09/10/2014	Payee name The Woodlands Republican Women		
direct expenditure to benefit C/OH Date 09/10/2014 Amount (\$)	Payee name The Woodlands Republican Women Payee address City; State; Zip Code		
direct expenditure to benefit C/OH Date 09/10/2014	Payee name The Woodlands Republican Women Payee address City; State; Zip Code P. O. Box 7294		
direct expenditure to benefit C/OH Date 09/10/2014 Amount (\$)	Payee name The Woodlands Republican Women Payee address City; State; Zip Code		
direct expenditure to benefit C/OH Date 09/10/2014 Amount (\$)	Payee name The Woodlands Republican Women Payee address City; State; Zip Code P. O. Box 7294 The Woodlands, TX 77387	Office sought: Description (If travel out	
direct expenditure to benefit C/OH Date 09/10/2014 Amount (\$) \$60.00	Payee name The Woodlands Republican Women Payee address City; State; Zip Code P. O. Box 7294	Office sought:	Office held:
direct expenditure to benefit C/OH Date 09/10/2014 Amount (\$) \$60.00	Payee name The Woodlands Republican Women Payee address City; State; Zip Code P. O. Box 7294 The Woodlands, TX 77387 Category (See Categories listed at the top of this schedule)	Office sought: Description (If travel out	Office held:
direct expenditure to benefit C/OH Date 09/10/2014 Amount (\$) \$60.00 PURPOSE OF EXPENDITURE	Payee name The Woodlands Republican Women Payee address City; State; Zip Code P. O. Box 7294 The Woodlands, TX 77387 Category (See Categories listed at the top of this schedule) Event Expense	Office sought: Description (If travel out Monthy Luncheon Check if Austin, TX, officeh	Office held: side of Texas, complete Schedule T)
direct expenditure to benefit C/OH Date 09/10/2014 Amount (\$) \$60.00 PURPOSE OF EXPENDITURE Complete ONLY if	Payee name The Woodlands Republican Women Payee address City; State; Zip Code P. O. Box 7294 The Woodlands, TX 77387 Category (See Categories listed at the top of this schedule)	Office sought: Description (If travel out Monthy Luncheon	Office held:
direct expenditure to benefit C/OH Date 09/10/2014 Amount (\$) \$60.00 PURPOSE OF EXPENDITURE	Payee name The Woodlands Republican Women Payee address City; State; Zip Code P. O. Box 7294 The Woodlands, TX 77387 Category (See Categories listed at the top of this schedule) Event Expense	Office sought: Description (If travel out Monthy Luncheon Check if Austin, TX, officeh	Office held: side of Texas, complete Schedule T)
direct expenditure to benefit C/OH Date 09/10/2014 Amount (\$) \$60.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure	Payee name The Woodlands Republican Women Payee address City; State; Zip Code P. O. Box 7294 The Woodlands, TX 77387 Category (See Categories listed at the top of this schedule) Event Expense	Office sought: Description (If travel out Monthy Luncheon Check if Austin, TX, officeh	Office held: side of Texas, complete Schedule T)
direct expenditure to benefit C/OH Date 09/10/2014 Amount (\$) \$60.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH	Payee name The Woodlands Republican Women Payee address City; State; Zip Code P. O. Box 7294 The Woodlands, TX 77387 Category (See Categories listed at the top of this schedule) Event Expense Candidate / Officeholder name	Office sought: Description (If travel out Monthy Luncheon Check if Austin, TX, officeh	Office held: side of Texas, complete Schedule T)
direct expenditure to benefit C/OH Date 09/10/2014 Amount (\$) \$60.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date	Payee name The Woodlands Republican Women Payee address City; State; Zip Code P. O. Box 7294 The Woodlands, TX 77387 Category (See Categories listed at the top of this schedule) Event Expense Candidate / Officeholder name	Office sought: Description (If travel out Monthy Luncheon Check if Austin, TX, officeh	Office held: side of Texas, complete Schedule T)
direct expenditure to benefit C/OH Date 09/10/2014 Amount (\$) \$60.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 10/08/2014	Payee name The Woodlands Republican Women Payee address City; State; Zip Code P. O. Box 7294 The Woodlands, TX 77387 Category (See Categories listed at the top of this schedule) Event Expense Candidate / Officeholder name Payee name The Woodlands Republican Women Payee address City; State; Zip Code P. O. Box 7294	Office sought: Description (If travel out Monthy Luncheon Check if Austin, TX, officeh	Office held: side of Texas, complete Schedule T)
direct expenditure to benefit C/OH Date 09/10/2014 Amount (\$) \$60.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 10/08/2014 Amount (\$)	Payee name The Woodlands Republican Women Payee address City; State; Zip Code P. O. Box 7294 The Woodlands, TX 77387 Category (See Categories listed at the top of this schedule) Event Expense Candidate / Officeholder name Payee name The Woodlands Republican Women Payee address City; State; Zip Code	Office sought: Description (If travel out Monthy Luncheon Check if Austin, TX, officeh	Office held: side of Texas, complete Schedule T)
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direct expenditure to benefit C/OH Date 09/10/2014 Amount (\$) \$60.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 10/08/2014 Amount (\$) \$20.00 PURPOSE OF	Payee name The Woodlands Republican Women Payee address City; State; Zip Code P. O. Box 7294 The Woodlands, TX 77387 Category (See Categories listed at the top of this schedule) Event Expense Candidate / Officeholder name Payee name The Woodlands Republican Women Payee address City; State; Zip Code P. O. Box 7294 The Woodlands, TX 77387	Description (If travel out Monthy Luncheon Check if Austin, TX, officeh Office sought:	Office held: side of Texas, complete Schedule T) older living expense Office held:
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Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name

POLITICAL EXPENDITURES

P.O.Box 12070

SCHEDULE F

	EXPENDITURE CATE	GORIES
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ing Legal Services Solicitation/Fund nse Food/Beverage Expense Travel In District Polling Expense Travel Out Of Dis Printing Expense Office Overhead.	raising Expense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Rental Expense OTHER (enter a category not listed above)
. D.OF.	The Instruction Guide explains ho	TO THE PROPERTY OF THE PROPERT
1 PAGE# Schedule: 12/14	Report: 21/23 FILER NAME Noack, James L. Jr. (Mr.)	3 ACCOUNT# (TEC filers) 00000001
4 Date	5 Payee name	00000001
11/12/2014	The Woodlands Republican Women	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$20.00	P. O. Box 7294 The Woodlands, TX 77387	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description (If travel outside of Texas, complete Schedule T) Monthly Luncheon
EXPENDITURE		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
12/10/2014	The Woodlands Republican Women	
Amount (\$)	Payee address City; State; Zip Code	
\$20.00	P. O. Box 7294 The Woodlands, TX 77387	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
OF	Event Expense	Monany Editorioon
EXPENDITURE		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	
12/08/2014	The Woodlands VFW Auxilliary	
Amount (\$)	Payee address City; State; Zip Code	
\$110.00	P. O. Box 8907 The Woodlands,TX 77387	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH	Calididate / Officerolder frame	Cinice sought.
Date 07/02/2014	Payee name Verizon Wireless	
Amount (\$)	Payee address City; State; Zip Code	
\$52.15	1335 Lake Woodlands Dr The Woodlands, TX 77380-3287	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) Internet Access
LA LIDITORE		Check if Austin, TX, officeholder living expense

Office held:

Office sought:

SCHEDULE F

		ITURE CATEGO				
Advertising Expe Accounting/Bank	ing Legal Services	Salaries/Wages/Con Solicitation/Fundrais	ing Expense	Loan Repayment/F Transportation Equ	ipment & Related	Expense
Consulting Expe Event Expense Fees	nse Food/Beverage Expense Polling Expense Printing Expense	Travel In District Travel Out Of District Office Overhead/Rei	rt .	Contributions/Dona Candidate/Office OTHER (enter a ca	eholder/Political C	ommittee
rees	The Instruction Gui		•	*	regory nor issect	ibove)
1 PAGE#	2 FILER NAME	A.F. \		3	ACCOUNT#	(TEC filers)
Schedule: 13/14	, , , , , , , , , , , , , , , , , , ,	<u>vir.)</u>			00000001	
4 Date 08/02/2014	5 Payee name Verizon Wireless					
6 Amount (\$)	7 Payee address City; State; 2	Zip Code				
\$52.15	1335 Lake Woodlands Dr The Woodlands, TX 77380-3287					
•	(a) Category (See Categories listed at the top of the	aic achadula)	(b) Description (I	f travel outside of T	avac complete S	chedule T) [
8 PURPOSE	Office Overhead/Rental Expense	iis scriedule)	Internet Acces		exas, complete o	criedule 1) []
OF EXPENDITURE	·					
9 Complete ONLY if	Candidate / Officeholder name		Check if Austin, 7 Office sough	TX, officeholder liv	ring expense Office held:	
direct expenditure to benefit C/OH	Sandidate / Oncertoide Hame		Omoc sough	•••	Omeo nota.	
Date 09/02/2014	Payee name Verizon Wireless					
Amount (\$)		Zip Code				
\$62.97	1335 Lake Woodlands Dr The Woodlands, TX 77380-3287	•				
	Category (See Categories listed at the top of the	is schedule)		f travel outside of T	exas, complete S	chedule T)
PURPOSE OF	Office Overhead/Rental Expense		Internet Acces	5		
EXPENDITURE			Check if Austin, 1	X, officeholder liv	ing expense	
Complete ONLY if	Candidate / Officeholder name		Office sough		Office held:	
direct expenditure to benefit C/OH						
Date	Payee name					
10/02/2014	Verizon Wireless					
Amount (\$)	Payee address City; State; Z 1335 Lake Woodlands Dr	iip Code				
\$95.45	The Woodlands, TX 77380-3287					
PURPOSE	Category (See Categories listed at the top of the	is schedule)	Description (III	f travel outside of To	exas, complete S	chedule T)
OF	Office Overhead/Rental Expense		miorriot / todac	•		
EXPENDITURE			Check if Austin, T	X, officeholder liv	ing expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	nt:	Office held:	
Date	Payee name					
11/02/2014	Verizon Wireless					
Amount (\$)	Payee address City; State; Z 1335 Lake Woodlands Dr	Zip Code				
\$73.80	The Woodlands, TX 77380-3287					
BUBBACE	Category (See Categories listed at the top of the	is schedule)	Description (If	travel outside of Te	exas, complete S	chedule T)
PURPOSE OF	Office Overhead/Rental Expense		mierrier Acces	J		
EXPENDITURE			Check if Austin. T	X, officeholder liv	ing expense	
Complete ONLY if	Candidate / Officeholder name		Office sough		Office held:	
direct expenditure to benefit C/OH						

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

EXPENDITURE CATEGORIES Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Travel Out Of District
Office Overhead/Rental Expense The Instruction Guide explains how to complete this form.

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)

2 FILER NAME 1 PAGE# 3 ACCOUNT# (TEC filers) Noack, James L. Jr. (Mr.) 00000001 Schedule: 14/14 Report: 23/23 5 Payee name Date Verizon Wireless 12/02/2014 City; Payee address State: 6 Amount (\$) Zip Code 1335 Lake Woodlands Dr \$52.83 The Woodlands, TX 77380-3287 (a) Category (See Categories listed at the top of this schedule) (b) Description 8 (If travel outside of Texas, complete Schedule T) **PURPOSE** Internet Access Office Overhead/Rental Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Verizon Wireless 12/12/2014 Amount (\$) Payee address City; State; Zip Code 1335 Lake Woodlands Dr \$127.49 The Woodlands, TX 77380-3287 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Supplies Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Wal Mart 08/14/2014 Amount (\$) Payee address City; State; Zip Code 1025 Sawdust Rd \$102.39 Spring, TX 77380 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Supplies for Employee Recognition **PURPOSE** Event Expense OF **EXPENDITURE** ___ Check if Austin, TX, officeholder living expense Office sought: Office held: Complete ONLY if Candidate / Officeholder name direct expenditure to benefit C/OH

Image# 14941757600

FEC FORM

STATEMENT OF ORGANIZATION

PAGE 1 / 4 —

FORM 1			Office Use Only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
The GEO Group,	Inc. Political Ac	tion Committee	
			<u> </u>
	#621 Northwest 53rd Street		
ADDRESS (number and street)			
(Check if address is changed)	One Park Place, Suite 700		
io ditaligati	Boca Raton		FL 33487
	CITY ▲		STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRE	SS		
(Check if address	slming@comerica.com	1	
is changed)			<u> </u>
	Optional Second E-Mail Ad	dress	
		111111	
is changed) 2. DATE 07 10			
C FEO IDENTIFICATION NU	\mathbf{c}	00382150	
3. FEC IDENTIFICATION NU		รับเทรา เกาะเรา	
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)	
certify that I have examined the	is Statement and to the best	of my knowledge and belief it	t is true, correct and complete.
Type or Print Name of Treasure	r Brian Evans		
	Evans	[Electronically Filed]	Date 07 10 2014
		may subject the person signing ON SHOULD BE REPORTED V	this Statement to the penalties of 2 U.S.C. §437g. VITHIN 10 DAYS.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	FEL ELIMIN I

FEC F	orm 1 (Revised 02/2009)	Page 2
TYPE OF	COMMITTEE	_
Candidat	te Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complet information below.)	e the candidate
Name of Candidate		eressinge con-
Candidate Party Affilia	Office Sought: House Senate President	State
(C)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		100 000 000 000 000 000 000 000 000 000
Party Co		
(d) : : : : : : : : : : : : : : : : : : :		mocratic, publican, etc.) Party.
Political A	Action Committee (PAC):	
(e) X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connec	ted organization is a:
- Same	(1997) PROP (1997)	
	Corporation Corporation w/o Capital Stock	abor Organization
	Membership Organization Trade Association C	poperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f) (c)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee. (i.e., nonconnected committee)	gated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fun	draising Representative:	
. *	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o	r more political
(g) '	committees/organizations, at least one of which is an authorized committee of a federal candidate.	i more political
(h) *****	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political
Con	nmittees Participating in Joint Fundraiser	
0011	्षा करावे के कार्या के कार्या के कार्या के किया किया किया किया किया किया किया किया	
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	1 (Revised 02/2009)			Page 4
Full Name of Designated Agent				11111
Mailing Address				1 1 1 1 1
	CI		STATE	ZIP CODE
Title or Position		Telephone nun	mber	
Banks or Other safety deposit bo Name of Bank, I	Depositories: List all banks or other oxes or maintains funds.	depositories in which the committ	tee deposits funds, ho	olds accounts, rents
	epository, etc.			
	0 1 0 1			
	Comerica Bank			
Mailing Address	Comerica Bank P.O. Box 75000			
			MI 148275	
	P.O. Box 75000	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MI 48275	
	P.O. Box 75000 Detroit CI	TY		
Mailing Address	P.O. Box 75000 Detroit CI	TY		
Mailing Address	P.O. Box 75000 Detroit CI	I I I I I I I I I I I I I I I I I I I		
Mailing Address Name of Bank, E	P.O. Box 75000 Detroit CI	I I I I I I I I I I I I I I I I I I I		ZIP CODE
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