

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

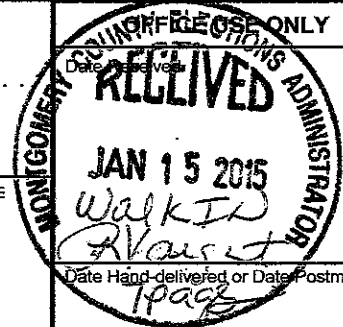
1 ACCOUNT #
(Ethics Commission filers)
00062797

2 PAGE #
1 of 7

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR FIRST MI
Mr. Jerry

NICKNAME LAST SUFFIX
J D Lambright



4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
PO Box 1428
Conroe, TX 77305

Change of Address

Receipt # Amount

5 CAMPAIGN
TREASURER
NAME

MS / MRS / MR FIRST MI
Mrs. Belinda

NICKNAME LAST SUFFIX
Lambright

Date Processed

Date Imaged MM/DD/YY
MM 1/16/15

6 CAMPAIGN
TREASURER
ADDRESS
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
13920 Amber Lane
Montgomery, TX 77316

7 CAMPAIGN
TREASURER
PHONE

AREA CODE PHONE NUMBER EXTENSION
(713) 553-7586

8 REPORT TYPE

January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only)
 July 15 8th day before election Exceeded \$500 limit Final report (Attach C/OH - FR)

9 PERIOD
COVERED

Month Day Year MONTH DAY YEAR
07/01/2014 THROUGH 12/31/2014

10 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year Primary Runoff General Special
11/06/2012

11 OFFICE

OFFICE HELD (if any)
Montgomery County Attorney

12 OFFICE SOUGHT (if known)

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

13 C/OH NAME Lambright, Jerry (Mr.)

14 ACCOUNT # (Ethics Commission filers)
00062797

15 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures 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. ..

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS
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additional pages

16 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 100.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 0.00

4. TOTAL POLITICAL EXPENDITURES \$ 1,183.00

CONTRIBUTION BALANCE

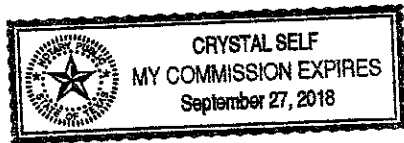
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00

17 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.



J. D. Lambright
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said J D Lambright, this the 15 day of January, 20 15, to certify which, witness my hand and seal of office.

Crystal Self
Signature of officer administering oath

CRYSTAL SELF
Print name of officer administering oath

NOTARY PUBLIC
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 3/7	
2 FILER NAME Lambright, Jerry (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062797	
4 Date 09/02/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lake Conroe Area Republican Women PAC 6 Contributor address; City; State; Zip Code P.O. Box 737 Montgomery, TX 77356	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
		10 Employer (See Instructions)	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/4 Report: 4/7		2 FILER NAME Lambright, Jerry (Mr.)		3 ACCOUNT # (TEC filers) 00062797	
4 Date 08/04/2014		5 Payee name April Sound Country Club			
6 Amount (\$) \$16.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address City; State; Zip Code 1000 April Sound Blvd Montgomery, TX 77356			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Lake Conroe Area Republican Women's lunch meeting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Date 11/06/2014		Payee name April Sound Country Club			
Amount (\$) \$16.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 1000 April Sound Blvd Montgomery, TX 77356			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> LCARW lunch meeting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Date 12/04/2014		Payee name April Sound Country Club			
Amount (\$) \$16.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 1000 April Sound Blvd Montgomery, TX 77356			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> LCARW lunch meeting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Date 09/03/2014		Payee name Bentwater Country Club			
Amount (\$) \$15.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 800 Bentwater Dr. Montgomery, TX 77356			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> NSRW lunch meeting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/4 Report: 5/7	2 FILER NAME Lambright, Jerry (Mr.)	3 ACCOUNT # (TEC filers) 00062797
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4 Date 10/02/2014	5 Payee name Lake Conroe Area Republican Women PAC
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6 Amount (\$) \$15.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City; State; Zip Code PO Box 737 Montgomery, TX 77356
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Membership dues <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Date 08/21/2014	Payee name Montgomery County Republican Party
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Amount (\$) \$500.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 310 Metcalf Conroe, TX 77301
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Dinner honoring Dr. Wilkerson as Party Chair for 50 years <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Date 12/04/2014	Payee name Montgomery County Republican Women
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Amount (\$) \$15.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code PO Box 1766 Conroe, TX 77305-1766
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Membership dues <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Date 11/10/2014	Payee name North Shore Republican Women PAC
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Amount (\$) \$20.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code PO Box 524 Willis, TX 77356
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Membership dues <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/4 Report: 6/7		2 FILER NAME Lambright, Jerry (Mr.)		3 ACCOUNT # (TEC filers) 00062797	
4 Date 10/23/2014	5 Payee name River Plantation Country Club				
6 Amount (\$) \$15.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City; State; Zip Code 550 Country Club Dr. Conroe, TX 77302				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> MCRW lunch meeting		
				<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Date 08/21/2014	Payee name Texas Patriots PAC				
Amount (\$) \$500.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 1544 Sawdust Road Suite 402 The Woodlands, TX 77380				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contribution in support of conservative principles		
				<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Date 09/10/2014	Payee name The Woodlands Republican Women				
Amount (\$) \$20.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code PO Box 7294 The Woodlands, TX 77387				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> The Woodlands Republican Women's (TWRW) lunch meeting		
				<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Date 10/08/2014	Payee name The Woodlands Republican Women				
Amount (\$) \$20.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code PO Box 7294 The Woodlands, TX 77387				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> TWRW lunch meeting		
				<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS**

SCHEDULE G

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/4 Report: 7/7	2 FILER NAME Lambright, Jerry (Mr.)	3 ACCOUNT # (TEC filers) 00062797
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4 Date 11/10/2014	5 Payee name The Woodlands Republican Women
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6 Amount (\$) \$15.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City; State; Zip Code PO Box 7294 The Woodlands, TX 77387
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Membership dues
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	