CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	auide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed: / 2
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS (MR) FIRST Jay Mac	MI	OFFICE USE ONLY Date Received
	NICKNAME LAST	SUFFIX	UTY ELECTION
	Sanders	WANTE CONT	CONFIFTING
4 CANDIDATE/ OFFICEHOLDER MAILING ADDRESS	_	, Ste 3 \$1	JAN 15 2016 JAN 15 WALKET
Change of Address	The Woodland	s TX 77386	18 Walk Tust
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (832) 7-97. 9229	EXTENSION	Date Hand-delivered or Bare Postplarked
6 CAMPAIGN TREASURER NAME	MS/ (FS) MR Kr (54-1) L	мі Э.С.	Receipt # Amount \$ Date Processed
10 1112	NICKNAME LAST	SUFFIX	Date Imaged
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE): APT / SU	JITE #; CITY; STATE;	ZIP CODE
TREASURER ADDRESS	25511 Budde Rd.	Ste 301	
(Residence or Business)	1 ,		
, , , , , , , , , , , , , , , , , , , ,	The Woodlan	ds TX +=	7380
8 CAMPAIGN TREASURER PHONE	(832) 663. 9916	EXTENSION	,
9 REPORT TYPE	July 15 Sth day before elements and supplies a supplies and supplies a		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)
10 PERIOD	Nesth Co. You	Month	Day Year
COVERED	Sept /17/2015		31/2016
11 ELECTION	ELECTION DATE	ELECTION TYPE	
,	Month Day Year Primary Mar / / 29/6 General	Runoff Other Description Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known	y County
	`.	Commiss	y County ioner Pct 3
GO TO PAGE 2			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME			
	Jay. M	ac Sanders 15	Filer ID (Ethics Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S)		NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITU DIDATE / OFFICEHOLDER, THESE EXPENDITURES MAY HAVE BEEN MADE WITH DINSENT, CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS	COLUMN TERM AREA
	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL		
	SPECIFIC	COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
Additional Pages		<u> </u>	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION TOTALS	1. TOTAL F PLEDGE	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 349.06
• • • • • • • • • • • • • • • • • • • •	2. TOTAL (OTHER	POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 23, 444, 89
EXPENDITURE TOTALS	3. TOTAL P UNLESS	OLITICAL EXPENDITURES OF \$100 OR LESS, ITEMIZED	\$ 120.77
	4. TOTAL I	POLITICAL EXPENDITURES	\$ 18, 204, 83
CONTRIBUTION BALANCE	5. TOTAL P	OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DA	\$ 5.266 18
OUTSTANDING LOAN TOTALS	6. TOTAL P LAST DA	RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE Y OF THE REPORTING PERIOD	\$
18 AFFIDAVIT			
Notary ID	CUBERO. #12521200-9 % ission Expires % n 05, 2017	I swear, or affirm, under penalty of perjutrue and correct and includes all inform under Title 15, Election Code.	nation required to be reported by me
AFFIX NOTARY STAMP	/SEALABOVE	Signature of Candida	ate or Officeholder
Sworn to and subscri	1 115	the said	this the 15
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of officer administering oath
			ļ

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	9 FILERNAME Jay Mcc Sanders	20 Filer ID (Ethics Co	ommission Filers)
21	21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 23, 449.89
2.	2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUT	TIONS	\$ 2.00.00
3.	3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	4. X SCHEDULE E: LOANS		\$ 2,750.00
5.	5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITIC	CAL CONTRIBUTIONS	\$ 18, 189, 81.
6.	6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7.	7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POL	ITICAL CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSON	NAL FUNDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTION	IS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITI	ICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CON- RETURNED TO FILER	TRIBUTIONS	\$

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form. 2 FILER NAME	1 Total pages Schedule A1: 4
Jay Mac Sandes	3 Filer ID (Ethics Commission Filers)
5 Hull name of contributor out-of-state PAC (ID#:	
Sept Henry Brooks 29 6 Contributor address; City; State; Zip Code 15 Mg Mark Wty Th Vow (and TX 73); 8 Principal occupation / Job title (See Instructions)	3000.00
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	structions)
Date Full name of contributor out-of-state PAC (ID#:	
Contributor address; City; State; Zip Code	500.00
Principal occupation / Job title (See Instructions) The Woodlands TR 7733 Employer (See Instructions)	tructions)
Date Full name of contributor Contributor out-of-state PAC (ID#: Contributor address; City; State; Zip Code 270 Coc. (: M.	1000.00
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date Full name of contributor out-of-state PAC (ID#:	_) Amount of contribution (\$)
Dec Contributor address; City: State: Zip Code 15 122 Driefing Shadows The Woodlands Tx	250.00
Principal occupation / Job title (See Instructions) Employer (See Inst. 77355	ructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS If contributor is out-of-state PAC, please see instruction guide for addition	NEEDED all reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form. 2 FILER NAME	1 Total pages Schedule A1: 4
Jay Mac Sandar	3 Filer ID (Ethics Commission Filers)
4 Date 5 Full name of contributor Cot 6 Contributor address; 6 Contributor address; City; State; Zip Code 75 N. Bucopa 71 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	7 Amount of contribution (\$) 2500 - 60 ions)
Date Full name of contributor Bob Zincke Nov Contributor address; City: State: Zip Code 15 W. Ambusador Pond The Woodland: W 3731 Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date Full name of contributor Contributor Dec Contributor address; City; State; Zip Code 15 12027 Thompson Wills Tx 773/9 Principal occupation / Job title (See Instructions) Employer (See Instructions)	Amount of contribution (\$) 5 00 00
Date Full name of contributor Out-of-state PAC (ID#:	Amount of contribution (\$) ZJO.00
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEI If contributor is out-of-state PAC, please see instruction guide for additional rep	DED

MONE	TARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
	e Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 4
2 FILER NAME	Jay Mac Sanders	3 Filer ID (Ethics Commission Filers)
Q Dec	5 Full name of contributor	7 Amount of contribution (\$)
15	6 Contributor address; City; State; Zip Code 15 Manual Via He Wood land + 7738 pation / Job title (See Instructions) 9 Employer (See Instruc	5000.00
8 Principal occu	pation / Job title (See Instructions) 9 Employer (See Instruc	
Date	Full name of contributor out-of-state PAC (ID#:) Lana Russell	Amount of contribution (\$)
Dec	Contributor address; City; State; Zip Code	100.00
Principal occup	51 tack Med Pl The Westlands TX 73382 pation / Job title (See Instructions) Employer (See Instructions)	ions)
Date 17 Dec	Full name of contributor out-of-state PAC (ID#: Doug Owtong Contributor address; City; State; Zip Code 15 Lal Mest Harbor PL, The Vacd but TX And action / Job title (See Instructions) Employer (See Instructions)	Amount of contribution (\$)
Principal occup	ation / Job title (See Instructions) Employer (See Instructi	ons)
Date IT Dec IS Principal occupa	Full name of contributor out-of-state PAC (ID#:) ZGCh Ri Chand Contributor address; City; State; Zip Code The Mand Conduction of the Contributor of the Con	 _
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEE if contributor is out-of-state PAC, please see instruction guide for additional re	DED porting requirements.

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME Jay Mae Saylows	3 Filer ID (Ethics Commission Filers)
4 Date 5 Full name of contributor out-of-state PAG (ID#: 17 Dec 6 Contributor address; City; State; Zip Code 15 POBry 9645 Te Woodlad 7 773 8 Principal occupation / Job title (See Instructions) 9 Employer (See	7 Amount of contribution (\$) 500.00
Date Full name of contributor Out-of-state PAC (ID#:	Amount of contribution (\$)
13 N. Buopa the Wood lands Th 2030	1000.00
Principal occupation / Job title (See Instructions) Employer (See	Instructions)
Date Full name of contributor Out-of-state PAC (ID#: Dec Contributor address; City; State; Zip Code 15 May Way We Wood land TV 77352 Principal occupation / Job title (See Instructions)	Amount of contribution (\$) 4,975.60
Principal occupation / Job title (See Instructions) Employer (See I	Instructions)
Date Full name of contributor Tay Mac Cor Township Contributor address; City; State: Zip Code) Amount of contribution (\$)
Principal occupation / Job title (See Instructions) City: State; Zip Code The Woodlands Employer (See Instructions)	338.91 TX nstructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE A	AS NEEDED ional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

CONTRIBUTIONS	SCHEDOLE AZ
The Instruction Guide explains how to complete this for	n. 1 Total pages Schedule A2:
2 FILER NAME Jay Mac Sander	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIL	BUTIONS \$ \$ 2€0.00
5 Date 6 Full name of contributor out-of-state PAC (ID#:	8 Amount of 9 In-kind contribution Contribution \$ description 100.00 For Full-wife Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employer (FOR NON-JUDICIAL) (See Instructions)
12 Contributor's principal occupation (FOR JUDICIAL)	13 Contributor's job title (FUR JUDICIAL) (See Instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)	15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	
Date Full name of contributor out-of-state PAC (ID#:	Amount of In-kind contribution Contribution \$ description. LOO.OO Food For the Fundrate of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employer (FOR NON-JUDICIAL) (See Instructions)
Contributor's principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See Instructions)
Contributor's employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	
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ATTACH ADDITIONAL CODIEC OF T	LIIC COLIÉDIU E AO MEEDED

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

LOANS				SCHEDULE E
The	Instruction Guide explains how to com	plete this form.	1	Total pages Schedule E:
2 FILER NAME	ay Mae Sond.	ers	3	Filer ID (Ethics Commission Filers)
4 TOTAL OF U	NITEMIZED LOANS		\$	
Date of loan Dot 15	7 Name of lender out-of-state Say Man St	e PAC (ID#:)	9	Loan Amount (\$) 2560.00
6 Is lender a financial Institution?	8 Lender address; City; 19 Amber Ley Ct	State; Zip Code		Interest rate Maturity date
10		roulland Td +738	1	
12 Principal occupati	on / Job title (See Instructions)	13 Employer (See Instructions)		
14 Description of Coll none	ateral	15 Check if personal funds were account (See Instructions)	depos	ited into political
16 GUARANTOR INFORMATION	17 Name of guarantor		19	Amount Guaranteed (\$)
not applicable 20 Principal Occupat	18 Guarantor address; City; ion (See Instructions)	State; Zip Code 21 Employer (See Instructions)		
	100			
24 Dec 15	Name of lender out-of-state	e PAC (ID#:) des		.oanAmount (\$) 250. 00
Is lender a financial Institution?	Lender address; City;	State; Zip Code		nterest rate
Y 🚱	19 Amba Legat Me	hood bads of 777	81	Maturity date
Principal occupation	on / Job title (See Instructions)	Employer (See Instructions)	1	,
Description of Colla	ateral	Check if personal funds were account (See Instructions)	deposi	ted into political
GUARANTOR INFORMATION	Name of guarantor		<i>F</i>	Amount Guaranteed (\$)
;	Guarantor address; City;	State: Zip Code		
not applicable			1	
Principal Occupation	on (See Instructions)	Employer (See Instructions)	•	
if le	ATTACH ADDITIONAL CO	PPIES OF THIS SCHEDULE AS NE		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

. SCHEDULE F1

			<u> </u>
	EXPENDITURE CAT	EGORIES FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made I Candidate/Officeholder/Politic Gredit Card Payment	. Event Expense Fees Food/Beverage Expense By Gift/Awards/Memorials Expense Legal Services	Loan Repayment/Reimbursernent Office Overhead/Rental Expense Polling Expense Printing Expense Tr Printing Expense Salaries/Wages/Contract Labor Of	olicitation/Fundraising Expense ansportation Equipment & Related Expense avel In District avel Out Of District her (enter a category not listed above)
1 Total pages Schedule F1		ins how to complete this form.	
4 Date	5 Payee name	Sanden 3	Filer ID (Ethics Commission Filers)
1 Dec 15 6 Amount (\$)	Aprex Strates	ic Partners	
4 919.23	We Research Geness Ste	Zip Code	
8 PURPOSE	(a) Category (See Categories listed at the top of this	schedule) (b) Description	ed lands, TV, 7738,
PURPOSE OF EXPENDITURE	Consulting		f Texas. Complete Schedule T. officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date Dec 15	Payee name MCRP		
Amount (\$)	Payee address; City; State; Z 3 to Metcalf St Conv	ip Code	
PURPOSE OF EXPENDITURE	Category (See Calegories listed at the top of this s	Check if travel outside of	Texas. Complete Schedule T. Riceholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
H Dec 15	Payee name Clear Channel O	w door	
Amount (\$) 4,873.58	Payee address; City; State; Zi	p Code	1. TV
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this so		,
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES C	OF THIS SCHEDULE AS NEEDED	·

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

. SCHEDULE **F1**

-	EVENTAGE		
	EXPENDITURE CATE	GORIES FOR BOX 8(a)	
Advertising Expense Accounting/Banking	Event Expense	Loan Banavanawalla-tusk	·
Consulting Expense	Fees	Loan Repayment/Reimbursement Office Overhead/Rental Expense	Solicitation/Fundraising Expense
Contributions/Donations Made a	Food/Beverage Expense	Poliing Expense	Transportation Equipment & Related Expense
Candidate/Officeholder/Politic	al Committee Legal Services Expense	Printing Expense	Travel In District Travel Out Of District
Credit Card Payment	34. 54. 105.	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
	. The Instruction Guide explain	s how to complete this form.	(- manager) reclinica above)
1 Total pages Schedule F1	2 FILER NAME		
7	The Ale	C / I	3 Filer ID (Ethics Commission Filers)
4 Date	Jay Mac	2 ander	
	5 Payee name		
+ Oct 15	And the trans	P. +	•
6 Amount (\$)	There or the con	armere	
C Amount (\$)	7 Payee address; City; State: Zi	p Code	
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9 Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OI	-∤		Office field
Date	Payee name		
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,	Payee-address; City; State; Zip	o Code	
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rms provided by Texas Ethic			

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS SCHEDULE F1

	EXPENDITURE CATEGO	ORIES FOR BOX 8(a)	
Advertising Expense Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	~ · · · · · · · · · · ·
Consulting Expense		Office Overhead/Rental Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense
Contributions/Donations Made I Candidate/Officeholder/Politic	By Gift/Awards/Memorials Expense	Polling Expense Printing Expense	Travel In District
Credit Card Payment		Salaries/Wages/Contract Labor	Travel Out Of District Other (enter a category not listed above)
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1 Total pages Schedule F1	: 2 FILER NAME		1
3	Ta V		3 Filer ID (Ethics Commission Filers)
4 Date	Jay 1 ac	unders_	
5 44 1	5 Payee name	•	<u> </u>
Novis	Anen XI adverse	1 a timer	•
6 Amount (\$)	7 Payee address: City; State: Zip	114 1-61)	
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U - 0.00	360 Research Force Ste 115	4 MB 129. The	hoolbul . 4% 788,
8	(a) Category (See Colorada Batel at the Assault	.,,	MOOKALL, VI, TP82
	(a) Category (See Categories listed at the top of this sche	edule) (b) Description	• •
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9 Complete ONLY if direct	Candidate / Officeholder name	Office sought	. Office held
expenditure to benefit C/OI	4	-	4,
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Date,	Payee name		
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Nov 15	Minuto Man Va	* 2	
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	The same into	e4, The Woodl	ands IX ++180
	Category (See Calegories listed at the top of this sche	dule) Description	
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OF	DIF		side of Texas. Complete Schedule T.
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Complete ONLY if direct	Candidate / Officeholder name	Office and a secondary	
expenditure to benefit C/OF		Office sought	Office held
Some and a some	•		
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~ · ·	0- 0 /		
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500.00	800 Research Forest Stalls	MB129 The Was	164 TX 77382
	Category (See Categories listed at the top of this sched	dule) Description	- 100 / 1 / 1 / 1 / 1 / 1
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EXPENDITURE	nd-	Check if Austin,	TX, officeholder living expense
-	Consulting		
	<u></u>]
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH			•
•	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS NEED)ED :