CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:		
3 CANDIDATE/ OFFICEHOLDER NAME	MS/MRS (MR) FIRST David	м ₁	OFFICE USE ONLY		
INAIVIE	NICKNAME LAST	SUFFIX	Date Received		
	Hill	Sr	COUNTY ELECTIONS RELECTIONS		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CO	STATE; ZIP CODE	FEB 0 1 735 FEB 0 1 735 WAR		
Change of Address	Magnolia Tx -	17355	Q Variable		
5 CANDIDATE/ OFFICEHOLDER PHONE	(281) 259 6493	EXTENSION	Date Hand-delivered or parte Postmarked		
6 CAMPAIGN TREASURER	MS (MRS) MR FIRST Angela	MI	Receipt # Amount \$ Date Processed		
NAME	NICKNAME LAST	SUFFIX	Date Processed		
	Angie Kula		Date Imaged		
7 CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX PLEASE); APT / SU		ZIP CODE		
ADDRESS	19107 Forest Ridge	e Dr			
(Residence or Business)					
	Magnolia Tx	17355			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (713) 806 774	2 EXTENSION			
9 REPORT TYPE	January 15 30th day before elec		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)		
10 PERIOD	Month Day Year	Month	Day Year		
COVERED	Nonth Day Year AOIL		al / aolb		
11 ELECTION	ELECTION DATE Month Day Year Primary General	ELECTION TYPE Runoff Other Description Special			
12 OFFICE	OFFICE HELD (If any) Montgomery County	13 OFFICE SOUGHT (if known)			
	Constable Pct 5				
GO TO PAGE 2					

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME		15 Fi	ller ID (Ethics Commission Filers)		
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.				
	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC	,			
		COMMITTEE CAMPAIGN TREASURER NAME			
Additional Pages					
		COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ -0-		
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 200000		
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 205.35		
	4. TOTAL	\$ 2539.59			
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD		\$ 23 985,89		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ - 0		
18 AFFIDAVIT					
	<i>nggaranggangganggang</i> Shelby arnold	I swear, or affirm, under penalty of perjury true and correct and includes all informati under Title 15. Election Code.			
	RY PUBLIC - STATE OF TE ID # 00424213-5 Commission Expires 03-26-20		a or Officeholder		
Signature of Candidate of Cinceriolder					
AFFIX NOTARY STAMP/SEALABOVE					
Sworn to and subscribed before me, by the said, this the,					
day of Aconomy	ر ما (م ا	to certify which, witness my hand and seal of office.			
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath					

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	19 FILER NAME 20 Filer ID (Ethics Cor		
21	SUBTOTAL AMOUNT		
1.	1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	3. SCHEDULE B: PLEDGED CONTRIBUTIONS		
4.	SCHEDULE E: LOANS	\$.	
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 2334 24	
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$	
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/O	н \$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$	
12.	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. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) constable David Hill out-of-state PAC (ID#: 7 Amount of contribution (\$) Will Perry 6 Contributor address; 95 N Bacopa City; State; Zip Code 8 Principal occupation / Job title (See Instructions) Full name of contributor Date out-of-state PAC (ID#:__ Amount of contribution (\$) Contributor address; City; State; Zip Code Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor ut-of-state PAC (ID#:_ Amount of contribution (\$) Contributor address; City; State; Zip Code Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor ut-of-state PAC (ID#: Amount of contribution (\$) 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.

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

Revised 9/8/2015

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica	Fees Or Food/Beverage Expense Pood/Beverage Expense Pood/Beverage Expense Proof Food/Beverage Expense Proof Food/B	oan Repayment/Reimbursement office Overhead/Rental Expense folling Expense rinting Expense alaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)			
Credit Card Payment						
1 Total pages Schedule F1:	Constable David Hil	1	3 Filer ID (Ethics Commission Filers)			
4 Date	Pizzaiolo's					
6 Amount (\$)	7 Payee address; City; State; Zip Code 18304 FM 1488					
8	Magnolia Tx 77354 (a) Category (See Categories listed at the top of this sched	dule) (b) Description				
PURPOSE OF EXPENDITURE	Food Beverage	Check if travel o	outside of Texas. Complete Schedule T. in, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought	Office held			
Date	Payee name					
1/20/9010	Signs of Magnolia	·				
Amount (\$)	Payee address; City; State; Zip C					
21993.93	PD Box 613 Magnolia TX 7735	3				
	Category (See Categories listed at the top of this sched	edule) Description	utside of Texas. Complete Schedule T.			
PURPOSE OF EXPENDITURE	Advertising		n, TX. officeholder living expense			
)	Campai	an Sians			
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought	Office held			
Date	Payee name					
1/20/2016	Magnolia Hardwa					
# 1000 co	Pave address; FM IU88	Code				
	Magnolia Tx 773	55,				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sche		outside of Texas, Complete Schedule T.			
	Advertising	Check if Austi	in, TX, officeholder living expense For Campaign Signs			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought	Office held			
`	ATTACH ADDITIONAL COPIES OF	F THIS SCHEDULE AS NE	EDED			
	ALIAOTADDITIONAL OUT ILO	Hata to U.S.	Revised 9/8/201			

EXPENDITURE CATEGORIES FOR BOX 8(a)