# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE/ OFFICEHOLDER NAME	Mr Russell NICKNAME LAST	B. SUFFIX	Date Received TY ELECTIONS RELEIVED TO
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  Change of Address  5 CANDIDATE / OFFICEHOLDER PHONE	PO. BOX 245  AREA CODE PHONE NUMBER  (936) 689 3701	Willis Tx 77378  EXTENSION	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST Mr. David NICKNAME LAST Kleintann	C, suffix	Paceipt # Amount \$  Date Processed  Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / S		Ilis, TX 11318
8 CAMPAIGN TREASURER PHONE	area code phone number (936) 537-5619	EXTENSION	
9 REPORT TYPE	January 15 30th day before e		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year 707/1 2015	THROUGH 12/	Day Year / 2015
11 ELECTION	ELECTION DATE  Month Day Year Primary  03 01 2016 General	ELECTION TYPE  Runoff Other Description  Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (IF known)  Montgomery  Cons	County Precinct stable
	GO ТО	PAGE 2	

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM C/OH COVER SHEET PG 2

14 C/OH NAME	Russell B. Find		Filer ID (Ethics Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S)	SUPPORT THE CANE	OTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURE DIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS IN URES.	OUT THE CANDIDATE'S OR OFFICEHOLDER'S
	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL		
	SPECIFIC	COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
Additional Pages			
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 4700.00
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 46119.00
EXPENDITURE TOTALS		POLITICAL EXPENDITURES OF \$100 OR LESS, SITEMIZED	\$ 0
	4. TOTAL	POLITICAL EXPENDITURES	\$ 39,009.59
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DA	\$ 13620.69
OUTSTANDING LOAN TOTALS		TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$	
18 AFFIDAVIT -			
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.  Signature of Candidate of Officeholder			
AFFIX, NOTARY SVAMI	NSEALABOVE	oy the said Russell B. Findlier J	a ship show 15 th
day of <u>JANUILE</u>		·	, this trie _/
Munner (	MACO	to certify which, witness my hand and seal of office.  Sherry L.M. Rope 4	Adinia. Assistan
Signature of officer a	dministering oath	Printed name of officer administering oath	Title of officer administering oath

## SUBTOTALS - COH

### FORM C/OH COVER SHEET PG 3

=		
19	FILER NAME 20 Filer ID (E	hics Commission Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	X SCHEDULEA1: MONETARY POLITICAL CONTRIBUTIONS	\$46119.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 8709 99
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 39 009,59
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
9.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
10.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
11.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Russell B. Fincher Jr. 4 Date 5 Full name of contributor 7 Amount of contribution (\$) out-of-state PAC (ID#:\_\_\_ Donnie O. Chumley 7/17/2015 6 Contributor address: City: State: Zip Code 77358 5000.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:\_ Date Amount of contribution (\$) Clara M. Fields 9/9/15 City; State; Zip Code Contributor address: 125.00 59 Promenade Street, Montgomery, Tx 77356 Principal occupation / Job title (See Instructions) · Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:\_ Date Amount of contribution (\$) Linda L. Gregg James M. Gregg City; State; Zip Code 750.00 9/10/2015 Contributor address; 16900 Regatta Cove, Jonestown, TX 78645 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:\_ Amount of contribution (\$) Halle Marie Properties LP 7/9/2015 500.00 Contributor address; 17510 Red Oak Drive, Suite 100, Houston, TX 77090 Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

## **MONETARY POLITICAL CONTRIBUTIONS**

### SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
2 FILER NAME	Russell B. Fincher Jr.		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC Robert Grote	(ID#)	7 Amount of contribution (\$)
9/28/2015	6 Contributor address; City; State, 12800 Briar Forest Drive, Unit 158, H		500.00
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor	(ID#)	Amount of contribution (\$)
9/2/2015	Contributor address; City; State; 13906 Longwood Drive, Willis, Tx 77318		1000.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor	(tD#:)	Amount of contribution (\$)
9/28/2015	Contributor address; City; State; 10075 Interstate 45 N, Conroe, Tx 773		100.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
10/5/2015		Zip Code	7500.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)

### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Russell B. Fincher, Jr. 4 Date 5 Full name of contributor name of contributor \_\_\_ out-of-state PAC (ID#\_ AAAA Discount Bail Bonds 7 Amount of contribution (\$) 10/15/2015 1000.00 6 Contributor address: City; State; Zip Code 505 N. Frazier, Conroe, TX 77301 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:\_\_\_ Date Amount of contribution (\$) Elizabeth H. McCreight 9/2/2015 ntributor address; City; State; Zip Code 63 Brookgreen Circle South, Montgomery, TX 250.00 Contributor address; Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#: Amount of contribution (\$) **David Finley** 10/30/2015 Contributor address; City; State; Zip Code 1000.00 14491 Laramie Trail, Montgomery, TX 77316 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:\_\_\_ Amount of contribution (\$) Lynda S. Henry Jim McLaughlin 8/9/2015 Contributor address; City; State; Zip Code 500.00 2615 Helberg, Houston, TX 77092 Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 4 Date 5 Full name of contributor ☐ out-of-state PAC (ID#: 7 Amount of contribution (\$) David T. Moore Deborah D. Moore 11/12/2015 1800.00 6 Contributor address: P. O. Box 628 City; State; Zip Code Richards, TX 77873 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:\_ Amount of contribution (\$) Timothy M. Tauer 11/12/15 114 Winthrop Harbor Street S Contributor address: 20.00 Montgomery, TX 77356 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) Gary Yount 11/12/15 Contributor address: City; State; Zip Code 20.00 P.O. Box 995 Willis, TX 77378 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) D. K. or A.K. 11/12/15 Contributor address; 7385 Adcock Acres Drive City; State; Zip Code 20.00 Conroe, TX Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Russell B. Fincher Jr. 4 Date 7 Amount of contribution (\$) out-of-state PAC (ID#:\_ William W. or Linda L. Mason 11/12/2015 6 Contributor address; 62 El Dorado 550.00 City; State; Zip Code Conroe, TX 77304 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:\_\_\_ Date Amount of contribution (\$) Stephen J. Brown -11/12/2015 Contributor address; 3415 Kiamesha Drive City; State; Zip Code 850.00 Missouri City, TX 77459 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#:\_\_\_\_ Amount of contribution (\$) Michael A McDougal 11/12/2015 Contributor address; City; State; Zip Code 600.00 5 Hartwick Ct. Conroe, TX 77304 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of contribution (\$) out-of-state PAC (ID#:\_\_\_\_ Truett T. Avrett 11/12/2015 100.00 Contributor address; 5813 Old Castle Way City; State; Zip Code Conroe, TX 77304 Employer (See Instructions) Principal occupation / Job title (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Russell B. Fincher, Jr. 4 Date 5 Full name of contributor 7 Amount of contribution (\$) out-of-state PAC (ID#: Clarence E. Smith 11/12/2015 6 Contributor address; 5510 Bee Creek Drive Willis, TX 77378 50.00 City; State; Zip Code 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#: Amount of contribution (\$) Kay Rideout 11/12/2015 Contributor address; City; State: Zip Code 13240 Lazy Lane 50.00 Willis, TX 77318 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#: Amount of contribution (\$) Blake Carpenter 11/12/15 Contributor address; City; State; Zip Code 30.00 114 W. Stewart Street Willis, TX 77378 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#: Amount of contribution (\$) Trinia Almas 11/12/15 Contributor address: 25.00 Cîty; State; Zip Code 12304 Pebble View Conroe, TX 77304 Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

## MONETARY POLITICAL CONTRIBUTIONS

### SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
2 FILER NAME	Russell B. Fincher Jr.		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC Susan D. Roberts	: (ID#:)	7 Amount of contribution (\$)
11/12/2015	6 Contributor address; City; State	; Zip Code	80.00
	P. O. Box 1678 Willis, TX 7737	8	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
11/12/2015	Contributor address; City: State 13921 Highway 105 W #278 Conroe, TX 77304	; Zip Code	300.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
11/12/2015		Zip Code	200.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor		Amount of contribution (\$)
11/12/2015	Contributor address; City; State 120 Bentwater Bay Circle Montgomery, TX 77356	; Zip Code	200.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
	ATTACH ADDITIONAL CODIES O		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Russell B. Finchen Jr. 4 Date 5 Full name of contributor 7 Amount of contribution (\$) Michael E. Potter 11/12/2015 6 Contributos address: Zip Code 13906 Longwood Dr. State; Zip Code 1000.00 Willis, TX 77318 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:\_\_\_ Date Amount of contribution (\$) Michael or Cynthia Hatcher 11/12/2015 Contributor address Vinispering Wind State; Zip Code 500.00 Willis, TX 77318 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date ut-of-state PAC (ID#:\_ Amount of contribution (\$) Barbara Baker Contributor address; 11/12/2015 City; State; Zip Code 500.00 12223 Thompson Road, Willis, TX 77318 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of contribution (\$) ut-of-state PAC (ID#:\_ John C. Holland 11/12/2015 . . . . . . . . . . . . . Contributor address; City; State; Zip Code 500.00 1573 Emerald Lakes Drive Willis, TX 77378 Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Russell B. Fincher Jr 4 Date 7 Amount of contribution (\$) Jack W. Bass 11/12/2015 6 Contributor address: 8606 Royal Cape Ct. City; State; Zip Code 100.00 Houston, TX 77095 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:\_ Date Amount of contribution (\$) Don Bradshaw 100.00 11/12/2015 Contributor address; City; State; Zîp Code 505 Edgewood Drive Montgomery, Tx 77356 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:\_ Date Amount of contribution (\$) J. A. McKenery F. W. Mckenery 11/12/2012 City; State; Zip Code Contributor address; 15459 Carmel 100.00 Willis, TX 77318 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:\_\_ Amount of contribution (\$) Janet Green William Green 11/12/2015 Contributor address; 13971 Millmac Road City; State; Zip Code 70.00 Conroe, TX 77303 Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

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#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Russell B. Fincher Jr 4 Date 5 Full name of contributor 7 Amount of contribution (\$) out-of-state PAC (ID#: Katherine E. Bihm 25.00 11/12/2015 6 Contributor address; 715 W. Davis Street City; State; Zip Code Conroe,TX 77301 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:\_ Date Amount of contribution (\$) Raymond E. Woodall Dorothy Woodall 11/12/2015 Contributor address; City; State; Zip Code 20.00 65 Fairfield Dr. Montgomery, TX 77356 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#: Amount of contribution (\$) Charles Leroy Todd Contributor address: 4532 Grand Oaks Drive 20.00 City; State; Zip Code 11/12/2015 Willis, TX 77378 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of contribution (\$) out-of-state PAC (ID#:\_\_\_\_\_ Art Jansen 11/27/2015 City; State; Zip Code Contributor address; 200.00 27 Benthaven Montgomery, TX 77356 Principal occupation / Job title (See Instructions) Employer (See Instructions) t ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Russell B. Fincher Jr. 4 Date 5 Full name of contributor 7 Amount of contribution (\$) out-of-state PAC (ID#:\_\_\_\_\_ Charles L. or Charlie Sue Lott 12/1/15 6 Contributor address: City; State; Zip Code 50.00 7 Panorama Dr. Conroe, TX 77304 8 Principal occupation / Job title (See Instructions) 9 Employer (See instructions) Full name of contributor out-of-state PAC (ID#:\_\_\_ Date Amount of contribution (\$) Jeremy M. Robbin 11/12/15 Contributor address; City; State; Zip Code 25.00 2019 Chelsea Creek Lane Spring, TX 77388 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date ut-of-state PAC (ID#:\_ Amount of contribution (\$) David or Sandy Randall 11/30/15 City: State; Zip Code 50..00 Contributor address; 9125 Comanche Cir Willis, TX 77378 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:\_\_\_\_\_ Amount of contribution (\$) Michael A. Guidry . . . . . . . . . . . . . . . . 12/5/15 7500.00 Contributor address; 1418 North Loop 336 City; State; Zip Code Conroe, Tx 77304 Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

## **MONETARY POLITICAL CONTRIBUTIONS**

## SCHEDULE A1

The	Instruction Guide explains how to complete thi	is form.	1 Total pages Schedule A1:
2 FILER NAME	Russell B. Fincher dr	-	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor ☐ out-of-state PA Raiph Allen		7 Amount of contribution (\$)
11/25/2015	6 Contributor address; City; State 18481 Gary Player Rd., Mongomery, TX 7	e; Zip Code 77316	500.00
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	iions)
Date		C (ID#:)	Amount of contribution (\$)
11/27/2015	Art Jansen  Contributor address; City; State 27 Benthaven, Montgomery, Tx 77356		239.00
Principal occup	vation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	name of contributor	
11/27/2015	11/27/2015 Contributor address; City; State; Zip Code P. O. Box 1283, Willis, TX 77378		1800.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	C (ID#:)	Amount of contribution (\$)
11/27/15	Contributor address; City; State P. O. Box 525, Willis, Tx 77378	e; Zip Code	-
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
		L	
	ATTACH ADDITIONAL COPIES O	F THIS SCHEDULE AS NE	FDFD

## MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Russell B. Fincher Jr. 4 Date 5 Full name of contributor 7 Amount of contribution (\$) David Carr 10/30/2015 1000.00 6 Contributor address; 3999 I-45, Conroe, TX 77304 City; State; Zip Code 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor ut-of-state PAC (ID#:\_\_ Date Amount of contribution (\$) Aiden Cassidy 12/5/2015 City; State; Zip Code Contributor address; 7500.00 82 West Shore, Montgomery, Tx. 77356 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#:\_\_\_ Amount of contribution (\$) Barb Sadler 12/4/2015 City; State; Zip Code Contributor address; 200.00 2570 Saint Beulah Chapel Road, Montgomery, TX 77316 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of contribution (\$) out-of-state PAC (ID#:\_ Contributor address; City; State; Zip Code Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

### SCHEDULE A2

	Th	ne Instruction Guide explains how to complete this form	n.	1 Total pages Schedule A2:
2	FILER NAM	Russell B. Fincher		3 Filer ID (Ethics Commission Filers)
4	TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$
	Date 11/10/2015	7 Contributor address; City; State; Zip Coo 5459 West Drive, Conroe, TX 77304		8 Amount of . 9 In-kind contribution description  500.00 Leather Cowhide ottoman  Check if travel outside of Texas, complete Schedule T
10	Principal occ	supation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	er (FOR NON-JUDICIAL)(See Instructions)
12	Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	rtor's job title (FOR 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)		
1	Date 1/10/2015	Full name of contributor ☐ out-of-state PAC (ID#:		Amount of In-kind contribution Contribution \$ description 649.99 Oil Painting  Check if travel outside of Texas, complete Schedule T
	Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICIAL)(See Instructions)
	Contributor's	principal occupation (FOR JUDICIAL)	Contribu	tor'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)		
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

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

### SCHEDULE A2

Tì	ne Instruction Guide explains how to complete this for	n.	1 Total pages Schedule A2:
2 FILER NAME Russell B. Fincher		3 Filer ID (Ethics Commission Filers)	
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRI	BUTIONS	\$
5 Date 11/10/2015 10 Principal occ	6 Full name of contributor out-of-state PAC (ID#		8 Amount of 9 In-kind contribution description 100.00 Leather Vest Concealable  Check if travel outside of Texas, complete Schedule Ter (FOR NON-JUDICIAL) (See Instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	ntor's job title (FOR JUDICIAL) (See Instructions)
		13 COMME	itor's job title (FOR JODICIAL) (See instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 11/10/2015	Full name of contributor ☐ out-of-state PAC (ID#:		Amount of In-kind contribution Contribution \$ description 60.00 Beretta Competition Shooting Shied  Check if travel outside of Texas, complete Schedule T
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	r (FOR NON-JUDICIAL)(See Instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	tor'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)		
	ATTACH ADDITIONAL CODIES OF T	HIG SOUTH	I E A C MEEDED
lf ·	ATTACH ADDITIONAL COPIES OF T		

Forms provided by Texas Ethics Commission

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## SCHEDULE A2

n.	1 Total pages Schedule A2:
3	3 Filer ID (Ethics Commission Filers)
SUTIONS	\$
 301	Amount of Solution Solution Solution description  80.00 Custom Knife  Check if travel outside of Texas, complete Schedule T  (FOR NON-JUDICIAL) (See Instructions)
	TO UNION O
13 Contribute	or's job title (FOR JUDICIAL) (See Instructions)
<b>15</b> Law firm (	of contributor's spouse (if any) (FOR JUDICIAL)
	Amount of . In-kind contribution Contribution \$ . description  650.00 . Stainless Watch  Check if travel outside of Texas, complete Schedule T
Employer	(FOR NON-JUDICIAL)(See Instructions)
Contributo	or's job title (FOR JUDICIAL) (See Instructions)
Law firm o	of contributor's spouse (if any) (FOR JUDICIAL)
'HIS SCHEDUL	E AS NEEDED
	301  11 Employer  13 Contribute  15 Law firm  Contribute  Law firm

Revised 02/27/2015

### SCHEDULE A2

TH	ne Instruction Guide explains how to complete this form	n.	1 Total pages Schedule A2:
<sup>2</sup> FILER NAME Russell B. Fincher Jr.		3 Filer ID (Ethics Commission Filers)	
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$
5 Date 11/10/2015	6 Full name of contributor out-of-state PAC (ID#:		8 Amount of 9 In-kind contribution description 350.00 Hitachi -3 piece cordless combo kit  Check if travel outside of Texas, complete Schedule T
10 Principal occ	expation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	er (FOR NON-JUDICIAL)(See Instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 11/10/2015	Full name of contributor  out-of-state PAC (ID#:		Amount of In-kind contribution description  125.00 Silver Dollar Money Clip  Check if travel outside of Texas, complete Schedule T
Principal occ	supation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	FOR NON-JUDICIAL)(See Instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	ntor's job title (FOR JUDICIAL) (See Instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

### SCHEDULE A2

The instruction Guide explains ho	w to complete this form.	1 Total pages Schedule A2:	
2 FILER NAME RUSSEll B. Finch	ier Jr.	3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND P	OLITICAL CONTRIBUTION	NS \$	
5 Date 6 Full name of contributor Daniel & Brenda 7 Contributor address; 12972 Brace Rosc		8 Amount of 9 In-kind contribution description  Wooden  Snowman Family  Check if travel outside of Texas, complete Schedule T	
10 Principal occupation / Job title (FOR NON-JUDIO	CIAL) (See Instructions) 11 En	nployer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIA	AL) 13 Co	ntributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)	) <b>15</b> La	w firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if ar	ny) (FOR JUDICIAL)		
Date Full name of contributor   MIKE MEDVED  Contributor address;  12065 Interstate 4	City; State; Zip Code	Amount of In-kind contribution description  20:00 Food Processer  Check if travel outside of Texas, complete Schedule T	
Principal occupation / Job title (FOR NON-JUDIO	CIAL) (See Instructions) Em	ployer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIA	AL) Co	ntributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)	Lav	Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if ar	ny) (FOR JUDICIAL)		

### SCHEDULE A2

Th	ne Instruction Guide explains how to complete this form	n.	1 Total pages Schedule A2:
2 FILER NAME	Russell B. Fincher, Ur.		3 Filer ID (Ethics Commission Filers)
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$
	6 Full name of contributor out-of-state PAC (ID#	<sub>r</sub>	8 Amount of 9 In-kind contribution description  Contribution \$ description  Leather  500,00 Chair-with  Ottoman  Check if travel outside of Texas, complete Schedule Ter (FOR NON-JUDICIAL) (See Instructions)
10 Principal occ	supation / Job title (FOR NON-JUDICIAL) (See Instructions)	II Linguoya	R (FOR NOW-DODIONAL/LOGG HIGH ADDROVE)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	rtor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
16 if contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date !\/(0(2の)5	Full name of contributor out-of-state PAC (ID#:  Bartholet Furniture  Contributor address; City; State; Zip Contributor address; City; State; Zip Control,	de T <sub>X</sub> 77384	Amount of In-kind contribution Contribution \$ description  2000,00 College Station Trip  Check if travel outside of Texas, complete Schedule T
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICIAL)(See Instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	rtor's job title (FOR JUDICIAL) (See Instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
	ATTACH ADDITIONAL COPIES OF T	HIS SCHEDI	ILE AS NEEDED

## SCHEDULE A2

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A2:	
2 FILER NAM	Russell B. Fincher.Jr.		3 Filer ID (Ethics Commission Filers)	
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$	
5 Date	Date 6 Full name of contributor out-of-state PAC (ID#)  1/5/2015 7 Contributor address; City; State; Zip Code 13245 F.M. 1097 W., Wills, TX 77316		8 Amount of Sin-kind contribution description  200,00 Texans Football  Smoker  Check if travel outside of Texas, complete Schedule T	
10 Principal occ	supation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	er (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)	
16 if contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Wilkes Badgss Pita		Amount of In-kind contribution Contribution \$ description  500.00 Fire Pi+	
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICIAL)(See Instructions)	
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	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)			
	ATTACH ADDITIONAL COPIES OF T	HIS SCHEDL	ILE AS NEEDED	

### SCHEDULE A2

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A2:		
2 FILER NAME	Russell B. Fincher Jr.		3 Filer ID (Ethics Commission Filers)		
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$		
5 Date 11/12/2015			8 Amount of Contribution \$	9 In-kind contribution description	
7 17 120 20 10	Contributor address; City; State; Zip Cod 507 S, Danville, Willis, TX 77378		200.00  Check if travel out	Texas flag picture  side of Texas, complete Schedule T	
10 Principal occ	upation / Job title (FOR NON-JUDICIAL)(See Instructions)	11 Employe	FOR NON-JUDIC	IAL)(See Instructions)	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	ıtor's job title (FOR J	UDICIAL) (See Instructions)	
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	of contributor's spor	use (if any) (FOR JUDICIAL)	
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor		Amount of . In-kind contribution Contribution \$ . description		
11/12/2015	Contributor address; City; State; Zip Cod	 de	350.00	Area Rug	
	507 S. Danville, Willis, TX 77378		Check if travel outside of Texas, complete Schedule T		
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDIC	IAL)(See Instructions)	
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	Contributor's job title (FOR JUDICIAL) (See Instructions)		
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm	Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
		· · · · · · · · · · · · · · · · · · ·			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

### SCHEDULE A2

The Instruction Guide explains how to complete this form	1 Total pages Schedule A2:		
Russell B. Fincher	3 Filer ID (Ethics Commission Filers)		
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS \$		
5 Date 6 Full name of contributor out-of-state PAC (ID#			
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 (FOR 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  2  100,00 Gift Certificates  Check if travel outside of Texas, complete Schedule T  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)			
ATTACH ADDITIONAL CODIES OF T	NIC COUEDIN E AC MEEDED		

## SCHEDULE A2

Th	ne Instruction Guide explains how to complete this form	n.	1 Total pages Schedule A2:
2 FILER NAM	Russell B. Fincher Ur.		3 Filer ID (Ethics Commission Filers)
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRI	BUTIONS	\$
5 Date	Date  6 Full name of contributor out-of-state PAC (ID#)  Will's Furniture  11 [10 205 7 Contributor address; City; State; Zip Code  507 5. Danville Willis, Tx 71876		8 Amount of Contribution \$ In-kind contribution description    OO, OO   Rustic Stool
	supation / Job title (FOR NON-JUDICIAL) (See Instructions)	l	Check if travel outside of Texas, complete Schedule T  (FOR NON-JUDICIAL)(See Instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribut	or's job title (FOR 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)	<b>I</b>	
Date	Full name of contributor out-of-state PAC (ID#	de Willis	Amount of In-kind contribution description  150,00 refrigerator  Check if travel outside of Texas, complete Schedule T
Principal occ	upation / 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)		

### SCHEDULE A2

The Instruction Guide explains how to complete this form	m. 1 Total pages Schedule A2:			
2 FILER NAME RUSSELL B. Fincher	3 Filer ID (Ethics Commission Filers)			
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS \$			
5 Date 6 Full name of contributor □ out-of-state PAC (ID#	8 Amount of Contribution \$ 9 In-kind contribution description  2000,00 Lumber  Check if travel outside of Texas, complete Schedule T  11 Employer (FOR NON-JUDICIAL) (See Instructions)			
12 Contributor's principal occupation (FOR JUDICIAL)	13 Contributor's job title (FOR 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  de  Check if travel outside of Texas, complete Schedule T  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)				
ATTACH ADDITIONAL COPIES OF T	THIS SCHEDULE AS NEEDED			

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

## SCHEDULE F1

#### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Giff/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Selecter/Manes/Contract Labor

Candidate/Officeholder/Politica	200111111111111111111111111111111111111	Vages/Contract Labor	Other (enter a category not listed above)
	The Instruction Guide explains how to o	complete this form.	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Russell B. Fincher, Jr.		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
7/15/2015	Graphic Impressions		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
920.00	P. O. Box 388 Conroe, TX 7730	5	
8	(a) Category (See categories listed at the top of this schedule)	(b) Description	
PURPOSE		Check if travel	outside of Texas, complete Schedule T
OF		Check if Austir	n, TX, officeholder living expense
EXPENDITURE	Printing Expense		• •
		Campaigr	1
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
7/15/2015	North Shore Republican Women		
Amount (\$)	Payee address; City; State; Zip Code		
200.00	P. O. Box 524 Willis, Tx 77378		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)  Advertising Expense		outside of Texas, complete Schedule T
Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name	Office sought	Office held
Date 7/15/2015	Payee name Donna Wick Public Relations	,	
Amount (\$)	Payee address; City; State; Zip Code		
5000.00	2211 Rayford Road #111-44	Spring, TX 7738	36
	Category (See categories listed at the top of this schedule)	Description	
PURPOSE		Check if travel	outside of Texas, complete Schedule T
OF	Consulting Expense	Check if Austir	n, TX, officeholder living expense
EXPENDITURE			
		Publi	c Relations
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NE	EDED

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Candidate/Officeholder/Politica	The Instruction Guide explains how to c	omplete this form.	Other (enter a category not instead above)	
1 Total pages Schedule F1:				
<sup>4</sup> Date 7/15/2015	5 Payee name Lake Conroe Republican Women			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
250.00	P. O. Box 737 Mont	gomery, TX 7	7357	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)  Advertising Expense		el outside of Texas, complete Schedule T in, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name H	Office sought	Office held	
Date 8/26/15	Payee name  Conroe Noon Lion's Club			
Amount (\$)	Payee address; City; State; Zip Code			
110.00	P. O. Box 1135 roe, TX 77305			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)  Fees	Check if Austir	I outside of Texas, complete Schedule T	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
9/3/15	Will Metcalf			
Amount (\$) 100.00	Payee address; City; State; Zip Code P. O. Box 454, Conroe	e, TX 77305		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)  Contribution	1 =		
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate / Officeholder пате Н	Office sought	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NE	EDED	

## SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Waces/Contract Labor

Candidate/Officeholder/Politica	I Committee Legal Services Salaries/V The Instruction Guide explains how to o	Vages/Contract Labor Other (enter a category not listed above)  complete this form.		
1 Total pages Schedule F1:	2 FILER NAME Russell B. Fincher, Jr.	3 Filer ID (Ethics Commission Filers)		
4 Date	5 Payee name			
8/24/2015	AT&T			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
171.91	2948 I-45 North Ste 800 Col	nroe, Tx 77303		
8	(a) Category (See categories listed at the top of this schedule)	(b) Description		
PURPOSE		Check if travel outside of Texas, complete Schedule T		
OF EXPENDITURE	Other	Check if Austin, TX, officeholder living expense		
		Cell Phone Expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held		
Date	Payee name			
8/25/2015	Office Depot			
Amount (\$)	Payee address; City; State; Zip Code			
64.93	1319 W. Davis St., Conroe, T	x 77304		
·	Category (See categories listed at the top of this schedule)	Description		
PURPOSE		Check if travel outside of Texas, complete Schedule T		
OF EXPENDITURE	Other	Check if Austin, TX, officeholder living expense		
_	Outer	Office Supplies		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held		
Date	Payee name			
9/18/2015	Donna Wick Public Relations	·		
Amount (\$)	Payee address; City; State; Zip Code			
2500.00	2211 Rayford Road #111-44 Spring, TX 77386			
	Category (See categories listed at the top of this schedule)	Description		
PURPOSE	0 " -	Check if travel outside of Texas, complete Schedule T		
OF EXPENDITURE	Consulting Expense	Check if Austin, TX, officeholder living expense		
		Public Relations		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held		
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

## SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Fcod/Beverage Expense Grift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

	The Instruction Guide explains how to co	omplete this form.		
1 Total pages Schedule F1:	2 FILER NAME Russell B. Fincher	lr.	3 Filer ID (Ethics Commission Filers)	
4 Date 9/13/2016				
6 Amount (\$) 114.65	7 Payee address; City; State; Zip Code 800 Bentwater Drive Montgome	ery, TX 77356		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)  Food Expense	Check if Austin	outside of Texas, complete Schedule T n, TX, officeholder living expense re Republican Women 24, Willis, TX 77378	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
10/5/2015	Sam's Club			
Amount (\$) 108.51	Payee address; City; State; Zip Code 2000 Westview Blvd Conroe, TX 77304			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)  Other	Check if Austin	outside of Texas, complete Schedule T  TX, officeholder living expense  for parade	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
10/12/2015	Willis Education Fund			
Amount (\$)	Payge address: City; State; Zip Code 204 W. Rodgers, Willis, TX 77378			
500.00		•		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)  Contribution	Check if Austin	outside of Texas, complete Schedule T , TX, officeholder living expense 1 Foundation	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

## SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Politing Expense Printing Expense Salaries/Wages/Contract Labor

Candidate/Officeholder/Politica		:/Wages/Contract Labor Other (enter a category not listed above)		
The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	2 FILER NAME Russell B. Fincher	3 Filer ID (Ethics Commission Filers)		
4 Date 10/12/2015	5 Payee name Jim's Hardware			
6 Amount (\$)	7 Payee address: City; State; Zip Code 14460 Liberty Street, I	Montgomery		
21.64	TX, 77356			
8	(a) Category (See categories listed at the top of this schedule)	(b) Description		
PURPOSE	<b>0</b> 45	Check if travel outside of Texas, complete Schedule T		
OF EXPENDITURE	Other	Check if Austin, TX, officeholder living expense		
		Tie Down straps		
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held		
Date	Payee name			
10/15/2015	West Conroe Baptist Church			
Amount (\$)	Payee address; City; State; Zip Code			
200.00	1855 Longmire Rd. Conroe, TX 77304			
	Catagory (Constitution of the constitution of	Paradialisa .		
	Category (See categories listed at the top of this schedule)	Description  Check if travel outside of Texas, complete Schedule T		
PURPOSE OF		Check if Austin, TX, officeholder living expense		
EXPENDITURE	Contribution	Golf Tournament		
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held		
Date 10/18/2015	Payee name Donna Wick Public Relations			
Amount (\$)	Payee address: City; State; Zip Code 2211 Rayford Road #111-44,	Spring TY 77386		
2500.00	2211 Kaylord Koad #111-44,	3pmg, 17 11300		
	Category (See categories listed at the top of this schedule)	Description		
PURPOSE		Check if travel outside of Texas, complete Schedule T		
OF EXPENDITURE	Consulting Expense	Check if Austin, TX, officeholder living expense		
		Public Relations		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held		
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### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

	The Instruction Guide explains how to c	omplete this form.	
1 Total pages Schedule F1:	2 FILER NAME Russell B. Fincher, Jr.		3 Filer ID (Ethics Commission Filers)
<sup>4 Date</sup> 11/12/2015	5 Payee name Juke Boy Jim & Joan of Rock		
6 Amount (\$) 200.00	7 Payee address; City; State; Zip Code 3415 Vandyke Drive, Spring, TX	77388	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)  Event Expense		outside of Texas, complete Schedule T n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name I	Office sought	Office held
Date	Payee name		
11/16/2015	Kuntry Katfish Catering		
Amount (\$) 6765.64	Payee address; City; State; Zip Code 5855 West Davis, Conroe, TX 77304		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)  Event Expense		outside of Texas, complete Schedule T , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 11/12/2015	Payee name <b>Krogers</b>	- 10-10-10-10-10-10-10-10-10-10-10-10-10-1	
Amount (\$) 29.99	Payee address; City; State; Zip Code 12466 Interstate I-45, Willis, Tx	c 77378	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)  Event Expense		outside of Texas, complete Schedule T , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED

## SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Russell B. Fincher, JR .	3 Filer ID (Ethics Commission Filers)		
4 Date 11/1/2015	5 Payee name Krogers			
6 Amount (\$) 41.05	7 Payee address: City; State; Zip Code 12466 Interstate I-45 North, V	Villis, TX 77378		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)  Other	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Candy for Parade		
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held		
Date	Payee name			
11/5/2015	Walden Yacht Club			
Amount (\$) 32.00	13101 Melville Drive, Montgomery, TX 77356			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)  Food Expense	Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Lake Conroe Repubican Women  P. O. Box, Montgomery, TX 77356		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held		
Date 11/9/2015	Payee name  K-Star Country	X		
Amount (\$) 180.00	Payee address; City; State; Zip Code 14887 Hwy 105 W, Montgo	omery, TX 77356		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)  Advertising	Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Advertising ad		
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

## SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Politing Expense Printing Expense Salaries/Wapes/Contract Labor

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Russell B. Fincher, Jr.		3 Filer ID (Ethics Commission Filers)
<sup>4 Date</sup> 11/16/2015	5 Payee name Montgomery County Republican Party		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
1000.00	P. O. Box 45, Conroe, TX 77305		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)  Fees		outside of Texas, complete Schedule T , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 11/16/2015	Payee name Shooter's Station		
Amount (\$) 1200.00	Payee address; City; State; Zip Code 13748 Highway 105 West, Conroe, TX 77304		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)  Fundraising Expense	-	outside of Texas, complete Schedule T TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name Wilke's Badass Pits		
11/18/2015			
Amount (\$) 500.00	Payee address; City; State; Zip Code 98 Avenue A, Conroe, TX 77301		
000.00	Cotogony (Connection listed ablication of this cash study)	Daniel III	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)  Fundraising Expense	Check if Austin,	outside of Texas, complete Schedule T TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Politing Expense Printing Expense Salaries/Waces/Contract Labor

	Candidate/Oniceriolder/Politica		vages/Contract Labor	Other (enter a category not listed above)
	<u></u>	The Instruction Guide explains how to o	complete this form.	
1	Total pages Schedule F1:	Russell B. Fincher, Jr.		3 Filer ID (Ethics Commission Filers)
4	Date 10/26/2015	<sup>5</sup> Payee name Brandon Crieghton Campaign		
6	Amount (\$)	7 Payee address; City; State; Zip Code	<del></del>	
	100.00	2257 N. Loop 336, Suite 140-33	36, Conroe, TX 77	7304
	1	• •	<b>,</b>	
_			1	
8	ı	(a) Category (See categories listed at the top of this schedule)	(b) Description	· · · · · · · · · · · · · · · · · · ·
	PURPOSE			outside of Texas, complete Schedule T
	OF EXPENDITURE	Contribution	Check if Austin	n, TX, officeholder living expense
			Campaign	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
_	expenditure to benefit 0/01	1		
	Date	Payee name		
	10/26/2015	Conroe Noon Lion's Club		
	10/20/2010			
	Amount (\$)	Payee address; City; State; Zip Code		
	110.00	P. O. Box 1135, Conroe , TX 77	305	
	110.00			
_		Ontoney (Co	T	
	!	Category (See categories listed at the top of this schedule)	Description Charles & Arraya	of Tours consists Rehadule T
	PURPOSE OF	Fees	1 ====	outside of Texas, complete Schedule T
	EXPENDITURE	1 553	Monthly D	n, TX, officeholder living expense
	•		With the state of	ues
	On the later ONLY is already	Candidate / Officeholder name	Office sought	Office held
Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH				
	Date	Payee name		
	40/40/0046	San Jacinto Lodge		
	10/16/2016	20112421110 2243		
	Amount (\$)	Payee address; City; State; Zip Code		
	200.00	106 Bell Street, Willis, TX 77378		
		, , , , , , , , , , , , , , , , , , , ,		
		Catagory (Caracterial listed at the tan of this pahedule)	Description	
		Category (See categories listed at the top of this schedule)	Description	outside of Texas, complete Schedule T
	PURPOSE OF	Donation		• •
	EXPENDITURE	Donation		n, TX, officeholder living expense
			Fundra	aiser
	Consider ONEY & disease	Candidate / Officeholder name	Office sought	Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Office Sought	Onice neig
_		ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

## SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers	i)
	Russell B. Fincher, Jr.		
4 Date 11/17/2015	5 Payee name D & M True Value		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
632.89	400 W. Montgomery, Willis, TX	77378	
8	(a) Category (See categories listed at the top of this schedule)	(b) Description	
PURPOSE		Check if travel outside of Texas, complete Schedule T	
OF EXPENDITURE	Fundraising Expense	Check if Austin, TX, officeholder living expense	
		Fundraising Items	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held	
Data	Payee name		
Date			
11/18/2015	C C PLUS		
Amount (\$)	Payee address; City; State; Zip Code		
1544.73	4205 West Davis Street, Conro	e, TX 77304	
	Category (See categories listed at the top of this schedule)	Description	
PURPOSE		Check if travel outside of Texas, complete Schedule T	
OF EXPENDITURE	Check if Austin, TX, officeholder living expense		
	Fundraising Expense	Fundraising items	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	
Date	Payee name		
11/23/2015	A T & T		
Amount (\$)	Amount (\$) Payee address; City; State; Zip Code 2948 I-45 North Ste 800, Conroe, TX 77303		
220.57	Z840 F43 North Ste 000, Com	.0e, 1 <i>x 113</i> 03	
220.01	· · · · · · · · · · · · · · · · · · ·		
	Category (See categories listed at the top of this schedule)	Description	
PURPOSE	ı	Check if travel outside of Texas, complete Schedule T	
OF EXPENDITURE	other	Check if Austin, TX, officeholder living expense	
		Cell phone campaign	
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held	
expenditure to benefit C/OH			
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED	

### SCHEDULE F1

#### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense Legai Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Travel in District

Travel Out Of District Other (enter a category not listed above)

Transportation Equipment & Related Expense

Solicitation/Fundraising Expense

The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Russell B. Fincher, Jr. 4 Date 5 Payee name 11/18/2015 Montgomery County 6 Amount (\$) 7 Payee address; City; State; Zip Code 600 Gerald Street, Willis, TX 77378 250.00 (b) Description 8 (a) Category (See categories listed at the top of this schedule) Check if travel outside of Texas, complete Schedule T **PURPOSE** OF Check if Austin, TX, officeholder living expense **EXPENDITURE Event Expense Building Rental** Candidate / Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name Julie Knollkamper 11/20/2015 Amount (\$) Payee address; City; State; Zip Code 12115 Brightwood Drive, Montgomery, TX 77356 317.09 Category (See categories listed at the top of this schedule) Description Check if travel outside of Texas, complete Schedule T **PURPOSE** OF Check if Austin, TX, officeholder living expense Event Expense **EXPENDITURE** Reinbursement for Decorations Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Payee name Date **Graphic Impressions** 11/17/2015 Amount (\$) City; State; Zip Code P. O. Box 388, Conroe, TX 77305 7000.00 Category (See categories listed at the top of this schedule) Description Check if travel outside of Texas, complete Schedule T **PURPOSE** OF **Printing Expense** Check if Austin, TX, officeholder living expense EXPENDITURE Printing Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

## SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica	al Committee Legal Services Salaries/M	/ages/Contract Labor	Other (enter a category not listed above)
The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	2 FILER NAME Russell B. Fincher, Jr	•	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	· · · · · ·	
12/1/2015	Lone Star Star Signs		
6 Amount (\$)	7 Payee address; City; State; Zip Code 21973 Eva Street, Montgome	ery Tx 77358	
4768.75	= 1010 = 10 0000, Workgomery, 1X 77000		
8	(a) Category (See categories listed at the top of this schedule)	(b) Description	
PURPOSE		Check if travel	outside of Texas, complete Schedule T
OF EXPENDITURE	Printing Expense	Check if Austir	n, TX, officeholder living expense
		Signs	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date Payee name			
12/8/2015	Dittert Rubber Stamp LTD		
Amount (\$)	Payee address; City; State; Zip Code 915 Old Montgomery Road, Conroe, TX 77301		
41.08	915 Old Montgomery Road, Co	onroe, IX //	301
41.00			
	Category (See categories listed at the top of this schedule)	Description	
PURPOSE		Check if travel	outside of Texas, complete Schedule T
OF EXPENDITURE	other  Check if Austin, TX, officeholder living expense  Office Supplies		
DA ENDITORE			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 12/14/2015	Payee name Sam Club's		
Amount (\$)	Payee address; City; State; Zip Code _		
· -	Payee address; City; State; Zip Code 2000 Westview Blvd., Conroe,	ΓX 77304	
49.43			
	Category (See categories listed at the top of this schedule)	Description	
PURPOSE		Check if travel	outside of Texas, complete Schedule T
OF EXPENDITURE	other	Check if Austin,	TX, afficeholder living expense
	Oute	Candy for	or parade
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

### SCHEDULE F1

#### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Politing Expense Printing Expense Salaries/Wages/Contract Labor

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Russell B. Fincher, Jr.	3 Filer ID (Ethics Commission Filers)	
4 Date 12/10/2015	5 Payee name D & M True Value		
6 Amount (\$) 143.93	7 Payee address; City; State; Zip Code 400 West Montgomery,	Willis, TX 77378	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)  Other /Fundraising Expense	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Power supply/auction items	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name I	Office sought Office held	
Date 12/10/2015	Payee name  Montgomery County ESD 1		
Amount (\$) 750.00	Payee address; City; State; Zip Code 200 S Kennedy Street Willis, TX 77378		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)  Advertising Expense	Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Billboard rental	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held	
Date 12/4/2015	Payee name Sun Mart #4		
Amount (\$) 35.89	Payee address; City; State; Zip Code  401 South Danville Street Willis, TX 77378		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)  Food Expense	Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Food & Drinks for campaign workers	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

## SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Politing Expense Printing Expense Salaries/Kanes/Contract Labor

Candidate/Officeholder/Politics	al Committee Legal Services Salaries  The Instruction Guide explains how to	SWages/Contract Labor Other (enter a category not listed above)  c complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
- Total pages contains 1 1.	Russell B. Fincher, Jr.	
4 Date 12/24/2015	5 Payee name AT&T	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
134.91	2948 I-45 North Ste 800, Conroe, TX 77303	
8	(a) Category (See categories listed at the top of this schedule)	(b) Description
PURPOSE		Check if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Other	Check if Austin, TX, officeholder living expense
		Cell phone expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name H	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
	Category (See categories listed at the top of this schedule)	Description
PURPOSE		Check if travel outside of Texas, complete Schedule T
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
Complete ONLY if direct expenditure to benefit C/OH		Office sought Office field
Date	Payee name	
Amount (\$)	Payee address; Cîty; State; Zip Code	
	Category (See categories listed at the top of this schedule)	Description
PURPOSE OF		Check if travel outside of Texas, complete Schedule T
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
expenditure to benefit C/OH	1	
	ATTACH ADDITIONAL COPIES OF THI	S SCHEDIII E AS MEEDED
	AT IACH ADDITIONAL COPIES OF THE	3 JOHEDULE AS NEEDED