

01-21-2020

Phillip David Haskett P.O. Box 1941 – Mailing Address 142 Fifteenth Street League City, TX 77574 832-245-0834

ORIGINAL

Andrew Miller Public Information Officer San Leon Municipal Utility District 443 24<sup>th</sup> Street San Leon, TX 77539

#### **Texas Public Information Act Request**

Mr. Miller,

This request to the San Leon Municipal Utilities District (hereinafter the "District") for public information is made pursuant to the Texas Government Code, Title 5, Subtitle A, Chapter 552, Subchapter A, Sect. 552.001, et sec. (hereinafter the "TPIA").

I request that the items listed below be provided in digital PDF format if so created or maintained in that format.

Pursuant to the Texas Public Information Act, as amended, please provide the following public records:

Copies of all Applications for a Place on the Ballot required by Chapter 141.031 of the Texas Election Code, and all reports required by the Texas Ethics Commission as enumerated in Title 15 of the Texas Election Code including:

Appointments of Campaign Treasurer; January & July Semi-Annual Reports; 30 Day Pre-election Reports; 8 Day Pre-election Reports; Daily Pre-election Reports,

for all current directors, and recent former directors of the District to specifically include:

Joseph Manchaca Tyson Kennedy Kenneth Fortune Bishop Kelly Neason Keith Gossett John Kelly, Jr. Julie Hall I can be reached at the telephone number listed above. Please advise when these records will be available for pick up at your offices. Thank you in advance for your prompt response.

4

Sincerety, Phillip David Haskett



February 5, 2020

Phillip David Haskett P.O. Box 1941 League City, TX 77574

Dear Mr. Haskett:

We have received your records request under the Texas Public Information Act, dated January 21, 2020 and received in our office the same day. As previously communicated with you, I have been absent due to surgery and I appreciate the patience you've exhibited as we've worked towards fulfilling this request in as timely a manner as possible. Your request is outlined below, with copies of the documentation we have on file attached. If you have any additional questions regarding the matter, please let me know and I will do my best to work with you to come to a satisfying conclusion for your inquiry.

Copies of all Applications for a Place on the Ballot required by Chapter 141.031 of the Texas Election Code, and all reports required by the Texas Ethics Commission as enumerated in Title 15 of the Texas Election Code including:

Appointment of Campaign Treasurer January and July Semi-Annual Reports 30 Day Pre-election Reports 8 Day Pre-election Reports Daily Pre-election Reports

For all current directors and recent former directors of the District to specifically include:

Joseph Manchaca Tyson Kennedy Kenneth Fortune Bishop Kelly Neason Keith Gossett John Kelly, Jr. Julie Hall

Sincerely,

And The

Andrew Miller District Manager San Leon MUD

## APPLICATION FOR PLACE ON BALLOT

I, <u>Joe MANCHACA</u>, do hereby make application for a place on the ballot of the election to Directors of SAN LEON MUNICIPAL UTILITY DISTRICT. Pursuant to Election Code 141.031, I do hereby swear to the following facts:

My name is: JOE MANCHACA. My occupation is: DIRECTOR OF FACILITIES

I am a citizen of the United States of America.

I have not been determined mentally incompetent by a final judgment of any court.

I have not been finally convicted of a felony from which I have not been pardoned or otherwise released from the resulting disabilities.

My date of birth is:
My residence address is: 2730 BROADWAY, SAN LEON TX
My mailing address is: <u>P.O. Box 594 KEMAH, TX 77565</u>
I have lived in the State of Texas for $\underline{40}$ years and in the SAN LEON MUNICIPAL UTILITY DISTRICT for <u>13</u> years.

I, <u>DE MANCIANCA</u>, of Galveston County, Texas, being a candidate for the office of Board of Directors of the San Leon Municipal Utility District, swear that I will support and defend the constitution and laws of the United States and of the State of Texas.

I am aware of the nepotism law, Articles 5996(a) through 5996(g) of the Revised Civil Statutes of the State of Texas.

I am a resident of the SAN LEON MUNICIPAL UTILITY DISTRICT.

I own land in said District subject to taxation, and I am 21 years of age or over.

U

## THE STATE OF TEXAS

COUNTY OF GALVESTON

SUBSCRIBED AND SWORN TO before me on this the 29 day of  $\sqrt{2nineky}$ , 20/4.

Notary Public, State of Texas

Janice Hoffman **Commission Expires** 08-15-2017

	EXPENDITURES M PERSONAL FUNDS	SCHEDULE G				
	EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorials Expense       Salaries/Wages/Contr         Legal Services       Solicitation/Fundraisir         Food/Beverage Expense       Travel In District         Polling Expense       Travel Out Of District         Printing Expense       Office Overhead/Ren         The Instruction Guide explains how to compare	ng Expense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee tal Expense OTHER (enter a category not listed above) mplete this form.				
1 Total pages Schedule G:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)				
1	MR. JOE L. MANCHAC	A				
4 Date	5 Payee name					
4/9/14	THE UPS STORE					
6 Amount (\$) 3.60	7 Payee address; City; State; Zip Code	- 4: - 1				
Reimbursement from political contributions intended		OUTH LEAGUE CITY, TX 77573				
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)				
OF EXPENDITURE	PRINTING EXPENSE	CARDS				
Date	Payee name					
3/24/14	SCRIBBLE'S					
Amount (\$) 220.29	Payee address; City; State; Zip Code					
Reinbursement from political contributions intended 2825 PALMER TEXAS CITY, TX 77590						
PURPOSE	Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)					
OF EXPENDITURE	PRINTING EXPENSES	TESHIRTS				
Date	Payee name					
3/25/14	THE SIGN SHOP					
Amount (\$)	Payee address; City; State; Zip Code					
372.60 Reimbursement from political contributions intended	304 N. HWY 3 LEAGE	LE CITY, TX 77573				
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)				
OF	ADVERTISING	SIGNS				
Date	Date Payee name					
Amount (\$)	Payee address; City; State; Zip Code					
Reimbursement from political contributions intended						
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)				
	ATTACH ADDITIONAL COPIES OF THIS S	SCHEDULE AS NEEDED				

(512) 463-5800

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT					C/OH EET PG 1
The C/OH Instruction Guide	explains how to complete this f	orm. 1 ACCOUN (Ethics Com	JT # nission Filers)	2 Total pages filed:	i.
3 CANDIDATE / MS/N	RS/MR FIRST		MI	OFFICE U	SEONLY
OFFICEHOLDER	NR. JOE LAST MANCT		SUFFIX	Date Received	
OFFICEHOLDER MAILING ADDRESS	ESS / PO BOX: APT / SUITE #:	CITY: STATE:	ZIP CODE	Date Hand-delivered or P	ostmarked
change of address +.	0. Box 594		3 6 m m	Receipt #	Amount
S CANDIDATE	CODE PHONE NUMBER 81) 802-464	extens	ION	Date Processed	
0 CANFAIGIN	NRS/MR FIRST MRS MAR NAME LAST	LENE VCHACA	MI SUFFIX	Date Imaged	
TREASURER		r/SUITE#; CITY:	STATE:	ZIP CODE TR 775	39
	CODE PHONE NUMBER 32) 451 - 488	extens Z.	SION		
9 REPORT TYPE	January 15 30th day before		ff ded \$500	15th day after c         treasurer appoin         (officeholder only)         Final report (Attac	tment
10 PERIOD COVERED 3	Day Year / 14 / 14 T		onth Day 4 / 10	Year / 14	
11 ELECTION	ELECTION DATE ELECTION Day Year Print 10/14	NTYPE Runoff		General	Special
12 OT TIOL	UD BOARD DIR		ESOUGHT (ifknown		CTOR
	GC	TO PAGE 2			

CANDIDAT		SEHOLDER REPORT:	FORM C/OH COVER SHEET PG 2	
14 C/OH NAME		1	5 ACCOUNT # (Ethics Commission Filers)	
	JOE L.Y	MANCHACA		
16 NOTICE FROM POLITICAL COMMITTEE(S)	16 NOTICE FROM POLITICAL THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OF			
	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
additional pages		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
17 CONTRIBUTION TOTALS	1. TOTAL PLEDG	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE	\$ O	
	2. TOTAL (OTHER	POLITICAL CONTRIBUTIONS R THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0	
EXPENDITURE TOTALS	3. TOTAL	POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEM	NIZED \$	
	4. TOTAI	POLITICAL EXPENDITURES	\$ 596.49	
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST [ PORTING PERIOD	DAY \$ O	
OUTSTANDING LOAN TOTALS	6. TOTAL LAST D	PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF TOAY OF THE REPORTING PERIOD	rhe \$	
18 AFFIDAVIT	My Commit	CCLINTOCK is true and correct and includes all me under Title 15 Election Code 7, 2016	f perjury, that the accompanying report information required to be reported by didate or Officeholder	
AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said				

20 / to certify which, witness my hand and seal of office.

Signature of officer administering oath

day of

Printed name of officer administering oath

Title of officer administering oath

th

Austin, Texas 78711-2070 (512) 463-5800

(TDD 1-800-735-2989)

APPOINTME BY A CAND	IDATE	FORM CTA PG 1
See	TA Instruction Guide for detailed instructions.	1 Total pages filed:
	HE HAS THE FIRST MI	OFFICE USE ONLY
CANDIDATE NAME	MRIMR FIRST L	Acci #
	NICKNAME LAST SUFFIX	Date Received
CANDIDATE MAILING ADDRESS	ADDRESS I PO BOX APT I SUITE & CITY: STATE: ZIP CODE P.O. BOX 594 KEMAIA TA 77565	
	EXTENSION	Date Hand-delivered or Postmarked
CANDIDATE	AREA CODE PHONE NUMBER EXTENSION (281) 802-4640	Date Procassed
	(201)	Degam! olaC
BOFFICE HELD (if any)	DIRECTOR, MUD BOARD	
SOUGHT (if known)	DIRECTOR, MUD BOARD	LAST SUFFIX
7 CAMPAIGN TREASURER NAME	an Switt Shert	UCHACA
- united and the second se	STREET ADDRESS (NO PO BOX PLEASE) APT / SUITE #: CITY; STATE,	ZIP CODE
8 CAMPAIGN TREASURER STREET ADDRESS	2730 BROADWAY SAN LEON	7x 77539
(residence or business)	EXTENSION	and the second se
9 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (832) 651-4882	
10 CANDIDATE SIGNATURE	I am aware of the Nepotism Law, Chapter 573 of the	
	I am aware of my responsibility to file timely reports the Election Code.	
	I am aware of the restrictions in title 15 of the Election from corporations and labor organizations.	
	Signature of Candidate	<u>5 / 14 / 14</u> Date Signed
	GO TO PAGE 2	
		Revised 07/14

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Texas Ethics Commission

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(TDD 1-800-735-2989)

Environmenterenciementer etc.	TE / OFFICEHOLDER N FINANCE REPORT		FORM C/OH COVER SHEET PG 1
The C/OH Instruction	2 Total pages filed:		
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST M.R. JOE NICKNAME LAST	MI SUFFIX	OFFICE USE ONLY Date Received
4 CANDIDATE /	MANCHREA ADDRESS / PO BOX; APT / SUITE # CITY.	STATE; ZIP CODE	
OFFICEHOLDER MAILING ADDRESS	De O		Date Hand-delivered or Postmarked
5 CANDIDATE/	P.C. BOX 594 KEMAL	1 12 17565 EXTENSION	Receipt # Amount
OFFICEHOLDER	(281) 802 - 4640		Date Processed
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MICES MC ANELENE NICKNAME LAST		Date Imaged
	MANCHAC	ján	
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS IND POBOX FLEASE, APT/SUITE #	oity state. San Leon,	ZIP CODE TX 77539
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (832) 451 - 4882	EXTENSION	
9 REPORT TYPE	January 15 30th day before election	Runoff Exceeded \$500 limit	15th day after campaign treasurer appointment (officeholder only) Final report (Attach C/OH - FR)
10 PERIOD COVERED	Manen Day Year THROUGH	Month Day 5/2/1	чаат 4
11 ELECTION	Month ELECTION DATE ELECTION TYPE		Seneral Special
12 OFFICE	MILLO BOARD DIRECTER	3 OFFICE SOUGHT (1' KNOWN) MUD BARR	D DIRECTOR
	GO TO PAGE 2	2	

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Texas Ethics Commission	P.O. Box	12070	Austin, Te	exas 78711-2070	(512) 463-5	800	(TDD 1-800-735-2989)
CANDIDAT	E / OFFIC	EHO	LDER	REPORT:			FORM C/OH
SUPPORT	& TOTAL	S			(	COVE	R SHEET PG 2
14 C/OH NAME	10	m	10.1.00	A	15 A	CCOUNT #	(Ethics Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S)	CANODATE / OFFICE			ACCEPTED OR POLITICAL EX	THOUT THE CANDIDATE	S OR OFFICE	DMMITTEES TO SUPPORT THE EHOLDER'S KNOWLEDGE OR CE OF SUCH EXPENDITURES.
	COMMITTEE TYPE	COMMITTEE	E NAME				
	GENERAL	COMMITTEE	ADDRESS				
additional pages		COMMITTE	E CAMPAIGN TR	EASURER NAME			
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17 CONTRIBUTION TOTALS	1. TOTAL PLEDG	POLITICAL ES. LOANS.	CONTRIBUTI OR GUARAN	ONS OF \$50 OR LESS TEES OF LOANS). UN	OTHER THAN	\$	
	2. TOTAL (OTHE)	POLITICA	AL CONTRI	BUTIONS S. OR GUARANTEES C	OF LOANS)	\$	
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS. UNLESS ITEMIZED \$						
	4. TOTA	POLITIC	AL EXPEND	TURES		\$	509.40
CONTRIBUTION BALANCE		POLITICAL PORTING PI		ONS MAINTAINED AS C	OF THE LAST DAY	\$	
OUTSTANDING LOAN TOTALS	6. TOTAL LAST (	PRINCIPAL AY OF THE	AMOUNT OF REPORTING	ALL OUTSTANDING L PERIOD	OANS AS OF THE	\$	
AFFIX NOTARY STA Sworn to and sul	TAMMY MCCLIN My Commission I March 7, 20 MP / SEAL ABOVE bscribed before y of <u>MAU</u>	me, by	the said _	is true and correct a me under site 15. E Si Joe Man	Ind includes all info Election Code. Management gnature of Candida Chaca	ate or Offic	the accompanying report equired to be reported by exholder , this the nd seal of office.
Signature of officer adr	ministering oath	P	rinted name of	f officer administering c	path	Title of c	fficer administering oath
L							Revised 04/19/20

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Austin, Texas 78711-2070

(512) 463-5800

(TDD 1-800-735-2989)

POLITICAL EXPENDITURES SCHEDULE						
	EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorials Expense Salaries/Wages/Cont Legal Services Solicitation/Fundraisii Food/Beverage Expense Travel In District Polling Expense Travel Out Of Distric Printing Expense Office Overhead/Ren The Instruction Guide explains how to co	t Expense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee tal Expense OTHER (enter a category not listed above)				
	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)				
1 Total pages Schedule G	MR. JOE L MANGITACA					
4 Date	5 Payee name					
4/11/14 6 Amount (\$)	THE SIGN SHOP 7 Payee address: City: State: Zip Code					
401.40	· · · · · · · · · · · · · · · · · · ·					
Reimbursement from political contributions intenced	306 N. HWY3 LEAGUE					
8 PURPOSE	(a) Category -See categories listed at the top of this schedule	(b) Description of travel outside of Texas, complete Schedule T				
OF	ABUERTISING	SIGNS				
Date	Payee name					
4/28/14	THE SIGN SHOP					
Amount (\$) /08,00	Payee address: City: State. Zip Code					
Reimbursement from political contributions intended	306 N. HOLY 3 LEAGU					
PURPOSE	Category See categories listed at the top of this schedule-	Description III ravel butsice of Texas complete Schedule T				
OF EXPENDITURE	ADVERTISING	SIGNS				
Date	Payee name					
Amount (\$)	Payee address: City State: Zip Code					
Reimbursement from political contributions intended						
PURPOSE OF EXPENDITURE	Category (See obtagories listed at the top of this schedule)	Description of travel outside of Texas, complete Schedule Ty				
Date	Payee name					
Amount (\$)	Payee address. City State, Zip Code					
Reimbu/sement from						
PURPOSE OF EXPENDITURE	Category - See categories listed at the top of this schedule	Description of travel outside of Texas, complete Schedule T)				
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED						

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CANDIDAT	FORM C/OH					
CAMPAIGN	COVER SHEET PG 1					
	1 ACCOUNT #	2 Total pages filed:				
The C/OH Instruction G	The C/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers)					
3 CANDIDATE /	MS/MRS/MR FIRST MI	OFFICE USE ONLY				
OFFICEHOLDER NAME	NICKNAME LAST SUFFIX	Date Received				
	MANCITACA					
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX: AP / SUITE #, SIII, SUITE	Date Hand-delivered or Postmarked				
change of address	P.O. BOX 594 KEMAH TX 77565	Receipt # Amount				
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE         PHONE NUMBER         EXTENSION           (281)         802.4640	Date Processed				
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MI MRS. MARLENE K NICKNAME LAST SUFFIX	Date Imaged				
	MANCHACA					
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT/SUITE #: CITY: STATE: 2730 BRORDWAY SANCEON TX	zip code 77539				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (832) 651-4882					
9 REPORT TYPE	January 15 30th day before election Runoff July 15 8th day before election Exceeded \$500 limit	15th day after campaign treasurer appointment (officeholder only) Final report (Attach C/OH - FR)				
10 PERIOD COVERED	Month Day Year Month Day 5/2/14 THROUGH 5/19	Year / 84				
11 ELECTION	ELECTION DATE     ELECTION TYPE       Month     Day       Year     Primary       S/10/14	General Special				
12 OFFICE	OFFICE HELD (if any) 13 OFFICE SOUGHT (if know	- -				
	MUD BOARD DIRECTOR MUD BOAR	DIRECTOR				
	GO TO PAGE 2					
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Texas Ethics Commission

(512) 463-5800 (TDE

CANDIDAT SUPPORT		EHOLDER REPORT:	FORM C/OH COVER SHEET PG 2
14 C/OH NAME			ACCOUNT # (Ethics Commission Filers)
MR. J.	DE L. Y	MANCHACA	
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOT	CE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE B HOLDER, THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDAT ES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY	ESOR OFFICEHOLDER'S RIVORLEDGE ON
	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL	COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS	,
17 CONTRIBUTION TOTALS	1. TOTAL PLEDG	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAI (OTHE)	POLITICAL CONTRIBUTIONS R THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 533.34
EXPENDITURE TOTALS	3. TOTAL	POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZ	ED \$
	4. TOTA	L POLITICAL EXPENDITURES	\$ 567.54
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DA PORTING PERIOD	Y \$
OUTSTANDING LOAN TOTALS	6. TOTAL LAST I	PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF TH DAY OF THE REPORTING PERIOD	E \$
18 AFFIDAVIT	TAMMY MCCLI My Commission March 7, 20	NTOCK Expires D16 Signature of Cand	herjury, that the accompanying report information required to be reported by
Sworn to and su	bscribed before ay of <u>Mar</u>	e me, by the said $\underline{Jae}$ , $\underline{Manchaca}$ , 20 $\underline{14}$ , to certify which, witness m	y hand and seal of office.
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of officer administering oath

## POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

	The	Instruction Guide explains how to complete this	form.	1 Total pages School	
2	FILER NAME	EL, MANCHACA		3 ACCOUNT # (E	thics Commission Filers)
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	5/18/14	STEVE HOYLAND SR 6 Contributor address; City; State; Zip Code 16 DICK BAY I SAN LEDN T	X 77539	533.34	
				(If travel outside	of Texas, complete Schedule T)
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See I	nstructions)	
	Date	Full name of contributor Out-of-state PAC (ID#:	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
		Contributor address; City; State; Zip Code			
					of Texas, complete Schedule T)
	Principal occur	pation / Job title (See Instructions)	Employer (See	Instructions)	1
	Date	Full name of contributor out-of-state PAC (ID#:		Amount of contribution (\$)	In-kind contribution description (if applicable)
		Contributor address; City; State; Zip Code		(If travel outside	of Texas, complete Schedule T)
	Principal occu	pation / Job title (See Instructions)	Employer (See	Instructions)	
-	Date	Full name of contributor out-of-state PAC(ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
		Contributor address; City; State; Zip Code		(If travel outside	   e of Texas, complete Schedule T)
F	Principal occu	upation / Job title (See Instructions)	Employer (See		
F	Date	Full name of contributor out-of-state PAC (ID#;		Amount of contribution (\$)	In-kind contribution description (if applicable)
		Contributor address; City; State; Zip Code		(If travel outside	of Texas, complete Schedule T)
+	Principal occ	upation / Job title (See Instructions)	Employer (See		
		ATTACH ADDITIONAL COPIES contributor is out-of-state PAC, please see ins	OF THIS SCHEDUL truction guide fora	EASNEEDED dditional reportin	g requirements.

POLITICAL EXPENDITURES SCHED				
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	EXPENDITURE CATEGORIES FOR BOX 8(a)           Gift/Awards/Memorials Expense         Salaries/Wages/Contract Labor         Loan Repayment/Reimburg           Legal Services         Solicitation/Fundraising Expense         Transportation Equipment &           Food/Beverage Expense         Travel In District         Contributions/Donations M.           Polling Expense         Travel Out Of District         Candidate/Officeholder/           Printing Expense         Office Overhead/Rental Expense         OTHER (enter a category           The Instruction Guide explains how to complete this form.         Construction	& Related Expense ade By Political Committee not listed above)		
1 Total pages Schedule G:	2 FILER NAME	ics Commission Filers)		
1	MR. JOE L MANCHACA			
4 Date	5 Payee name			
5/08/14				
6 Amount (\$)	7 Payee address; City; State; Zip Code			
34.20 Reimbursement from				
political contributions intended	2925 GULF FREEWAY LEAGUE CITY,	74 77573		
8 PURPOSE	(a) Category (See categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete the complete texas) (b) Description (If travel outside of Texas, complete texas)	ete Schedule T)		
OF EXPENDITURE	ADVERTISING FLYERS			
Date	Payee name			
5/18/14	SEABREEZE NEWS			
Amount (\$)	Payee address; City; State; Zip Code			
Reimbursement from political contributions intended	1624 DICK BAY SAN LEON TK 97539			
PURPOSE	Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, comp	lete Schedule T)		
OF EXPENDITURE	ADVERTISING ADS			
Date	Payee name			
Amount (\$)	Payee address; City; State; Zip Code			
Reimbursement from political contributions intended				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete the complet	plete Schedule T)		
Date	Payee name			
Amount (\$)	Payee address; City; State; Zip Code			
Reimbursement from political contributions intended				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, com	plete Schedule T)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

		IDIDATE / OFFICEHOLDER REPORT: IGNATION OF FINAL REPORT	FORM C/OH - FR
		The Instruction Guide explains how to complete this •• Complete only if "Report Type" on page 1 is marked "Fin	form. nal Report" ••
1	C/OH N	AME	2 ACCOUNT # (Ethics Commission Filers)
	MR	JOE L. MANCHACA	
3	SIGNA		
	report as	expect any further political contributions or political expenditures in connection with my can a final report terminates my campaign treasurer appointment. I also understand that I ma any campaign expenditures without a campaign treasurer appointment on file.	
4		WHO IS NOT AN OFFICEHOLDER Nete A & B below only if you are not an officeholder. **	
	Α.	CAMPAIGN FUNDS	
	Checl	conly one:	
		I do not have unexpended contributions or unexpended interest or income earned from p	olitical contributions.
		I have unexpended contributions or unexpended interest or income earned from political on not convert unexpended political contributions or unexpended interest or income earned use. I also understand that I must file an annual report of unexpended contributions ar contributions or unexpended interest or income earned on political contributions longer report. Further, I understand that I must dispose of unexpended political contributions earned on political contributions in accordance with the requirements of Election Code, §	on political contributions to personal nd that I may not retain unexpended er than six years after filing this final and unexpended interest or income
	в.	ASSETS	
	Chec	k only one:	
		I do not retain assets purchased with political contributions or interest or other income fr	om political contributions.
		I do retain assets purchased with political contributions or interest or other income from po I may not convert assets purchased with political contributions or interest or other income f use. I also understand that I must dispose of assets purchased with political contributions of Election Code, § 254.204.	from political contributions to personal
			Signature of Candidate
5		EHOLDER plete this section only if you are an officeholder ···	
		I am aware that I remain subject to filing requirements applicable to an officeholder who does I am also aware that I will be required to file reports of unexpended contributions if, after officeholder, I retain political contributions, interest or other income from political contribution contributions or interest or other income from political contributions.	er filing the last required report as an
			Signature of Officeholder
ww	w.ethics.	state.tx.us	Revised 04/19/2013

Form #2204 Rev. 10/2011	This space reserved for office
Submit to: SECRETARY OF STATE Government Filings Section P O Box 12887 Austin, TX 78711-2887 512-463-6334	use USE OATH OF OFFICE
Filing Fee: None	
I, Joe Manchaca execute the duties of the office of I	UTHORITY OF THE STATE OF TEXAS, , do solemnly swear (or affirm), that I will faithfully <u>Director of San Leon Municipal Utility District</u> of est of my ability preserve, protect, and defend the Constitution and laws b, so help me God. 
State of <u>Texas</u> County of <u>Galveston</u> Sworn to and subscribed before this Stephen H. Doncarlos Commission Expires 03-26-2016	e me Zi day of May Signature of Notary Public or Other Officer Administering Oath Printed or Typed Name

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Form #2201 Rev. 10/2011

Submit to: SECRETARY OF STATE Government Filings Section P O Box 12887 Austin, TX 78711-2887 512-463-6334 512-463-5569 - Fax Filing Fee: None



STATEMENT OF OFFICER

## Statement

I, Joe Manchaca , do solemnly swear (or affirm) that I have not directly or indirectly paid, offered, promised to pay, contributed, or promised to contribute any money or thing of value, or promised any public office or employment for the giving or withholding of a vote at the election at which I was elected or as a reward to secure my appointment or confirmation, whichever the case may be, so help me God.

Position to Which Elected/Appointed: Director of San Leon Municipal Utility District

City and/or County: Galveston County

## Execution

Under penalties of perjury, I declare that I have read the foregoing statement and that the facts stated therein

are true. Date:

71/14

6f Officer Signature

Revised 10/2011

This space reserved for office use

## APPLICATION FOR PLACE ON BALLOT

I, <u>TYSON B. KENNED</u>, do hereby make application for a place on the ballot of the election to Directors of SAN LEON MUNICIPAL UTILITY DISTRICT. Pursuant to Election Code 141.031, I do hereby swear to the following facts:

My name is: TYSON B. KENNEDY.

My occupation is: <u>SALES</u>.

Office sought: BOARD OF DIRECTORS (full term).

I am a citizen of the United States of America.

I have not been determined mentally incompetent by a final judgment of any court.

I have not been finally convicted of a felony from which I have not been pardoned or otherwise released from the resulting disabilities.

My date of birth is:
My residence address is: 1505 JOHN ST. JAN LEON TX 77539
My mailing address is: 1505 JOHO ST. SAIN LEON TX 77539
I have lived in the State of Texas for $\frac{16}{2}$ years and in the SAN LEON MUNICIPAL UTILITY DISTRICT for $\frac{12}{2}$ years.
I, <u>TYSON B.</u> KENNES, of Galveston County, Texas, being a candidate for the office of Board of Directors of the San Leon Municipal Utility District, swear

the office of Board of Directors of the San Leon Municipal Utility District, swear that I will support and defend the constitution and laws of the United States and of the State of Texas.

I am aware of the nepotism law, Articles 5996(a) through 5996(g) of the Revised Civil Statutes of the State of Texas.

I am a resident of the SAN LEON MUNICIPAL UTILITY DISTRICT.

I own land in said District subject to taxation, and I am 21 years of age or over.

Jon 13. 15

THE STATE OF TEXAS

COUNTY OF GALVESTON

SUBSCRIBED AND SWORN TO before me on this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Notary Public, State of Texas

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	KENNEBY	
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	See	CTA Instruction Guide for detailed instructions.	1 Total pages filed:				
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	NAME	MR. TYSON B. NICKNAME LAST SUFFIX	Acct #				
		KENNEDY	Date Received				
-	CANDIDATE	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE					
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4	CANDIDATE	AREA CODE PHONE NUMBER EXTENSION	Date Hand-deliverad or Postmarked				
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8	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY; STATE:	ZIP CODE				
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(	residence or business)						
9	CAMPAIGN	AREA CODE PHONE NUMBER EXTENSION					
	TREASURER	(832) 651 - 4882					
10	CANDIDATE SIGNATURE	I am aware of the Nepotism Law, Chapter 573 of the T	exas Government Code.				
		I am aware of my responsibility to file timely reports a the Election Code.	is required by title 15 of				
	I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.						
		In h K	3/15/14				
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Texas Ethics Commission	P.O. Box	12070 Austin, Texas 78711-2070 (512) 463-5	5600 (TDD 1-800-735-2989)					
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14 C/OH NAME			ACCOUNT# (Ethics Commission Filers)					
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16 NOTICE FROM POLITICAL COMMITTEE(S)								
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18 AFFIDAVIT		I swear, or affirm, under penalty of pe	jury, that the accompanying report					
AN THINK	is true and correct and includes all information required to be reported by							
	BOBERT KNOWLES Notary Public, State of Texas My Commission Expires							
June 05, 2015								
Signature of Candidates or Officeholder								
AFFIX NOTARY STAN	AFFIX NOTARY STAMP / SEAL ABOVE							
Sworn to and sub	Sworn to and subscribed before me, by the said Tyson B. Kennedy , this the							
5 day		, 20, to certify which, witness my	hand and seal of office.					
Lat the		Robert Knowles	Notary					
Signature of officer ectra	kiniatering cath	Printed name of officer administering onth	Title of officer administering cath					
www.athica.state.tx.us	22		Revised 04/19/201					

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Revised 04/19/2013

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Form #2204 Rev. 10/2011	This space reserved for office
Submit to: SECRETARY OF STATE Government Filings Section P O Box 12887 Austin, TX 78711-2887 512-463-6334	USE OATH OF OFFICE
Filing Fee: None	
I, Tyson Kennedy	UTHORITY OF THE STATE OF TEXAS, , do solemnly swear (or affirm), that I will faithfully Director of San Leon Municipal Utility District of best of my ability preserve, protect, and defend the Constitution and laws the, so help me God. 
State of <u>Texas</u> County of <u>Galveston</u> Sworn to and subscribed befor this (seal) Stephen H. Doncarlo Commission Expire 03-26-2016	Signature of Notary Public or Other Officer

Form #2201 Rev. 10/2011

Submit to: SECRETARY OF STATE Government Filings Section P O Box 12887 Austin, TX 78711-2887 512-463-6334 512-463-5569 - Fax Filing Fee: None



## STATEMENT OF OFFICER

## Statement

I, Tyson Kennedy , do solemnly swear (or affirm) that I have not directly or indirectly paid, offered, promised to pay, contributed, or promised to contribute any money or thing of value, or promised any public office or employment for the giving or withholding of a vote at the election at which I was elected or as a reward to secure my appointment or confirmation, whichever the case may be, so help me God.

Position to Which Elected/Appointed: Director of San Leon Municipal Utility District

City and/or County: Galveston County

## Execution

Under penalties of perjury, I declare that I have read the foregoing statement and that the facts stated therein are true.

Date:

5/21/14

Signature of Officer

Revised 10/2011

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## APPLICATION FOR PLACE ON BALLOT

I, <u>John A. Kell</u>, <u>Jk.</u>, do hereby make application for a place on the ballot of the election to Directors of SAN LEON MUNICIPAL UTILITY, DISTRICT. Pursuant to Election Code 141.031, I do hereby swear to the following facts:

My name is: John A. Kelly TR	· ·
My occupation is: Retired	
Office sought: DIRECTOR	_(full term).

I am a citizen of the United States of America.

I have not been determined mentally incompetent by a final judgment of any court.

I have not been finally convicted of a felony from which I have not been pardoned or otherwise released from the resulting disabilities.

My date of birth is:					
My residence address is:	815	57457	, SAN	Leanit	<u>x.77539</u>
My mailing address is: Po	. Bax	117Le.	League	City, Tx	77574

I have lived in the State of Texas for  $\frac{40}{25}$  years and in the SAN LEON MUNICIPAL UTILITY DISTRICT for  $\frac{25}{25}$  years.

I,  $\underline{ I_{n} h_{n} h_{n$ 

I am aware of the nepotism law, Articles 5996(a) through 5996(g) of the Revised Civil Statutes of the State of Texas.

I am a resident of the SAN LEON MUNICIPAL UTILITY DISTRICT.

I own land in said District subject to taxation, and I am 21 years of age or over.

THE STATE OF TEXAS

COUNTY OF GALVESTON

SUBSCRIBED AND SWORN TO before me on this the <u>2914</u> day of <u>January</u>, 20<u>14</u>.

Votary Public, State of Texas

Janice Hoffman Commission Expires 08-15-2017

	TE / OFFICEHOLDER		FORM C/OH COVER SHEET PG 1	
The C/OH Instruction	Guide explains how to complete this form.	1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed.	
3 CANDIDATE /	MS/MRS/MR FIRST	M	OFFICE USE ONLY	
OFFICEHOLDER NAME	MR. JOHN NICKNAME LAST KELLV	A SUFFIX Je.	Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX, APT / SUITE # CITY.	STATE ZIP CODE	Eale Hand-delivered of Postmarked	
change of address	P.O. BOX 1176, LEACH	LE CITY. TE 7757	- Receipt # Amount	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (713) 598-3404	EXTENSION	Date Processed	
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MRS. MARLENE NICKNAME LAST	MI K SUFFIX	Date Imaged	
	MANCHA	CA		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	2730 BROADWAY	OTY, STATE SAN LEDN ,	ZIP CODE TR. 77539	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (832) 651 - 4882	EXTENSION		
9 REPORT TYPE	January 15 30in day before election July 15 Sin day before election	Runoff	15th day after campaign     treasurer appointment     (officemoder only)     Final report (Attach C/OH - FR)	
10 PERIOD COVERED	Month Day Year THROUGH	Month Day 4. / ID	vasr 14	
11 ELECTION	Monih Day Year ELECTION TYPE	Runoff	General Special	
12 OFFICE	MUD BOARD DIRECTDIZ	13 OFFICE SCUGHT (18 Known MTUD BOAR	D DIRECTOR	
GO TO PAGE 2				

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#### (12) 400 0000 (120 1 000 / 000

# CANDIDATE / OFFICEHOLDER REPORT: FORM C/OH SUPPORT & TOTALS COVER SHEET PG 2

TALLAK		5 ACCOUNT # (Ethics Commission Filers)		
JOHN R. KELLY JR. 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. CANDIDAT	ES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF T	HEY RECEIVE NOTICE OF SUCH EXPENDITURES.		
COMMITTEE TYPE	COMMITTEE ADDRESS			
GENERAL				
	COMMITTEE CAMPAIGN TREASURER NAME			
	COMMITTEE CAMPAIGN TREASURER ADDRESS			
1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$				
2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$		
3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS. UNLESS ITEMIZED		ized \$ O		
4. TOTAL	\$ 596.49			
5. TOTAL OF REF	AY \$ 0			
<ol> <li>TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</li> </ol>		HE \$ O		
Notary Public, Stat My Commission	NBOTHAN e of Texas Expires 115	perjury, that the accompanying report information required to be reported by didate or Officeholder		
	CANDIDATE / OFFICE CONSENT. CANDIDAT COMMITTEE TYPE GENERAL SPECIFIC 1. TOTAL PLEDG 2. TOTAL (OTHEF 3. TOTAL 4. TOTAL 5. TOTAL 5. TOTAL 6. TOTAL BILLIE JEAN HIGGI Notary Public, Stat My Commission	CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDID CONSENT, CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF T COMMITTEE TYPE COMMITTEE TYPE COMMITTEE ADDRESS SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS 1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS. UNLESS ITEM 4. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS. UNLESS ITEM 4. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS. UNLESS ITEM 4. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST D OF REPORTING PERIOD 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING. LOANS AS OF T LAST DAY OF THE REPORTING PERIOD I SWEAR, OR SHITM, UNDER SHITES MY COMMISSION EXPIRES JULY 17, 2015		

, this the AKelly John 16 Sworn to and subscribed before me, by the said \_ . to certify which, witness my hand and seal of office. 20 day Printed name of officer administering oath 11 ran 10 ()6 Title of officer administering oath Signature of officer aciministering oath

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Austin, Texas 78711-2070

(512) 463-5800 (TDD 1

POLITICAL EXPENDITURES SCHEDULE G			
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	EXPENDITURE CATEGORIES FOR BOX 8(a)           Gift/Awards/Memorials Expense         Salaries/Wages/Contract Labor         Loan Repayment/Reimbursement           Legal Services         Solicitation/Fundraising Expense         Transportation Equipment & Related Expense           Food/Beverage Expense         Travel In District         Contributions/Donations Made By           Polling Expense         Travel Out Of District         Candidate/Officeholder/Political Committee           Printing Expense         Office Overhead/Rental Expense         OTHER (enter a category not listed above)           The Instruction Guide explains how to complete this form.         Form.		
1 Total pages Schedule G:	2 FILER NAME 3 ACCOUNT # (Ethics Commission Filers)		
1	MR. JOHN A. KELLY JR.		
4 Date	5 Payee name		
4/9/14	THE UPS STORE		
6 Amount (\$) 3.60	7 Payee address; City: State; Zip Code		
Reimbursement from political contributions intended	2925 GULF FREEWAY SOUTH LEAGUE CITY, 72 77573		
8 PURPOSE	(a) Category (See categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T)		
OF EXPENDITURE	PRINTING EXPENSE CARDS		
Date	Payes name		
3/24/14	SCRIBBLE'S		
Amount (\$) 220, 29	Payee address. City: State: Zip Code		
Reimbursement from political contributions intended	2825 PALMER TEXAS CITY, TX 77590		
PURPOSE	Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)		
EXPENDITURE	PRINTING EXPENSES TESHIRTS		
Date	Payee name		
3/25/14	THE SIGN SITOP		
Amount (\$)	Payee address; City; State; Zip Code		
372.60 Reimbursement from political contributions intended	3BG N. HWY 3 LEAGUE CITY, TX 77573		
PURPOSE	Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)		
OF	ADVERTISING SIGNS		
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
Reimbursement from political contributions intended			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Description (If travel cutside of Texas, complete Schedule T)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

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Austin, Texas 78711-2070

(512) 463-5800 (TDD 1-800-735-2989)

APPOINTMENT OF A CAMPAIGN TREASURER FORM CTA BY A CANDIDATE PG 1			
See	1 Total pages filed:		
2 CANDIDATE NAME	MS/MRS/MR FIRST MI ML JOHN A NICKNAME LAST SUFFIX Kelly JL,	OFFICE USE ONLY Acct. # Date Received	
3 CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. BOX 1176 LERGUE City TX 77574		
4 CANDIDATE PHONE	AREA CODE PHONE NUMBER EXTENSION (713) 598 3404	Date Hand-delivered or Postmarked Date Processed	
5 OFFICE HELD (if any)	Director	Date Imaged	
6 OFFICE SOUGHT (if known)	DIRECTOR		
7 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MI NICKNAME MRS MARLENCE K. MRA	LAST SUFFIX	
8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS (NO POBOX PLEASE); APT/SUITE #, CITY: STATE; 2730 BROAD WAY JAN LOON	ZIP CODE Ty 77539	
9 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (832) 651-4882		
10 CANDIDATE SIGNATURE	I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code.		
	I am aware of my responsibility to file timely reports as required by title 15 of the Election Code. I am aware of the restrictions in title 15 of the Election Code on contributions		
from corporations and labor organizations. A Kul Signature of Candidate Date Signed			
GO TO PAGE 2			

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Revised 07/14/2010

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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FORM C/O	Н
COVER SHEET PG	1

The C/OH Instruction	Guide explains how to complete this form. 1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE /	MS / MRS / MR FIRST MI	OFFICE USE ONLY
OFFICEHOLDER	- 1	Date Received
NAME	MR JOHN BH	Date Received
	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS		Date Hand-delivered or Postmarked
change of address	P.O. BOX 1176 LEAGUE CITY, TX 77574	Receipt # Amount
5 CANDIDATE/	AREA CODE PHONE NUMBER EXTENSION	Date Processed
OFFICEHOLDER PHONE	(713) 598-3404	Date Imaged
6 CAMPAIGN	MS / MRS / MR FIRST MI	Date maged
TREASURER NAME	MRS. MARLENE K NICKNAME LAST SUFFIX	
	MANCHACA	
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE:	ZIP CODE
	2730 BROADWAY SAN LEON TX	77539
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (832) 651-4882	
9 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)
10 PERIOD COVERED	Month Day Year Month Day 5/2/14 THROUGH 5/19	Year / 14
11 ELECTION	ELECTION DATE     ELECTION TYPE       Month     Day       Year     Primary       S/10/14     Primary	General Special
12 OFFICE	OFFICE HELD (if any) 13 OFFICE SOUGHT (if known	1)
	MUD BOARD DIRECTOR MUD BOAR	DIRECTOR
	GO TO PAGE 2	
		Deviced 01/10/201

Te: as Ethics Commission

(512) 463-5800 (TDD

		SEHOLDER REPORT:	FORM C/OH COVER SHEET PG 2
			CCOUNT # (Ethics Commission Filers)
MR. JOHA	Keu	Y JR.	
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOT	ICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY HOLDER, THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE ES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY F	'S OR OFFICEHOLDER'S KNOWLEDGE OR
	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL	COMMITTEE ADDRESS	
	SPECIFIC		
		COMMITTEE CAMPAIGN TREASURER NAME	
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION TOTALS	1. TOTAL PLEDG	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2 TOTAL	- POLITICAL CONTRIBUTIONS R THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 533.33
EXPENDITURE TOTALS	3. TOTAL	D \$	
	4. TOTA	POLITICAL EXPENDITURES	\$ 567.53
CONTRIBUTION BALANCE	5. TOTAL OF RE	\$	
OUTSTANDING LOAN TOTALS	6. TOTAL LAST I	PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE DAY OF THE REPORTING PERIOD	\$
18 AFFIDAVIT	CYNTHIA F. K/ NGTARY PUB STATE OF TO	ing a stand had been be	rjury, that the accompanying report ormation required to be reported by
	1017 3, 20 1017 3, 20		are or Officeholder
- 18/16	bscribed before	e me, by the said <u>John Kelly</u> $e_{-,20}$ $20/4$ , to certify which, witness my	, this the
Conto A 10	ay of The	20, 20, 20, 4, to certify which, witness my	Full Swice Of
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of officer administering oath

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Revised 04/19/2013

#### (TDD 1-800-735-2989)

	CAL CONTRIBUTIONS THAN PLEDGES OR LOAN	IS		SCHEDULE A
The	Instruction Guide explains how to complete this	form.	1 Total pages Sche	edule A:
2 FILER NAME MR.	many the 1/ 1 many	R	3 ACCOUNT # (Et	thics Commission Filers)
4 Date 5/18/14	5 Full name of contributor out-of-state PAC (ID# STEVE HOYLAND SR		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code 1624 DICIC BAY SAN L	Ear TX 77539	533.33	of Texas, complete Schedule T)
9 Principal occu	upation / Job title (See Instructions)	10 Employer (See I		
Date	Full name of contributor out-of-state PAC (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code	********		
			(If travel outside o	i of Texas, complete Schedule T)
Principal occ	upation / Job title (See Instructions)	Employer (See	Instructions)	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code	4 6 00 X X X 00 X X		   
			i and i a	of Texas, complete Schedule T)
Principal occ	upation / Job title (See Instructions)	Employer (See	Instructions)	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code		*	1
			the second se	I of Texas, complete Schedule T)
Principal occ	cupation / Job title (See Instructions)	Employer (See	Instructions)	
Date	Full name of contributor out-of-state PAC (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code	,		
Data street	nuesties ( Joh title (See Instructions)	Employer (See		of Texas, complete Schedule T)
	ATTACHADDITIONAL COPIES	OF THIS SCHEDULI	EASNEEDED	g requirements.

	EXPENDITURES M PERSONAL FUNDS	SCHEDULE G
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	EXPENDITURE CATEGORIES FOR BO           Gift/Awards/Memorials Expense         Salaries/Wages/Contract Lab           Legal Services         Solicitation/Fundraising Expense           Food/Beverage Expense         Travel In District           Polling Expense         Travel Out Of District           Printing Expense         Office Overhead/Rental Exp           The Instruction Guide explains how to complete	or Loan Repayment/Reimbursement nse Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee ense OTHER (enter a category not listed above)
1 Total pages Schedule G:	2 FILER NAME A	3 ACCOUNT # (Ethics Commission Filers)
1	MR. JOHN B. KELLY	
4 Date 5/8/11	5 Payee name	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
34.20		
Reimbursement from political contributions intended	2925 GULF FREEWAY LEA	GUE CITY, TX 77573
8 PURPOSE	(a) Category (See categories listed at the top of this schedule) (b) Det	scription (If travel outside of Texas, complete Schedule T)
OF EXPENDITURE	ADVERTISING (	CARDS
Date	Payee name	
5/18/14	SEABREEZE NEWS	
Amount (\$) <b>\$33.33</b> Reimbursement from political contributions intended	Payee address; City: State; Zip Code 1624 DICK BAY SAN 600	
PURPOSE	Category (See categories listed at the top of this schedule) De	scription (If travel outside of Texas, complete Schedule T)
OF EXPENDITURE	ADVERTISING	ADS.
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) De	escription (If travel outside of Texas, complete Schedule T)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	escription (If travel outside of Texas, complete Schedule T)
	ATTACH ADDITIONAL COPIES OF THIS SCHED	ULE AS NEEDED

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Ide not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating report as a final report terminates my campaign treasurer appointment. Take understand this threat on the copy of any campaign contribution or make any campaign expenditures without a campaign treasurer appointment. Take understand this threat of the copy of th		IDIDATE / OFFICEHOLDER REPORT: IGNATION OF FINAL REPORT	FORM C/OH - FR
Ide not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating report as a final report terminates my campaign treasurer appointment. Take understand this threat on the copy of any campaign contribution or make any campaign expenditures without a campaign treasurer appointment. Take understand this threat of the copy of th		The Instruction Guide explains how to complete this •• Complete only if "Report Type" on page 1 is marked "F	s form. 'inal Report" ↔
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report as a final report terminates my campaign treasurer appointment. I also understand that time, not accept any campaign contribution or make any campaign expenditures without a campaign treasurer appointment. I also understand that time, not accept any campaign contribution or make any campaign expenditures without a campaign treasurer appointment. I also understand that time, of Candidate Agriconolder.  FILER WHO IS NOT AN OFFICEHOLDER * Complete A & B below only if you are not an officeholder. **  A. CAMPAIGN FUNDS Check only one:			
	report a	s a final report terminates my campaign treasurer appointment. I also understand that I m any campaign expenditures without a campaign treasurer appointment on file.	nay not accept any campaign contributions
Check only one:  I do not have unexpended contributions or unexpended interest or income earned from political contributions.  I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions longer than six years after filing this final areport. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.  ASSETS Check only one: I do not retain assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.  OFFICEHOLDER Complete this section <i>only</i> if you are an officeholder +- I am also aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions, are assets purchased with political contributions. I an also aware that I will be required to file reports of unexpended contributions, are assets purchased with poli	FILER	WHO IS NOT AN OFFICEHOLDER plete A & B below <i>only</i> if you are not an officeholder. **	
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Check only one:  I do not retain assets purchased with political contributions or interest or other income from political contributions.  I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.  OFFICEHOLDER  Complete this section only if you are an officeholder I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions, or assets purchased with political Signature of Officeholder		not convert unexpended political contributions or unexpended interest or income earner use. I also understand that I must file an annual report of unexpended contributions contributions or unexpended interest or income earned on political contributions long report. Further, I understand that I must dispose of unexpended political contribution	ed on political contributions to personal and that I may not retain unexpended ger than six years after filing this final is and unexpended interest or income
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I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204. Complete this section only if you are an officeholder ** I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions.	Chee	ck only one:	
I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.		I do not retain assets purchased with political contributions or interest or other income	from political contributions.
OFFICEHOLDER  Complete this section only if you are an officeholder  I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.  Signature of Officeholder		I may not convert assets purchased with political contributions or interest or other income use. I also understand that I must dispose of assets purchased with political contributio	e from political contributions to personal
Complete this section only if you are an officeholder      I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file.     I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.     Signature of Officeholder			Signature of Candidate
I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions. Signature of Officeholder	OFFI •• Con	CEHOLDER nplete this section <i>only</i> if you are an officeholder ••	
		I am aware that I remain subject to filing requirements applicable to an officeholder who do I am also aware that I will be required to file reports of unexpended contributions if, a officeholder, I retain political contributions, interest or other income from political contributions	after filing the last required report as an
			Signature of Officeholder
vw.ethics.state.tx.us Revised 04/			Revised 04/19/

1

Form #2204 Rev. 10/2011	This space reserved for office
Submit to: SECRETARY OF STATE Government Filings Section P O Box 12887 Austin, TX 78711-2887 512-463-6334	USE OATH OF OFFICE
Filing Fee: None	
I, John Kelly Jr. execute the duties of the office of	UTHORITY OF THE STATE OF TEXAS, , do solemnly swear (or affirm), that I will faithfully <u>Director of San Leon Municipal Utility District</u> of est of my ability preserve, protect, and defend the Constitution and laws e, so help me God. 
State of Texas County of Galveston Sworn to and subscribed before this (seal) (seal) Commission Expire 03-26-2016	Zi     day of May     , 20 14       Signature of Notary Public or Other Officer       Administering Oath

Form #2201 Rev. 10/2011

Submit to: SECRETARY OF STATE Government Filings Section P O Box 12887 Austin, TX 78711-2887 512-463-6334 512-463-5569 - Fax Filing Fee: None



STATEMENT OF OFFICER

### Statement

I, John Kelly, Jr. , do solemnly swear (or affirm) that I have not directly or indirectly paid, offered, promised to pay, contributed, or promised to contribute any money or thing of value, or promised any public office or employment for the giving or withholding of a vote at the election at which I was elected or as a reward to secure my appointment or confirmation, whichever the case may be, so help me God.

Position to Which Elected/Appointed: Director of San Leon Municipal Utility District

City and/or County: Galveston County

### Execution

Under penalties of perjury, I declare that I have read the foregoing statement and that the facts stated therein are true.

Date:

5/21/14

Signature of Officer

Revised 10/2011

This space reserved for office use

#### APPLICATION FOR A PLACE ON THE DIRECTOR GENERAL ELECTION BALLOT TO: Secretary of Board I request that my name be placed on the above-named official ballot as a candidate for the office indicated below. INDICATE TERM OFFICE SOUGHT Include any place number or other distinguishing number, if any. T FULL UNEXPIRED DIRECTOR PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT FITLL NAME (First, Middle, Last) ORTUNE ORTUNE MAILING ADDRESS (If different from residence address) PERMANENT RESIDENCE ADDRESS (Street address and apartment number. If none, describe location of residence. Do not include P.O. PO BOX 862 Box or Rural Rt.) 2251 AVED SANLEONTX BACLIFF 77518 ZIP CITY STATE ZIP CITY STATE BACLIFF 77518 77539 SAN LEON COUNTY OF RESIDENCE DATE OF BIRTH OCCUPATION (Do not leave blank) EMAIL ADDRESS (Optional) 6/12/68 GALLESTON ASAP REPATRS 4 UD AN GALLESTON COUNTY FLEET Length of Continuous Residence as of Date Application Sworn TELEPHONE NUMBER (Include area code) (Optional) IN DISTRICT OR PRECINCT IN STATE OFFICE: 7 yr(s) 47 yr(s)7 yr(s) HOME: 281-780-1103 mos mos If using a nickname as part of your name to appear on the ballot, your are also signing and swearing to the following statements: I further swear that my nickname does not constitute a slogan nor does it indicate a political, economic, social, or religious view or affiliation. I have been commonly known by this nickname for at least three years prior to this election who being by me Before me, the undersigned authority, on this day personally appeared (name) of here and now duly sworn, upon oath says: "I, (name) , swear that I will support and County, Texas, being a candidate for the office of defend the Constitution and laws of the United States and of the State of Texas. I am a citizen of the United States eligible to hold such office under the Constitution and laws of this state. I have not been finally convicted of a felony for which I have not been pardoned or had my full rights of citizenship restored by other official action. I have not been determined by a final judgment of a court exercising probate jurisdiction to be totally mentally incapacitated or partially mentally incapacitated without the right to vote. I am aware of the nepotism law, Chapter 573, Government Code. I further swear that the foregoing statements included in my application are in all things true and correct." SIGNATURE OF CANDIDATE 14th 2016 dav Sworn to and subscribed before me at this the SEAL Mar Janice Hoffman Title of Officer administering oath Signature of Officer administering bath Commission Expire 08-15-2017 TO BE COMPLETED BY SECRETARY OF BOARD: (See Section 1.007)

Date Received

APPLICATION FOR A PLACE ON THE DZ	RECTOR	GENERAL ELE	CCTION BALLOT		
TO: Secretary of Board TURTE E. HALL					
I request that my name be placed on the above-named official ballot :		office indicated below.			
OFFICE SOUGHT		INDICATE	TERM		
Include any place number or other distinguishing number, if any.		FULL	L UNEXPIRED		
FULL NAME (First, Middle, Last)	PRINT NAM	E AS YOU WANT IT TO	APPEAR ON THE BALLOT		
JULIE E. HALL	Tui	E E. HALC	5		
PERMANENT RESIDENCE ADDRESS (Street address and aparts number. If none, describe location of residence. Do not include Box or Rural Rt.) // 4 5TH ST SAN LEON TH 11539	P.O.	DDRESS (If different from			
CITY SAN STATE ZIP REON TEXAS 77539	7 CITY	STATE	ZIP		
EMAIL ADDRESS (Optional) OCCUPATION (Do no	ot leave blank)	DATE OF BIRTH	COUNTY OF RESIDENCE		
EMAIL ADDRESS (Optional) OCCUPATION (Do not leave blank) DATE OF BIRTH COUNTY OF RI julie hall& gmail.com RETTRED					
TELEPHONE NUMBER (Include area code) (Optional)		ontinuous Residence as of I	Date Application Sworn		
OFFICE:	IN STATE	IN CITY	IN DISTRICT OR PRECINCT		
HOME: 381-339-4505	<u>40</u> yr(s) mos	yr(s) mos	mos		
If using a nickname as part of your name to appear on the ball swear that my nickname does not constitute a slogan nor does it been commonly known by this nickname for at least three years	it indicate a political,	ing and swearing to the fo economic, social, or religio	llowing statements: I further ous view or affiliation. I have		
Before me, the undersigned authority, on this day personally appeared (name), who being by me here and now duly sworn, upon oath says: "I, (name), of, of, swear that I will support and defend the Constitution and laws of the United States and of the State of Texas. I am a citizen of the United States eligible to hold such office under the Constitution and laws of this state. I have not been finally convicted of a felony for which I have not been pardoned or had my full rights of citizenship restored by other official action. I have not been determined by a final judgment of a court exercising probate jurisdiction to be totally mentally incapacitated without the right to vote. I am aware of the nepotism law, Chapter 573, Government Code.					
I further swear that the foregoing statements included in my applica					
	X	Julie C	Hall TE		
Sworn to and subscribed before me at, this th	4 (2)	day of January			
Signature of Offices administering oath <sup>1</sup>	Office Mar Title of Officer add	Notary	Janice Hoffman Commission Expires		
TO BE COMPLETED BY SECRETARY OF BOARD: (See Section 1.007)	Date	Received Si	ignature of Secretary		

2-21 Prescribed by Secretary of State Section 141.031, Chapters 143 and 144, Texas Election Code

ALL INFORMATION IS REQUIRED TO LE PR	OVIDED UNLES	S INDICATED OPT	IGNAL			1/2017
APPLICATION FOR A PLACE	ON THE	DIRECTO	<u>RS</u>	GENER	AL ELECTION	N BALLOT
TO: City Secretary/Secretary of Board						
I request that my name be placed on the	above-named	official ballot as	a candiciate for the office indic	ated belo	w.	
OFFICE SOUGHT (Include any place numb	er or other di	stinguishing num	ber, if any.)		CATE TERM	
DIRECTOR.				X	FULL	
					UNEXPIRED	
FULL NAME (First, Middle, Last)			PRINT NAME AS YOU WANT			1 121363 //
TYSON, BLAISE, K	SENNE	DY	TYSON BLA			
PERMANENT RESIDENCE ADDRESS (Do n	ot include a P	.O. Box or Rural	PUBLIC MAILING ADDRESS (C	ampaign	mailing addres	s, if available.)
Route. If you do not have a residence a at which you receive personal mail and lo			P.O. BOX	W		
635 ISTH STREE			DICKINSON,	TX	77624	7
SAN LEON, TX 77			DICKINSON	10	1331	
	$\mathcal{O}\mathcal{O}$					
CITY	STATE	219	CITY		STATE	ZIP
SAN LEON	TX	77539	DICKINSON		TX	77539
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tyson kennedy sanles mude SALES					ptional)	
Vance. Som						
TELEPHONE CONTACT INFORMATION (C		LENGT	H OF CONTINUOUS RESIDENC		RRITORY FROM	
(034) 943 6 / 70 DESIGE SOLIGHT IS FLECTED'						
Work: (832) 451-7316 21 year (s) 16 year (s)			(2)			
Cell: month(s) month(s)						
If using a nickname as part of your name to appear on the ballot, you are also signing and swearing to the following statements: I further swear that my nickname does not constitute a slogan nor does it indicate a political, economic, social, or religious view or affiliation. I have been						
commonly known by this nickname for at least three years prior to this election.						
Before me, the undersigned authority, on this day personally appeared (name) Tyson Blasse Kennedy, who being by me						
Before me, the undersigned authority, on this day personally appeared (name) 19 3070 0 74 277 4277 4277 who being by me						
", (name) TISON BLAISE KENNEDT of CALVESTON County, Texas, being a candidate for the office of DIRECTOR swear that I will support and defend the Constitution and laws						
of the United States and of the State of Texas. I am a citizen of the United States eligible to hold such office under the constitution and laws of this state. I have not been finally convicted of a felony for which I have not been pardoned or had my full rights of citizenship restored by other						
this state. I have not been finally convic official action. I have not been determine	ted of a felom	y for which I have independ of a co	a not been pardoned or had my our exercising probate jurisdict	full right	s of citizenship totally mentall	restored by other v incapacitated or
partially mentally incapacitated without	the right to v	ote. i am aware o	of the nepotism law, Chapter 57	3, Goven	nment Code.	
) further expect that the foregoing states	ments include	d in my applicatio	on ane in all things true action	met."		And the second se
I further swear that the foregoing statements included in my application are in all things true and correct."						
		X	61			Constant of the local data
			SIGNATURE		The second se	-
Sworn to and subscribed before metat_	3: 38	this the	day of February	State State	LUGAN	MCKOWN State of Texas
ton MA	Car		A ROOM	X		ires 08-09-2020
Signature of Officer Administering Oath	en c	Title	of Officer Administering Oat	and the second	Notary ID	130771485
TO BE COMPLETED BY CITY SECRETARY		Y OF BOARD:	4			
(See Section 1.007)	Date R	eceived	Signature of Secr	ctary		
Voter Registration Status Verified						

2-21 State Code /2017 Sectio

	Prescribe	ed by Secr	etary of
n 141.031, Chapters	143 and 14	44, Texas	Election
			1/

ALL INFORMATION IS REQUIRED TO BE PRO	VIDED UNLES	S INDICATED OPT	IONAL			
APPLICATION FOR A PLACE O	ON THE	MAY,	2018	GENER/	AL ELECTION	N BALLOT
TO: City Secretary/Secretary of Board						
I request that my name be placed on the a	above-named	official ballot as	a candidate for the office indic	ated below	Ν.	
OFFICE SOUGHT (Include any place number	er or other di	stinguishing num	ber, if any.)	INDI	CATE TERIVI	
				F	ULL	
DIRECTOR, SANL	EON M	IUD BO	ARD	and the second sec	JNEXPIRED	1
FULL NAME (First, Middle, Last)		- 2.8	PRINT NAME AS YOU WANT	IT TO APP	EAR ON THE B	ALLOT
JOSEPH LYNN M	TANCH	ACA	JOE MAN	ICHA	CA	
PERMANENT RESIDENCE ADDRESS (Do no	ot include a P	.O. Box or Rural	PUBLIC MAILING ADDRESS (	Campaign	mailing addres	ss, if available.)
Route. If you do not have a residence a	ddress, descr	ibe the address	$\sim 0$		~ 1	
at which you receive personal mail and lo	cation of resi	dence.)	P.0. Box	S'	<i>i</i> 4	
947 17 E STRE						
SAN LEON, 7	X 77	539				
CITY	STATE	ZIP	CITY		STATE	ZIP
SAN LEON	TX	77539	KEMAH		TX	77565
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		RECTOR			NONDER (C	ptionaly
manchaca @gmALL.C	IOM SU	PPLY CHAIN	SERVICE	TE AS OF D	ATE APPLICAT	ION SWORN
TELEPHONE CONTACT INFORMATION (O	ptional)	LENG	IN STATE	IN TE	RRITORY FRO	M WHICH THE
Home:				OF	FICE SOUGHT	
Work:			64 year (s)		<u>17</u> year	(s)
Cell:       281-802-4640       month(s)         If using a nickname as part of your name to appear on the ballot, you are also signing and swearing to the following statements: I further swear						
If using a nickname as part of your name	to appear or	the ballot, you a	re also signing and swearing to	o the follow	ving statemen view or affilia	ts: I further swear tion. I have been
If using a nickname as part of your name to appear on the ballot, you are also signing and the ballot, or religious view or affiliation. I have been that my nickname does not constitute a slogan nor does it indicate a political, economic, social, or religious view or affiliation. I have been commonly known by this nickname for at least three years prior to this election.						
				11011-0		who being by me
Before me, the undersigned authority, on this day personally appeared (name)						
here and now duly sworn, upon oath say	/s:		A	1		
"I, (name) JOE MAN	VCIMAC	A of	GAWES TO A	3	County	, Texas, being a
candidate for the office of	Tawas 1 am a	citizon of the lin	ited States eligible to hold su	ch office ui	nder the const	itution and laws of
C II	and of a falar	w for which   hav	e not been pardoned or had h	IV IUII LIGII	S UI CIUZEIISIII	o restored by other
the stand beaution and been determined	nod by a final	judgment of a co	ourt exercising propate jurisui	cuon to be	Locally menta	lly incapacitated or
partially mentally incapacitated without			-		innene couc.	
I further swear that the foregoing state	ments include	ed in my application	on are in all things true and co	rrect."		
$\cap$		V	Stat	he S		
			SIGNATURE	OF CAND	DATE (F)	TAMMY MCCLINTOCK
Sworn to and subscribed before me at	6:20 a	M. this th		ack		Notary ID # 12477019
	$\overline{n}$	(			UTATE OF TEXAS	MyEGommission Expire March 7, 2020
	<u> </u>			ê	and the second sec	*****
Signature of Officer Administering Oath	A		of Officer Administering Oath	1		
TO BE COMPLETED BY CITY SECRETARY	OR SECRETAR	RY OF BOARD:				
(See Section 1.007)	Date	Received	Signature of Se	cretary		
Voter Registration Status Verified	Dute					

ALL INFORMATION IS REQUIRED TO BE PRO				~			
APPLICATION FOR A PLACE	ON THE	Sap Leon	- IVIU	LP	GENERA	LELECTION	BALLOT
TO: City Secretary/Secretary of Board							
I request that my name be placed on the	above-named	official ballot as	a candidate	for the office indica	ted below.		
OFFICE SOUGHT (Include any place numb	per or other dis	stinguishing num	ber, if any.)		INDICA	ATE TERM	
					1/ FL	JLL	
Board of Direc	tors		9	*		NEXPIRED	
FULL NAME (First, Middle, Last)	~12		PRINT NA	VE AS YOU WANT I	T TO APPE	AR ON THE B	ALLOT
Kelly Neason				Kolly P	10150	h	
	anti-aluda a D	O Bay or Pural	DUBLIC M	AILING ADDRESS (C	00000		s, if available.)
PERMANENT RESIDENCE ADDRESS (Do r Route. If you do not have a residence a	address, descri	be the address				5	
at which you receive personal mail and lo	ocation of resid	dence.)	M	110 Octice	e		
2220 Bradway				0.7			
are Districted							
JA:							
Aa	CTATE	ZIP	CITY			STATE	ZIP
CITY	STATE	ZIF De 20	CITT				(Source)
Sth low	16	11257				NOTED DECI	STRATION VUID
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	LIRT	Siector	2				
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			1-1		OFF	ICE SOUGHT	IS ELECTED
Work:			41.	year (s)		10 year	(s)
cell: 281.627.2882			1	nonth(s)		mont	th(s)
	e to appear on	the ballot, you a	re also signi	ng and swearing to	the followi	ng statement	s: I further swear
that my nickname does not constitute	a slogan nor o	loes it indicate i	a political, e	conomic, social, or	religious vi	iew or affiliat	tion. I have been
commonly known by this nickname for	at least three y	ears prior to thi	s election.				
Before me, the undersigned authority, o	on this day per	sonally appeared	d (name)				who being by me
here and now duly sworn, upon oath sa	iys:						
		of				County,	Texas, being a
"I, (name) candidate for the office of			, S1	wear that I will supp	port and de	fend the Cor	stitution and laws
Condidate for the end of the State of	Taxas Lama	citizen of the U	nited States	eligible to hold such	n office und	der the consti	tution and laws of
of the United States and of the State of this state. I have not been finally convi official action. I have not been determ	stad of a talan	vtor which I hav	e not neen t	Darooned of fidu my	i un rignica	Of Citizensing	the second s
official action. I have not been determ partially mentally incapacitated withou	t the right to v	ote. I am aware	of the nepot	ism law, Chapter 57	73, Governr	ment Code.	
I further swear that the foregoing state	ments include	d in my applicati	on are infall	things true and corr	rect.		
		X	N	DUITON	ala	Lan	
			and a	SIGNATUR	OFCANISAD	ATE JAMIE	L HUBBARD
Sworn to and subscribed before me at		, this th	e <u> </u>	y of Jesnen	120		ID # 572749
	1 2	N 1	1	$\mathcal{O}$ $\mathcal{O}$ $\mathcal{O}$ $\mathcal{O}$ $\mathcal{O}$	Single and the state		ber 27 2020
Camie Littus	11 - 1	R L	CALLA I	IA MICI			1
	Tad	IV(	MANY	runs			
Signature of Officer Administering Oat	h		of Officer A	dministering Oath			
TO BE COMPLETED BY CITY SECRETARY	or secretar		of Officer A	dministering Oath			
Signature of Officer Administering Oath TO BE COMPLETED BY CITY SECRETARY (See Section 1.007)	OR SECRETAR		of Officer A	dministering Oath	etary		

2.21

02-06-2020

Phillip David Haskett P.O. Box 1941 – Mailing Address 142 Fifteenth Street League City, TX 77574 832-245-0834

Andrew Miller Public Information Officer San Leon Municipal Utility District 443 24<sup>th</sup> Street San Leon, TX 77539

#### Follow-up to Texas Public Information Act Request dated 01-21-2020

Mr. Miller,

In my opinion, the documents that were provided yesterday in response to my request are woefully incomplete.

For instance, there are no semi-annual reports for any party<sup>1</sup>. Also, there are no daily pre-election reports for any party<sup>2</sup>.

Nor are there any documents whatsoever for Mr. Keith Gossett. While he may have been recently appointed, he is not immune from the reporting requirements after his directorship commenced.

Finally, I specifically requested these documents for *all* persons listed for *all* elections in which they have participated. To my knowledge, Messrs. Manchaca, Kennedy and Kelly have been serving (or did serve) for substantial periods of time, perhaps as long as 16 years.

Therefore, each of these individuals have participated in several election cycles, and these reports should be extant for each party. At a minimum, they should exist for the persons who are currently serving on the board.

Naturally, the Texas open records act does not require you to create records that do not exist. If the items I have identified above in fact do not exist, please provide me with a statement to that effect forthwith so that I can address this issue with the Texas Ethics Commission.

Finally, please consider this letter to be a formal request for the ENTIRE notary logbook entry for each notarization on any of the documents you have or will provide that was performed by either Janice Hoffman or Steven Doncarlos, who as the District's attorney is subject to an open records request directed to the District.

I can be reached at the telephone number listed above. Please advise when these records will be available for pick up at your offices.

Thank you in advance for your prompt response.

<sup>&</sup>lt;sup>1</sup> See Item #2 of my request.

<sup>&</sup>lt;sup>2</sup> See Item #5 of my request.

Sincerely,

Original Signature on File

Phillip David Haskett



February 7, 2020

Phillip David Haskett P.O. Box 1941 League City, TX 77574

Dear Mr. Haskett:

We have received your follow-up letter to the records we released corresponding to you request under the Texas Public Information Act, dated January 21, 2020. While reviewing and preparing your request, there was a misunderstanding regarding the depth to which you wanted ballot applications; we apologize for the confusion and will accelerate procurement of the entirety of ballot applications for the individuals you've listed. As the original request predates the docket of information requests we have lined up, we will address this before moving on to the remaining information requests and should have it to you by the beginning of next week.

Regarding the records you believe are absent, namely "semi-annual reports for any party" and "daily pre-election reports for any party", we have released all documents on file pertaining to the election years we initially believed encompassed your request. As stated above, we understand from your response letter dated 2/6/20 that you believed additional years should have been included in your initial request, so we will continue working to resolve your request to your satisfaction.

Regarding the notary request, you will need to individually request those documents from the respective parties as a notary is its own entity and not a position within the District. The entries in a notary's record book are public information and anyone is eligible to request copies of the entries, however that is a request that should be taken up with the notary in question.

Sincerely,

Inde MAX

Andrew Miller District Manager San Leon MUD

I, <u>GENE SHAMER</u>, do hereby make application for a place on the ballot of the election to Directors of SAN LEON MUNICIPAL UTILITY DISTRICT. Pursuant to Election Code 141.031, I do hereby swear to the following facts:

My name is: <u>GENE SHANER</u>. My occupation is: <u>Refined</u>. Office sought: DIRECTOR (full term).

I am a citizen of the United States of America.

I have not been determined mentally incompetent by a final judgment of any court.

I have not been finally convicted of a felony from which I have not been pardoned or otherwise released from the resulting disabilities.

My date of birth is:
My residence address is: 2580 CLIFF DR; SAN LEON 77539
My mailing address is: <u>P.O. Box 8447 BACUIFE TX</u> , 77518
I have lived in the State of Texas for $54$ years and in the SAN LEON MUNICIPAL UTILITY DISTRICT for $15$ years.
The second date for

I, <u>GENE SHAMER</u>, of Galveston County, Texas, being a candidate for the office of Board of Directors of the San Leon Municipal Utility District, swear that I will support and defend the constitution and laws of the United States and of the State of Texas.

I am aware of the nepotism law, Articles 5996(a) through 5996(g) of the Revised Civil Statutes of the State of Texas.

I own land in said District subject to taxation, and I am 21 years of age or over.

June Aleur

### THE STATE OF TEXAS

COUNTY OF GALVESTON

SUBSCRIBED AND SWORN TO before me on this the  $\frac{28}{100}$  day of  $\frac{100}{100}$ 



Notary Public, State of Texas

I, <u>ROBERT D.</u> (BOB) ATKINSON do hereby make application for a place on the ballot of the election to Directors of SAN LEON MUNICIPAL UTILITY DISTRICT. Pursuant to Election Code 141.031, I do hereby swear to the following facts:

My name is: <u>ROBERT D. (Bo</u>	
My occupation is:ANNING	SPECIALIST
Office sought: DIRECTOR	_(full term).

I am a citizen of the United States of America.

I have not been determined mentally incompetent by a final judgment of any court.

I have not been finally convicted of a felony from which I have not been pardoned or otherwise released from the resulting disabilities.

My date of birth is: 77539
My residence address is: 206 15TH ST, SANLEON, TEXAS,
My mailing address is: <u>RT. 1, BOX ZIOO, DICKINSON</u> , TX, 77539
I have lived in the State of Texas for $\underline{67}$ years and in the SAN LEON MUNICIPAL UTILITY DISTRICT for $\underline{5}$ years.
I, <u>ROBERT D. ATKIN</u> , of Galveston County, Texas, being a candidate for the office of Board of Directors of the San Leon Municipal Utility District, swear that I will support and defend the constitution and laws of the United States and of

that I will support and del the State of Texas.

I am aware of the nepotism law, Articles 5996(a) through 5996(g) of the Revised Civil Statutes of the State of Texas.

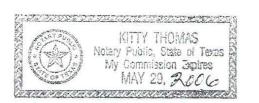
I own land in said District subject to taxation, and I am 21 years of age or over.

Robert D. Allimon (BOB)

THE STATE OF TEXAS

COUNTY OF GALVESTON

SUBSCRIBED AND SWORN TO before me on this the <u>172</u> day of <u>Fubruary</u>, 20<u>06</u>



Notary Public, State of Texas

I, <u>DARLA A SHARPE</u>, do hereby make application for a place on the ballot of the election to Directors of SAN LEON MUNICIPAL UTILITY DISTRICT. Pursuant to Election Code 141.031, I do hereby swear to the following facts:

My name is: DARLA A SHARPE. My occupation is: <u>BOOKKEEPER</u>. Office sought: DIRECTOR (full term).

I am a citizen of the United States of America.

I have not been determined mentally incompetent by a final judgment of any court.

I have not been finally convicted of a felony from which I have not been pardoned or otherwise released from the resulting disabilities.

My date of birth is:
My residence address is: 2406 E BAYSHORE DR - 77539
My mailing address is: PO BOX 8126, BACLIFF, TX 77518

I have lived in the State of Texas for 10 years and in the SAN LEON MUNICIPAL UTILITY DISTRICT for 10 years.

I, <u>DARIA A SHARPE</u>, of Galveston County, Texas, being a candidate for the office of Board of Directors of the San Leon Municipal Utility District, swear that I will support and defend the constitution and laws of the United States and of the State of Texas.

I am aware of the nepotism law, Articles 5996(a) through 5996(g) of the Revised Civil Statutes of the State of Texas.

I own land in said District subject to taxation, and I am 21 years of age or over.

### THE STATE OF TEXAS

COUNTY OF GALVESTON

SUBSCRIBED AND SWORN TO before me on this the 24 day of FEBRUARY, 2006



Notary Public, State of Texas

 $I \subseteq \underline{CRYETR}$ , do hereby make application for a place on the ballot of the election to Directors of SAN LEON MUNICIPAL UTILITY DISTRICT. Pursuant to Election Code 141.031, I do hereby swear to the following facts:

My name is: <u>JERRY ENDENCE ETIE</u> My occupation is: <u>RETINED</u>. Office sought: JOFRO OF TIME Jorg (full term).

I am a citizen of the United States of America.

I have not been determined mentally incompetent by a final judgment of any court.

I have not been finally convicted of a felony from which I have not been pardoned or otherwise released from the resulting disabilities.

My date of birth is: \_\_\_\_\_\_ My residence address is: 60147539My mailing address is: RTI Box 1644 Dictions 77539

I have lived in the State of Texas for  $64^{ty}$  bears and in the SAN LEON MUNICIPAL UTILITY DISTRICT for 3 years.

I, Verry ETIX, of Galveston County, Texas, being a candidate for the office of Board of Directors of the San Leon Municipal Utility District, swear that I will support and defend the constitution and laws of the United States and of the State of Texas.

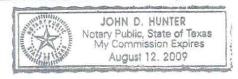
I am aware of the nepotism law, Articles 5996(a) through 5996(g) of the Revised Civil Statutes of the State of Texas.

I own land in said District subject to taxation, and I am 21 years of age or over.

### THE STATE OF TEXAS

COUNTY OF GALVESTON

SUBSCRIBED AND SWORN TO before me on this the 13 day of MARCH, 2006



Notary Public, State of Texas

I, <u>PhILLIP Conte</u>, do hereby make application for a place on the ballot of the election to Directors of SAN LEON MUNICIPAL UTILITY DISTRICT. Pursuant to Election Code 141.031, I do hereby swear to the following facts:

My name is: PHILLIP CONE.

My occupation is: MEAT COTTER.

Office sought: BOARD OFDIRECTOR (full term).

I am a citizen of the United States of America. YES

I have not been determined mentally incompetent by a final judgment of any court. And

I have not been finally convicted of a felony from which I have not been pardoned or otherwise released from the resulting disabilities.  $\mathcal{M} \otimes$ 

My date of birth is: \_\_\_\_\_

My residence address is: 1045 1257 SAR LEON

My mailing address is: <u>RT 1 Boy1327 Dictrinson</u> 78539

I have lived in the State of Texas for  $\underline{\diamond \varphi}$  years and in the SAN LEON MUNICIPAL UTILITY DISTRICT for  $\underline{/9}$  years.

I, <u>PhILLIE</u> CONE, of Galveston County, Texas, being a candidate for the office of Board of Directors of the San Leon Municipal Utility District, swear that I will support and defend the constitution and laws of the United States and of the State of Texas.

I am aware of the nepotism law, Articles 5996(a) through 5996(g) of the Revised Civil Statutes of the State of Texas.

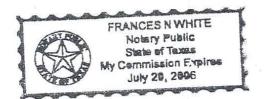
I own land in said District subject to taxation, and I am 21 years of age or over.  $\gamma \not = 3$ 

Philly ton

### THE STATE OF TEXAS

COUNTY OF GALVESTON

SUBSCRIBED AND SWORN TO before me on this the  $10^{\text{th}}$  day of March 2006.



Furnen h. White

Notary Public, State of Texas

I, John D. HUNTER do hereby make application for a place on the ballot of the election to Directors of SAN LEON MUNICIPAL UTILITY DISTRICT. Pursuant to Election Code § 141.031, I do hereby swear to the following facts:

My name is: Joh UNTER My occupation is: <u>RETIRED</u> REAL ESTATE AGENT Office sought: MRESI DEALT (full term).

I am a citizen of the United States of America.

I have not been determined mentally incompetent by a final judgment of any court.

I have not been finally convicted of a felony from which I have not been pardoned or otherwise released from the resulting disabilities.

My date of birth is: \_\_\_\_\_\_. My residence address is: <u>910</u> <u>17<sup>TH</sup></u> <u>Streegt</u> <u>Saw Leon</u> 77539 My mailing address is: <u>RT3 Box 1058A</u> <u>Dickinson</u> Tx 77539 I have lived in the State of Texas for <u>LIFE</u> years, and in the SAN LEON MUNICIPAL UTILITY DISTRICT for <u>10</u> years.

I, John D. HUNTER, of Galveston County, Texas, being a candidate for the office of Board of Directors of the San Leon Municipal Utility District, swear that I will support and defend the constitution and laws of the United States and of the State of Texas.

I am aware of the nepotism law, Articles 5996(a) through 5996(g) of the Revised Civil Statutes of the State of Texas.

I own land in said District subject to taxation, and I am 18 years of age or over.

(Name)

# STATE OF TEXAS

COUNTY OF GALVESTON

SUBSCRIBED AND SWORN TO before me on this 10 day of denus ry, 2004.

\$ \$

EDNA C DETTER Notary Public, State of Texas My Commission Expires: June 29, 2007

Notary Public, State of Texas

I, <u>Edna Detter</u>, do hereby make application for a place on the ballot of the election to Directors of SAN LEON MUNICIPAL UTILITY DISTRICT. Pursuant to Election Code § 141.031, I do hereby swear to the following facts:

Myname is: Edna Detter	
My occupation is: Real Estate	
Office sought: Director	(full term).

I am a citizen of the United States of America.

I have not been determined mentally incompetent by a final judgment of any court.

I have not been finally convicted of a felony from which I have not been pardoned or otherwise released from the resulting disabilities.

My date of birth is: \_\_\_\_\_\_\_. My residence address is: <u>9526 Ave. D</u>\_\_\_\_\_. My mailing address is: <u>P0B04401</u>. I have lived in the State of Texas for <u>43</u> years, and in the SAN LEON MUNICIPAL UTILITY DISTRICT for <u>6</u> years. I, <u>Edma Deffer</u>, of Galveston County, Texas, being a candidate for the

office of Board of Directors of the San Leon Municipal Utility District, swear that I will support and defend the constitution and laws of the United States and of the State of Texas.

I am aware of the nepotism law, Articles 5996(a) through 5996(g) of the Revised Civil Statutes of the State of Texas.

I own land in said District subject to taxation, and I am 18 years of age or over.

Ry a

(Name)

JOHN D. HUNTER Notary Public, State of Texas My Commission Expires August 12, 2009

STATE OF TEXAS

COUNTY OF GALVESTON

SUBSCRIBED AND SWORN TO before me on this 1/2 day of 12

00 00 00

Notary Public, State of Texas

I, Joe MANCHACA, do hereby make application for a place on the ballot of the election to Directors of SAN LEON MUNICIPAL UTILITY DISTRICT. Pursuant to Election Code 141.031, I do hereby swear to the following facts:

My name is: JOE MANCHACA.

My occupation is: DIRECTOR OF DISTRIBUTION OPERATIONS

Office sought: BOARD OF DIRECTORS (full term).

I am a citizen of the United States of America.

I have not been determined mentally incompetent by a final judgment of any court.

I have not been finally convicted of a felony from which I have not been pardoned or otherwise released from the resulting disabilities.

My date of birth is:	
My residence address is: 939 17th 5t. SAN LEON	
My mailing address is: <u>P.O. Box 594, KEMAH TX 77</u>	565
I have lived in the State of Texas for $\underline{53}$ years and in the SAN LE MUNICIPAL UTILITY DISTRICT for $\underline{3}/_{2}$ years.	ON

I, <u>JOE MANCHACA</u>, of Galveston County, Texas, being a candidate for the office of Board of Directors of the San Leon Municipal Utility District, swear that I will support and defend the constitution and laws of the United States and of the State of Texas.

I am aware of the nepotism law, Articles 5996(a) through 5996(g) of the Revised Civil Statutes of the State of Texas.

I own land in said District subject to taxation, and I am 21 years of age or over.

THE STATE OF TEXAS

COUNTY OF GALVESTON

SUBSCRIBED AND SWORN TO before me on this the 13 + 20 day of March, 200/2.

Notary Public, State of Texas

HIDON S OCTAV Commission Exc

I,  $\underline{\forall 450N \ B. KENNEDY}$ , do hereby make application for a place on the ballot of the election to Directors of SAN LEON MUNICIPAL UTILITY DISTRICT. Pursuant to Election Code 141.031, I do hereby swear to the following facts:

My name is: <u>TYSUN BLAISE KENNEDY</u>. My occupation is: <u>SALES ENGINEER</u>. Office sought: <u>DIRECTOR</u> (full term).

I am a citizen of the United States of America.

I have not been determined mentally incompetent by a final judgment of any court.

I have not been finally convicted of a felony from which I have not been pardoned or otherwise released from the resulting disabilities.

My date of birth is:					
My residence address is:	1520 JOHN	STREET	, SAN	EON	
it admoss is:	RR3 BOX	929			
	to of Texas for	r 7 years	and in	the SAN	LEON
I have lived in the Sta MUNICIPAL UTILITY I	DISTRICT IOI _			1.	

I, <u>TYSON B. KENNEDY</u>, of Galveston County, Texas, being a candidate for the office of Board of Directors of the San Leon Municipal Utility District, swear that I will support and defend the constitution and laws of the United States and of the State of Texas.

I am aware of the nepotism law, Articles 5996(a) through 5996(g) of the Revised Civil Statutes of the State of Texas.

I own land in said District subject to taxation, and I am 21 years of age or over.

Jose Blin Hennedy

THE STATE OF TEXAS

COUNTY OF GALVESTON

SUBSCRIBED AND SWORN TO before me on this the <u>1044</u> day of <u>March</u>, 20<u>06</u>.

PREOFTENS 9-9-2009 Notary Public, State of Texas

I, TYGON B. KENNEDY, do hereby make application for a place on the ballot of the election to Directors

of SAN LEON MUNICIPAL UTILITY DISTRICT. Pursuant to Election Code § 141.031, I do hereby swear to the following facts:

My name is:	TYSON B	, KENNESY	· · ·
My occupation is:	SALES	ENGINEER	
Office sought:	DIREC	TOR	(full term).

I am a citizen of the United States of America.

I have not been determined mentally incompetent by a final judgment of any court.

I have not been finally convicted of a felony from which I have not been pardoned or otherwise released from the resulting disabilities.

My date of birth is:		······································	
My residence address is: _	1505	JOHN ST., SAN LEON, TX 77539	
My mailing address is:	1505	JOHN ST., SAN LOON, TX 77539	

I have lived in the State of Texas for  $\frac{12}{5}$  years and in the SAN LEON MUNICIPAL UTILITY DISTRICT for 5 years.

I, <u>TISON</u> B. KENNED, of Galveston County, Texas, being a candidate for the office of Board of Directors of the San Leon Municipal Utility District, swear that I will support and defend the constitution and laws of the United States and of the State of Texas.

I am aware of the nepotism law, Articles 5996(a) through 5996(g) of the Revised Civil Statutes of the State of Texas.

I am a resident of the SAN LEON MUNICIPAL UTILITY DISTRICT.

I own land in said District subject to taxation, and I am 18 years of age or over.

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8

STATE OF TEXAS COUNTY OF GALVESTON

omm. Exp.

SUBSCRIBED AND SWORN TO before me on this 19 day 2010. Notary Public, State of Texas TEPHEN Notary Public State of Te

I, John A. Kelly JR, do hereby make application for a place on the ballot of the election to Directors

of SAN LEON MUNICIPAL UTILITY DISTRICT. Pursuant to Election Code § 141.031, I do hereby swear to the

following facts:		
My name is: Joh	N A. Kelly JP,	
My occupation is:	$\cap$ ,	
Office sought: U. P	es/TREASURM	(full term).

I am a citizen of the United States of America.

I have not been determined mentally incompetent by a final judgment of any court.

I have not been finally convicted of a felony from which I have not been pardoned or otherwise released from the resulting disabilities.

My date of birth is:	
My residence address is. 010 0	5AN LEON, TX. 77539
My mailing address is: P.O. Box 1176	Lengue City Tx 77574

I have lived in the State of Texas for 35 years and in the SAN LEON MUNICIPAL UTILITY DISTRICT for 20 years.

I,  $\underline{\text{Tohn} A}$ ,  $\underbrace{\text{Kell}}_{\text{Jell}}$ , of Galveston County, Texas, being a candidate for the office of Board of Directors of the San Leon Municipal Utility District, swear that I will support and defend the constitution and laws of the United States and of the State of Texas.

I am aware of the nepotism law, Articles 5996(a) through 5996(g) of the Revised Civil Statutes of the State of Texas.

I am a resident of the SAN LEON MUNICIPAL UTILITY DISTRICT.

I own land in said District subject to taxation, and I am 18 years of age or over.

Name) § STATE OF TEXAS 8 COUNTY OF GALVESTON 2010. SUBSCRIBED AND SWORN TO before me on this Notary Public, State of Texas STEPHEN H. DONCARLOS Notary Public, State of Texas Comm. Exp. 03-26-12

I, JOE MANCHACA do hereby make application for a place on the ballot of the election to Directors of SAN LEON MUNICIPAL UTILITY DISTRICT. Pursuant to Election Code § 141.031, I do hereby swear to the following facts:

My name is:	JOE	MAA	<i>ichaca</i>	•
My occupation is:	DIVE	ctor	OWNED	FACILITIES
Office sought:	BORRO	OFD	irectors	(full term).

I am a citizen of the United States of America.

I have not been determined mentally incompetent by a final judgment of any court.

I have not been finally convicted of a felony from which I have not been pardoned or otherwise released from the resulting disabilities.

My date of birth is:				·		
My residence address is:	939	172	57.	SAN Lea	w T	¥.
My mailing address is:	P.O. B.	ox S	94,	KEMAH	Tr.	77565
There lived in the State O						

I have lived in the State of Texas for 57 years and in the SARVELOR MORION THE OTHER TEXAS 9 years.

I, JOE MAJCHACA, of Galveston County, Texas, being a candidate for the office of Board of Directors of the San Leon Municipal Utility District, swear that I will support and defend the constitution and laws of the United States and of the State of Texas.

I am aware of the nepotism law, Articles 5996(a) through 5996(g) of the Revised Civil Statutes of the State of Texas.

I am a resident of the SAN LEON MUNICIPAL UTILITY DISTRICT.

I own land in said District subject to taxation, and I am 18 years of age or over.

		(Nome) Man	
STATE OF TEXAS COUNTY OF GALVESTON	§ §		
SUBSCRIBED AND SWORN TO	) before 1	ne on this 18 day of January, 2010.	
STEPHEN H. DONCARLO Notary Public, State of Texas Comm. Exp. 03-26-12		Notary Public, State of Texas	

#### APPLICATION FOR PLACE ON BALLOT

I, $\underline{\text{Jimmy C-Ross}}$ , do hereby make application for a place on the ballot of the election to Directors
of SAN LEON MUNICIPAL UTILITY DISTRICT. Pursuant to Election Code § 141.031, I do hereby swear to the
following facts:
My name is: JIMMY C. Ross.
My occupation is: <u>CHemical Operator</u> .
Office sought: <u>Director</u> (full term).
I am a citizen of the United States of America.
I have not been determined mentally incompetent by $a$ I have not been finally convicted of a felony from whi the resulting disabilities. $332-623-3193_{a}$
I have not been finally convicted of a felony from whi the resulting disabilities.
My date of birth is:
My residence address is: 333 TENNL
My mailing address is: 9012 BACI.F.
I have lived in the State of Texas for $\underline{59}$ years and for $\underline{7}$ years.
I, Jimmy Cr Ross, of Galveston C dof
Directors of the San Leon Municipal Utility Distriction and laws of the United States and of the State of Texas.

I am aware of the nepotism law, Articles 5996(a) through 5996(g) of the Revised Civil Statutes of the State of Texas.

I am a resident of the SAN LEON MUNICIPAL UTILITY DISTRICT.

00 00

I own land in said District subject to taxation, and I am 18 years of age or over.

Jumming C Ross (Name)

STATE OF TEXAS COUNTY OF GALVESTON

SUBSCRIBED AND SWORN TO before me on this 23 day of February, 2010.

Notary Public, State of Texas



#### APPLICATION FOR PLACE ON BALLOT

I. Andrew Redmond, do hereby make application for a place on the ballot of the election to Directors

of SAN LEON MUNICIPAL UTILITY DISTRICT. Pursuant to Election Code § 141.031, I do hereby swear to the

following facts:

My name is:	Andrew	Redmond	20	······································
My occupatio	on is: Busir	ress owner		
Office sough	t: brasel i	of Directors		(full term).

I am a citizen of the United States of America.

I have not been determined mentally incompetent by a final judgment of any court.

I have not been finally convicted of a felony from which I have not been pardoned or otherwise released from the resulting disabilities.

My date of birth is: _			·		
My residence address is:	334	Tennyson	San Leon	TX	775 39
My mailing address is:	Same		·		
	-	ne 1. 1	CANTEONIME	TOTAL	UTTI ITV DISTRIC

I have lived in the State of Texas for  $\frac{25}{5}$  years and in the SAN LEON MUNICIPAL UTILITY DISTRICT for 1.5 years.

I, <u>Andrew Rechnowed SC</u>, of Galveston County, Texas, being a candidate for the office of Board of Directors of the San Leon Municipal Utility District, swear that I will support and defend the constitution and laws of the United States and of the State of Texas.

I am aware of the nepotism law, Articles 5996(a) through 5996(g) of the Revised Civil Statutes of the State of Texas.

I am a resident of the SAN LEON MUNICIPAL UTILITY DISTRICT.

I own land in said District subject to taxation, and I am 18 years of age or over.

§ STATE OF TEXAS 8 COUNTY OF GALVESTON SUBSCRIBED AND SWORN TO before me on this Edna C Detter My Commission Expires Notary Public, State of Texas 06/29/2011

Apr-23-10	11:02am	From-PIONEER EXPLORATION, LTD.	8322491270

Austin, Texas 78711-2070

P.O. Box 12070

T-111 P.002/003 F-843

(512)463-6800

.

1-800-325-8505

# APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

**Texas Ethics Commission** 

2 0

FORM CTA PG 1

See CTA Instruction Guide for detailed instructions.	1 Total pages filos:			
2 CANDIDATE NAME MR. JOE L NICKNAME LAST SUFFIX	OFFICE LISE ONLY Acci. \$ Datn Roceived			
3 CANDIDATE MAILING ADDRESS				
4     AREA CODE     PHONE     EXTENSION       CANDIDATE PHONE     (281)     802-4640     EXTENSION	HD/PM Date Processed			
(IT any) DIRECTOR SAW LEON MUD	Dzie Imaged			
6 OFFICE SOUGHT DIRECTOR SAN LEON MUD				
7 CAMPAIGN TREASURER NAME MRS. MARLENE K. MANCH	AST EUFFIX			
B CAMPAIGN TREASURER STREET ADDRESS (Residence or business) STREET ADDRESS (NO PO BOX PLEASE), APT / SUITE 4: CITY: STATE P.O. BOX 594 KEMAH TEXAS 77565	2P CODE			
S     AREA CODE     PHONE NUMBER     EXTENSION       CAMPAIGN TREASURER PHONE     (832) 451 - 4882				
10       CANDIDATE       I am aware of the Nepotism Law, Chapter 573 of the Texa Signature         I am aware of the Nepotism Law, Chapter 573 of the Texa       I am aware of the Nepotism Law, Chapter 573 of the Texa         I am aware of the Nepotism Law, Chapter 573 of the Texa       I am aware of the Nepotism Law, Chapter 573 of the Texa         I am aware of my responsibility to file timely reports as r       I am aware of my responsibility to file timely reports as r				
I am aware of the restrictions in title 15 of the Election Co from corporations and labor organizations.	the on contributions			
GO TO PAGE 2 (Revised 01/14/2004				

Apr-23-10 11:02am From-PIONEER EXPLORATI	UN,	LIV.	
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Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070

8322491270

T-111 P.003/003 F-843

(512)463-5800 1-800-325-8505

CANDIDATE REPORTING	MODIFIED	FORM CTA
11 CANDIDATE NAME		
12 MODIFIED REPORTING DECLARATION	COMPLETE THIS SECTION ONLY IF YOU ARE CHO REPORTING.	OSING MODIFIED
	<ul> <li>This declaration must be filed no later than the 30th d first election to which the declaration applies</li> </ul>	ay before the 3. ••
	<ul> <li>The modified reporting option is valid for one election (An election cycle includes a primary election, a general election, and any rel</li> </ul>	cycle only. •• ated runoffa.)
	- Candidates for the office of state chair of a political party county chair of a political party may <u>NOT</u> choose modif	and candidates for fied reporting. ••
	I do not intend to accept more than \$500 in political con make more than \$500 in political expenditures (excludin in connection with any future election within the ele I understand that if either one of those limits is exceed required to file pre-election reports and, if necessa report.	g filing fees) ction cycle. led, I will be `
	Year of election(s) or election cycle to Signature of Car which declaration applies	ndidate
This appoint	tment is effective on the date it is filed with the appropriate	e filing authority.

Page: 3/4 Date: 5/4/2010 10:13:36 AM From: unknown

CANDIDAT		FORM C/OH COVER SHEET PG 1
he C/OH Instruction (	uide explains how to complete this form. 1 ACCOUNT # (Ethics Commission Filors)	2 Total pages filed:
CANDIDATE /	M\$/MR\$/MR FIRST MI	OFFICE USE ONLY
OFFICEHOLDER	MR. JOE L NECKNAME LAST SUFFIX MANCHACA	Date Receiver
CANDIDATE / OFFICEHOLDER MAILING ADDRESS	MANCHACA ADDRESS / PO BOX: APT / SUITE #: OITY; STATE; ZIP CODE P.O. BOX 594 KEMPAH TX 77525	Date Hand-dalivered or Date Postmarked
Change of Address	AREA CODE PHONE NUMBER EXTENSION	Racelpt # Amount
CANDIDATE/ OFFICEHOLDER PHONE	(281) 802-4640	Dute Processed
CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MI MRS. MARLENE K NICKNAME LAST SUFFIX	Dete Imaged
	MANCHACA	ZIP CODE
CAMPAIGN TREASURER ADDRESS (Residence or Business)	P.O. BOX 594 KEMAIH TX	77565
CAMPAIGN	AREA CODE PHONE NUMBER EXTENSION	
TREASURER	(832) 651-4882	
REPORTTYPE	January 15 30th day before election Runoff July 15 Sth day before election Exceeded \$500 limit	15ih day after cempelan treasurer appointment (officeholder orly)     Finel report (Attach C/OH - FR)
0 PERIOD COVERED	Month Day Year THROUGH 04/30	Yeer 2010
11 ELECTION	ELECTION DATE     ELECTION TYPE       Month     Day     Year       05/08/2010     Primary     Runoff	General Spedici
12 OFFICE	DIRECTOR, MUD BOARD DIRECTO	ir, mus Boar
14 NOTICE OF DIRECT CAMPAIGN	DIRECT CAMPAION EXPENDITURES ARE CAMPAIGN EXPENDITURES MADE BY OTHERS WITHOUT T CANDEDATES ARE REQUIRED TO DISCLOSE THIS INFORMATION ONLY IF THEY RECEIVE NOTIFIC.	THE CANDIDATE'S PRIOR CONSENT OR APPROV
EXPENDITURE BY OTHER INDIVIDUALS	Nama	
additional pages	Addrees / PO Box; Apt. / Suite \$; City; State; Zip Code	
·		

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From: unknown Page: 4/4 Date: 5/4/2010 10:13:36 AM

	An and a start of the	3 16 ACCC	UNT # (Ethics Commission Filers)
50	EM	ANCITACA	
TROM FROM POLITICAL	The second	CE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLI- HOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDRATE'S DI ES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THE INFORMATION ONLY IF THEY RECE	Corrigeries of the second
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL	COMMITTEE ADDRESS	
additional pages		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
18 CONTRIBUTION TOTALS	1. TOTAL PLEDG	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
×	2. TOTAL (OTHE	POLITICAL CONTRIBUTIONS R THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$
EXPENDITURE TOTALS	3. TOTAL	POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$
		L POLITICAL EXPENDITURES	\$ 29 8.13
CONTRIBUTION BALANCE	5. TOTAL OF RE	POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY PORTING PERIOD	\$
OUTSTANDING LOAN TOTALS	6. TOTAL LAST	PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE DAY OF THE REPORTING PERIOD	\$
I SAL A SAL NIAL	RISTA LINN GUER tary Public, State of My Commission Ex August 20, 201	pires	Antion required to be reported by
AFFIX NOTARY STA	bacribed befor	e me, by the said JOSUPh Lynn Mar	Chaca, this the

Revised 04/21/2010

3

From: unknown Page: 2/4 Date: 5/4/2010 10:13:35 AM

Texas Ethics Commis	sion P.O. Box 12070 Austin, Texas 787	711-2070 (	512) 463-5800	1-800-325-8506
	EXPENDITURES M PERSONAL FUNDS		SC	HEDULE G
Advenising Expanse Accounting/Banking Consulting Expanse Event Expanse Fees	EXPENDITURE CATEGORIES F Gift/Awards/Memoriels Expense Legal Services Solicitation/Fundrais Food/Beverage Expense Travel in District Polling Expense Office Overhead/Re The instruction Guide explains how to c	ntract Labor Le sing Expense Tr Co ict antal Expense O	an Repayment/Reimbu ansportation Equipmen ntributions/Danations I Candidate/Officeholde MER (enter a category	t & Related Expense Made By r/Political Committee
1 Total pages Schedule G:	JOE L MANCHACA		3 ACCOUNT # (EI	hics Commission Filera)
4 Date 4 33 10 5 Amount (\$)	5 Payee name THE SIGN Shop 7 Payee address; City; State; Zip Code			
Armount (3) 130,50 Raimbursement from political contributions intended	306 N. Hwy 3 LEAGE		1.1.1	0.00 <b></b>
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) $PRINTING$	(b) Description (If SLGWS	traval quiside of Texas, com	piete Schödule T)
Amount (\$) Amount (\$) Amount (\$) Amount (\$) Amount (\$)	Payee name SC121 bb/ES Payee address: City; State; ZIp Code JSJS PAUNER TE	HAS CITY	TX 7759	0
PURPOSE OF EXPENDITURE	Category (see categories listed at the top of this schedule) PRINTING	- In the second s	travel outside of Texas, con	
Date 4/24/10	Payee name 123 PRINTS		a -	
Arnount (\$) 26.81 Relmbursement from palitical contributions	Payee address: City; State: Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)		f travel outside of Taxas, con	mplete Schedule T)
Date 4/24/10	Payee name STAPLES	WARAN PROVIDENT		,
Amount (\$) §.82 Reimbursement from political contributions intenced	FM 646 LEAGU	IE City -	TK	
PURPOSE OF EXPENDITURE	Category (300 categories listed at the top of this schedule)	Description (	If travel outside of Texas, co PLS	mpiete Schedule T)
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS N	EEDED	
Manager and the state of the second second		and the second		Reviend 04/21/20

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	E / OFFICEHOLDER I FINANCE REPORT		FORM C/OH COVER SHEET PG 1
The C/OH Instruction G	uide explains how to complete this form.	1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE/	MS/MRS/MR FIRST	MI	OFFICE USE ONLY
OFFICEHOLDER NAME	NICKNAME LAST MANCHACA		Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #: CITY; P.O. BUY 594 K	EMUAH TX. 77565	Date Hand-delivered or Date Postmarked
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER ( )	EXTENSION	Receipt # Amount
6 CAMPAIGN TREASURER NAME	MS (MRSY MR FIRST MARLENE NICKNAME LAST MANCITACI		Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	P.O. BOX 594	and the second	ZIP CODE IEXAS
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (832) 651-4882	EXTENSION	
9 REPORT TYPE	January 15 30th day before election July 15 8th day before election	Runoff Exceeded \$500 limit	15th day after campaign treasurer appointment (officeholder only)     Final report (Attach C/OH - FR)     Year
10 PERIOD COVERED	Month Day Year THROUGH	Month Day	2/2010
11 ELECTION	ELECTION DATE     ELECTION TYPE       Month     Day     Year       05     08     2010   Primary	Runoff	General Special
12 OFFICE	DIRECTOR, MUB BOAN	13 OFFICE SOUGHT (IF KING	
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER	DIRECT CAMPAIGN EXPENDITURES ARE CAMPAIGN EXPENDI CANDIDATES ARE REQUIRED TO DISCLOSE THIS INFORMA Name	TURES MADE BY OTHERS WITHOUT	THE CANDIDATE'S PRIOR CONSENT OR APPROVAL. ATION OF THE DIRECT CAMPAIGN EXPENDITURE.
INDIVIDUALS	Address / PO Box; Apt. / Suite #, City; State; Zip	Code	
	GO TO P/	AGE 2	

Revised 04/21/2010

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CANDIDAT	alternation of the second states of	CEHOLDER REPORT: .S	FORM C/OH COVER SHEET PG 2
15 C/OH NAME	OE MA	NCMACA 16	ACCOUNT # (Ethics Commission Filers)
17 NOTICE FROM POLITICAL COMMITTEE(S)	CANDIDATE / OFFICE	ICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE EN HOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDA ES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THE COMMITTEE NAME	TE'S OR OFFICEHOLDER'S KNOWLEDGE OR
	GENERAL	COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS	
18 CONTRIBUTION TOTALS	1. TOTAL PLEDG	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL (OTHER	POLITICAL CONTRIBUTIONS R THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$
EXPENDITURE TOTALS	3. TOTAL	POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZE	ED \$
	4. TOTAL	POLITICAL EXPENDITURES	\$ : 19.36
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD		
OUTSTANDING LOAN TOTALS	6. TOTAL LAST D	PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF TH DAY OF THE REPORTING PERIOD	e \$
	bscribed before	is true and correct and includes all in me under Title 15 Election Code.	erjury, that the accompanying report formation required to be reported by date or Officeholder , this the y hand and seal of office.
Signature of officer adm	hinistering oath	Printed name of officer administering oath	Title of officer administering oath

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	. EXPENDITURES OM PERSONAL FUNDS	SCHEDULE G
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	EXPENDITURE CATEGORIES FO Gift/Awards/Memorials Expense Salaries/Wages/Contra Legal Services Solicitation/Fundraisin Food/Beverage Expense Travel In District Polling Expense Travel Out Of District Printing Expense Office Overhead/Rent The Instruction Guide explains how to cor	act Labor Loan Repayment/Reimbursement g Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee at Expense OTHER (enter a category not listed above)
1 Total pages Schedule G;	2 FILER NAME JOE MANCHACA	3 ACCOUNT # (Ethics Commission Filers)
4 Date 05~03~2010	5 Payee name HOME DEPOT	
Amount (\$) # • 13.36 Reimbursement from political contributions intended	7 Payee address; City: State: Zip Code 507 MARINA BAY	DR. KEMAN TT, 77565
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE	b) Description (if travel outside of Texas, complete Schedule T)
Date 05-01-2010	Payee name ACE HAREWARE	
Amount (\$) <b># 46.00</b> Reimbursement from political contributions intended	Payee address; City; State: Zip Code 607 GRAND AVE B.	ACLIFF TELAS 77518
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Date	Payee name	
Amount (\$) Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)

Revised 04/21/2010

Apr-23-10	11:02am	From-PIONEER	EXPLORATION, LTD.	8322491270
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T-111 P.002/003 F-843

(512)463-5800 1-800-325-8506

## APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

Texas Ethics Commission P.O. Box 12070

FORM CTA PG 1

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2       CANDIDATE       NSTARSTAR       PRST       MI       OFFICE USE ONLY         NAME       JOHN       Act. #       Act. #       Act. #         3       CANDIDATE       ML       JOHN       Act. #         3       CANDIDATE       Act. #       JE       JE         4       CANDIDATE       Act. #       JE       JE         ADDRESS       POBOX       APT. SUPER       CITY:       STATE, ZIP CODE         4       CANDIDATE       ACA. #       JE       JE         MALLING       ADDRESS       POBOX       APT. SUPER       CITY:       STATE, ZIP CODE         4       CANDIDATE       POBOX       APT. SUPER       DITY:       STATE, ZIP CODE         4       CANDIDATE       POBOX       ITTO       ACA. #       DITY:       DITY:         4       CANDIDATE       POBOX       ITTO       DITY:       STATE, ZIP CODE         4       CANDIDATE       POBOX       ITTO       DITY:       DITY:       DITY:         5       OFFICE HELD       DIRECTOR       STATE, ZED       DITY:       DITY:       DITY:         6       OFFICE SOUGHT       DIRECTOR       STATE, EUFNE       MI.U.D.       LAST
3       CANDIDATE MAILING ADDRESS       P.O. Box 1176 P.O. Box 1176         4       CANDIDATE PHONE       PRO. Box 1176 LCAQUE City, Tx 77574         4       CANDIDATE PHONE       AREA CODE (281) 339       PHONE L288         5       OFFICE HELD (If any)       DIRECTOR DIRECTOR       EXTENSION EXTENSION         6       OFFICE SOUGHT (If known)       DIRECTOR PIRS       BANLEON MINCRNAME       Date Imaged         7       CAMPAIGN TERS MI       MINICRNAME       LAST ELIFEX
CANDIDATE     CANDIDATE       PHONE     (281) 339     6288       Date Processed       Date Processed       Date Imaged       Date Imaged       Date Imaged       Diffice Held       Diffector       Shuleou       Mineter       Diffector       Shuleou       Diffector       Shuleou       Diffector       Shuleou       Diffector       Shuleou       Diffector       Shuleou       Diffector       Diffector       Shuleou       Diffector       Diffector       Shuleou       Diffector
OFFICE HELD     DIRECTOR     SANLEON     M.U.D.       6     OFFICE SOUGHT     DIRECTOR     SANLEON     M.U.D.       7     CAMPAIGN     MSAARSAAR     FIRS)     MI     NICKNAME     LAST     ELIFEX
OFFICE SOUGHT DIRECTOR GRULEON M.U.D. 7 CAMPAIGN TOEASLIDER
B CAMPAIGN TREASURER STREET ADDRESS (Residence or business) STREET STREASURER STREET ADDRESS (Residence or business) STREASURES STREASURER
S CAMPAIGN TREASURER (832) 651-4882
10       CANDIDATE       1 am aware of the Nepotism Law, Chapter 573 of the Texas Government Code.         SIGNATURE       1 am aware of the Nepotism Law, Chapter 573 of the Texas Government Code.         I am aware of my responsibility to file timely reports as required by title: 15 of
the Election Code. I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations. 4-23 - 10 Signature of Candidate Date Signed
GO TO PAGE 2 (Revised 01/14/2) (Revised 01/14/2)

Austin, Texas 78711-2070

Apr-23-10 11:02am From-PIONEER EXPLORATION, LTD.

8322491270

T-111 P.003/003 F-843

Texas Ethics Commission	P.O. Box 12070	Austin, Texas 78711-2070	(512)463-5800	1-800-325-8506
CANDIDATE				FORM CTA
REPORTING	DECLARAT	ION		PG 2
11				
CANDIDATE NAME				
12				
MODIFIED REPORTING DECLARATION	COMPLETE		ILY IF YOU ARE CHOOSING PORTING.	G MODIFIED
	- This dec	laration must be filed first election to which	no later than the 30th day before the declaration applies. 🛥	n: the
		fled reporting option i tion cycle includes a primary elect	S valid for one election cycle of clion, a general election, and any related runoffs	nty. ↔
	Candidates for county chal	the office of state ch r of a political party n	air of a political party and can nay <u>NOT</u> choose modified repo	didates for orting. <del></del>
	make more t in connection l understand	nan \$500 in political e on with any future el that if either one of	n \$500 in political contribution expenditures (excluding filing fe lection within the election cy those limits is exceeded, I wil ports and, if necessary, a ru	ees) rcle. Il be
		ats) or election cycle to clarition applies	Signature of Candidate	
This appoints	nent is effective o	n the date it is filed	with the appropriate filing a	uthority.
Printed on recycled pape	sr			(Revised 01/14/2004)

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	E / OFFICEHOLDER		FORM C/OH COVER SHEET PG 1
The C/OH Instruction	Guide explains how to complete this forn	1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRST	MI	OFFICE USE ONLY
NAME	MR John NICKNAME LAST Kelly		Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #: C P.O.B. & 1176 LEAQUE	ITY: STATE: ZIP CODE 23 TX 72574	Date Hand-delivered or Date Postmarked
	AREA CODE PHONE NUMBER	EXTENSION	Receipt # Amount
5 CANDIDATE/ OFFICEHOLDER PHONE	(281) 339 6288		Date Processed
6 CAMPAIGN TREASURER NAME	NSTMRSMR FIRST MAILIENE NICKNAME LAST MANCHA	SUFFIX	Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	P. D BW 594		ZIP CODE 71565
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (832) (6514852	EXTENSION	
9 REPORTTYPE	January 15 30th day before election	on Runoff	15th day after campaign treasurer appointment (officeholder only)
	July 15 Sth day before election	n Exceeded \$500 limit	Final report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year THRC		nav Year D/10
11 ELECTION	ELECTION DATE     ELECTION T       Month     Day     Year       5     8     10	_	General Special
12 OFFICE	OFFICE HELD (if any)		NUD BORRD
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS	DIRECTOR MUD BOARD DIRECT CAMPAIGN EXPENDITURES ARE CAMPAIGN EXP CANDIDATES ARE REQUIRED TO DISCLOSE THIS INFO Name	PENDITURES MADE BY OTHERS WITHOUT	THE CANDIDATE'S PRIOR CONSENT OR APPROVAL.
additional pages	Address / PO Box; Apt. / Suite #; City; State;	Zip Code	
	GO TO	PAGE 2	

Revised 04/21/2010

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CANDIDAT SUPPORT		CEHOLDER REPORT: S	FORM C/OH COVER SHEET PG 2
15 C/OH NAME	hu A. K	elly JR- 1	6 ACCOUNT # (Ethics Commission Filers)
17 NOTICE FROM POLITICAL COMMITTEE(S)	CANDIDATE / OFFICE	ICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MAD HOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDI ES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF T	DATE'S OR OFFICEHOLDER'S KNOWLEDGE OR
COMMITTEE(C)	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL	COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS	
18 CONTRIBUTION TOTALS	1. TOTAL PLEDGI	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE	1 D \$
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$
EXPENDITURE TOTALS	3. TOTALI	POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMI	zed \$
	4. TOTAL	POLITICAL EXPENDITURES	\$ 293.13
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST E	DAY \$
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T AY OF THE REPORTING PERIOD	THE \$
19 AFFIDAVIT			perjury, that the accompanying report information required to be reported by
	ARLOTTE MORRISON VOTARY PUBLIC State of Texas mm. Exp. 08/09/2013	Signature of Can	didate or Officeholder
AFFIX NOTARY STAN Sworn to and sub			A. ·
(I) (I)	of <u>Man</u>	$\frac{1}{5}$ , 20 <u>10</u> , to certify which, witness r	ny hand and seal of office.
Signature of officer adm	inistering oath	Printed name of officer administering oath	Title of officer administering oath

From: unknown Page: 2/4 Date: 5/4/2010 10:13:35 AM

Texas Ethics Commis	sion P.O. Box 12070 Austin, Texas 78711-2070	(512) 463-5800 1-800-325-8506
	EXPENDITURES M PERSONAL FUNDS	SCHEDULE G
Advertising Expanse Accounting/éanking Consulting Expanse Event Expanse Fees	EXPENDITURE CATEGORIES FOR BOX 4 Gift/Awards/Memorials Expense Legal Services Solicitation/Fundraising Expense Food/Beverage Expense Travel in District Polling Expense Travel Out Of District Printing Expense Office Overhead/Rental Expense The Instruction Guide explains how to complete this	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donetions Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)
1 Total pages Schedule G:	JOAN A. Kelly JR-	3 ACCOUNT # (Ethics Commission Filers)
4 Date 4/3/10 6 Amount (S)	5 Payee name TILE SIGN SHOP 7 Payee address; City: State; Zip Code	
/ 30 SD Raimbursement from political contributions intended		ECAY, TX 71573
8 PURPOSE OF EXPENDITURE		tion (If travel quitelde of Texas, complete Schedule T) $GNS$
H/26/10	SCIUDD LES	
Amount (\$) / 27.0   Reimbursement from political contributions intended	Payee address: City: State; ZIp Code 2525 PALMER TEXAS (	iry Tk 77590
PURPOSE OF EXPENDITURE		- Shinzel outside of Texas, complete Schedule T) - Shinzet S
Date 4/24/10	Payao name 123 Prints	
Arrount (S) Arrount (S) Arrount (S) Reimbursement from palitical contributions intended	Payee address; City; State: Zip Code	
PURPOSE OF EXPENDITURE		ption (If travel outside of Traxes, complete Schedule T)
Date 4/24/10	Payee name STAPLES	
Amount (\$) S.S.J. Reimbursement from political contributions intended	FM LOFLE LEAGUEC	TY TV
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Description of the schedule PRINTING	ption (If travel outside of Toxes, complete Schedule T) $74EPS$
JAARDAN CARACTER STORE	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE	AS NEEDED

Revieed 04/21/2010

(512) 463-5800

1-800-325-8506

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)	2 Total pages filed:
3 CANDIDATE / MS/MRS/MR FIRST MI OFFICEHOLDER MR JOHN MI NICKNAME LAST SUFFIX	OFFICE USE ONLY
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	Date Hand-delivered or Date Postmarked
5 CANDIDATE/ OFFICEHOLDER PHONE     AREA CODE     PHONE NUMBER     EXTENSION       5 OFFICEHOLDER PHONE     (7/3)     598     3404	Receipt # Amount Date Processed
6 CAMPAIGN TREASURER NAME MSYMR FIRST MI MARLENE K NICKNAME LAST SUFFIX	Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business) STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY, STATE; P.O. BOX 594 KEMAH	ZIP CODE
8 CAMPAIGN     AREA CODE     PHONE NUMBER     EXTENSION       TREASURER     (832)     651-4882	0
9       REPORTTYPE       January 15       30th day before election       Runoff         July 15       8th day before election       Exceeded \$500 limit	15th day after campaign treasurer appointment (officeholder only)         Final report (Attach C/OH - FR)
10 PERIOD COVEREDMonth 04/30/2010Day YearYear THROUGHMonth 05/08	y Year 8/2010
11 ELECTION     ELECTION DATE     ELECTION TYPE       Month     Day     Year     Primary       05     08     2010     Primary	General Special
12 OFFICE OFFICE HELD (IF ANY) 13 OFFICE SOUGHT (IF ANY) DIRECTOR, MUB BOARD DIRECT	
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER Name	
INDIVIDUALS Address / PO Box; Apt. / Suite #; City; State; Zip Code	
additional pages	
GO TO PAGE 2	

Texas Ethics Commis	ssion P.O. Bo	x 12070 Austin, Texas 78711-2070	(512) 463-5800 1-	800-325-8506
CANDIDA SUPPORT	TE / OFFI	CEHOLDER REPORT: .S	FOR COVER SHE	m C/OH Eet pg 2
15 C/OH NAME	ohu A.K	lelly JR =	16 ACCOUNT # (Ethics C	commission Filers)
17 NOTICE FROM POLITICAL COMMITTEE(S)	CANDIDATE / OFFICE	ICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES ENOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE O TES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONL	ANDIDATE'S OR OFFICEHOL DEP'S	KNOW FOOF OD
	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
additional pages		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
18 CONTRIBUTION TOTALS	1. TOTAL I PLEDGE	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER TH ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEM	IZED \$	
	2. TOTAL (OTHER	POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	
EXPENDITURE TOTALS	3. TOTAL P	OLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITE	MIZED \$	
	4. TOTAL	POLITICAL EXPENDITURES	\$	
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS DRTING PERIOD	r day \$	
OUTSTANDING LOAN TOTALS	6. TOTAL P LAST DA	RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS O Y OF THE REPORTING PERIOD	THE \$	
My C	RY W. ATKINSON Public, State of Teo ommission Expires April 51, 2014	AVALLES	all information required to be	inying report
AFFIX NOTARY STAMP	cribed before r	ne, by the said <u>John A. Kelly</u>	Jr thi	s the
day	of May	, 20, to certify which, witness	my hand and seal of	office.
Signature of officer admin	WITH Inistering oath	Gary WAtkinson	Notary Public	

Texas Ethics Commis	ssion P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506
	EXPENDITURES SCHEDULE G
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	EXPENDITURE CATEGORIES FOR BOX 8(a)         Gift/Awards/Memorials Expense       Salaries/Wages/Contract Labor       Loan Repayment/Reimbursement         Legal Services       Solicitation/Fundraising Expense       Transportation Equipment & Related Expense         Food/Beverage Expense       Travel In District       Contributions/Donations Made By         Polling Expense       Office Overhead/Rental Expense       OTHER (enter a category not listed above)         The Instruction Guide       explains how to complete this form.
1 Total pages Schedule G:	2 FILER NAME JOE MANCHACA 3 ACCOUNT # (Ethics Commission Filers)
4 Date 05-03-2010	Fayee name HOME DEPOT
6 Amount (\$) # • 13.34 Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 507 MARINA BAY DR. KEMAH T7, 77565
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE
Date 05-01-2010	Payee name ACE HAREWARE
Amount (\$)	Payee address; City; State; Zip Code 607 GRAND AVE BACLIFF TEXAS 77518
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)
Date	Payee name
Amount (\$)	Payee address; City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)
Date	Payee name
Amount (\$) Reimbursement from political contributions intended	Payee address; City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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Revised 04/21/2010

Austin, Texas 78711-2070

8322491270

T-111 P.002/003 F-843

#### (512)463-5800 1-800-325-8505

# Apr-23-10 11:02am From-PIONEER EXPLORATION, LTD. Texas Ethics Commission POP **APPOINTMENT OF A CAMPAIGN** TREASURER BY A CANDIDATE

FORM CTA

PG 1

See CTA Instruction	Guide for detailed instructions.	1 Total pages fileo:
2 CANDIDATE NAME	MS/MRS/MR FIRST MI MR TYSUNI B NICKNAME LAST SUFFIX	OFFICE LISE ONLY Acct. # Date: Received
3 CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX: APT. SUITE #; CITY; STATE ZIP CODE 1505 JOW ST SAN LEON, TX 77539	
4 CANDIDATE PHONE	AREA CODE         PHOLE NUMBER         EXTENSION           (832)         451 - 7316	ND/PM Date Processed
	DIRECTOR SAN LEON MUD	Date imaged
6 OFFICE SOUGHT (If known)	DIRECTOR SAN LEO MUD	
7 CAMPAIGN TREASURER NAME	MEANRESAND FIRST MI NICHVAME MRS. MARLETJE MANCHABY STREET ADDRESS (NO PO BOX PLEASE): APT/SUITE 4; CITY; STATE	
B CAMPAIGN TREASURER STREET ADDRESS (Residence or business	P.O. BOX 594 KEMAH TEXAS	21P CODE
3 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (832) 651-4882	
10 CANDIDATE SIGNATURE	I am aware of the Nepotism Law, Chapter 573 of the Tex I am aware of my responsibility to file timely reports as the Election Code. I am aware of the restrictions in title 15 of the Election C from corporations and labor organizations.	required by title: 15 of
	GO TO PAGE 2	

Printed on recycled paper

(Revises 01/14/2004)

Apr-23-10 11:02am From-PIONEER EXPLORA	ATION,	LTD.
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8322491270 T-111 P.003/003 F-843

Texas Ethics Commission	P.O. Box 12070	Austin, Texas 78711-2070	(512)463-5800	1-800-325-8506
CANDIDATE	MODIFIED			FORM CTA
REPORTING	DECLARAT	ON		PG 2
11				
CANDIDATE NAME				
12 MODIFIED REPORTING DECLARATION	COMPLETE	THIS SECTION ONLY IF REPOR		
	- This dec	laration must be filed no lat first election to which the d		n: the
		ried reporting option is vali- tion cycle includes a primary election, a g		
		the office of state chair of of a political party may <u>N</u>		
	make more in connecti I understan	nd to accept more than \$50 than \$500 in political expen on with any future electio d that if either one of those file pre-election reports	ditures (excluding filing f n within the election cy e limits is exceeded, I wi	ees) vole. Il be
		n(s) (x election cycle to extention applies	Signature of Candidate	
This appoint	ment is effective	on the date it is filed with	the appropriate filing a	uthority.
Printed on recycled pa	iper			(Revised 01/14/2004)

#### 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 # (Effice Construction Filers)	2 Total pages filed
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST /9 R 77/50XL NICKNAME LAST	MI PS BUFFIX	OFFICE USE ONLY
	KENNESY		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS (POBOX, APT/SUITE * CITY, 1505 JOHN ST SAND	eon TX 77539	Date Hand-delivered or Date Posimarked
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (832) 451-7316	EXTENSION	Receipt # Amount Date Processed
5 CAMPAIGN TREASURER NAME	NE LORS DAR FIRST MHLLENE NOCKNAME LAST I VIANCHACT	SLIPPIX	Quie Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence of Business)	P.D. BIX 594	DITY STATE	2000E 77525
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (832-) 651 4582	EXTENSION	
9 REPORT TYPE	January 15 30th day before election	Runoff Exceeded \$500 limit	Ióth day after samplingn treasurer appointment (officeholder only)     Final report (Attach C/DH - FR)
10 PERIOD COVERED	Month Day Year 3 /29 /10 THROUGH	Month Day 4/30	Yee 10
11 ELECTION	North Day Year ELECTION TYPE	Runoff	Generat Space
12 OFFICE	OFFICE HELD (8 any) D) RECTOR	13 OFFICE SOLIGHT (IKNOW	
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS	DRECT CAMPAIGN EXPENDITURES ARE CAMPAIGN EXPENDIT CANDIDATES ARE REQUIRED TO DISCLOSE THIS INFORMAT Name		
additionel pages	Artdrake / PO Box: Ant / State & City: State, Zip C	ode	
	GO TO PA	GE 2	

Texas Ethics Commission P.O. Box 12070

Austin, Texas 78711-2070

(512) 463-5800

1-800-325-8506

### CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

#### FORM C/OH COVER SHEET PG 2

15 C/OH NAME			16 A	CCOUNT # (Ethics Commission Filers)	
FROM POLITICAL	CANTHOATH / OFFICE	HOLDER. THESE EXPENDITURES MAY NA	ED OR POLITICAL EXPENDITURES MADE BY IVE BEEN MADE WITHOUT THE CANDIDATE OREPORT THIS INFORMATION ONLY IF THEY I	Political committees to support the 's or officeholder's knowledge or Receive notice of such expenditures.	
COMMITTEE(S)	COMMITTEE TYPE			4	
	GENERAL	COMMITTEE ADORESS COMMITTEE CAMPAIGN TREASURER NAME			
additional pages	COMMITTEE CAMPAIGN TREASURER ADDRESS				
18 CONTRIBUTION TOTALS	1 TOTAL PLEOG	POLITICAL CONTRIBUTIONS OF ES, LOANS, OR GUARANTEES (	50 OR LESS (OTHER THAN DF LOANS), UNLESS ITEMIZED	\$	
	2. TOTAL (CTHÉ	\$			
EXPENDITURE TOTALS	3 TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED			\$	
	4, TOTA	POLITICAL EXPENDITURE	\$ 293.13		
CONTRIBUTION BALANCE	5 TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD			<del>6</del> 9	
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OU DAY OF THE REPORTING PERIO	TSTANDING LOANS AS OF THE	\$	
19 AFFIDAVIT	1	is Inij	e and correct and includes all info inder Title 15, Election Coda	rjury, that the accompanying report ormation required to be reported by	
			Signature of Candids	ete ar Officeholder	
AFFIX NOTARY STAL Sworn to and sub		me, by the said		, this the	
			certify which, witness my		

Signature of officer administering dath

Printed name of officer administering oath

Title of officer administering oath

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Texas Ethics Commis	sion P.O. Box 12070	Austin, Texas	78711-2070	(512) 483-5800	1-800-325-8508
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Advertising Expanse Appounting/Banking Consulting Expanse Event Expanse Fees	EXPENDITU Cit/Awards/Nemorists Expense Legs: Services Road/Beverage Expense Poling Expense Printing Expense The Instruction Gu	Satarias/Wege Soficitation/Fo Travel in Dist Travel Out Of Office Overhe	District ad/Rental Expanse	Loan Repayment/Raimb Transportation Equiprior Contributions/Bonations Candidate/Officehold OTHER (entar a categor	nt & Reistad Expense Mede By er/Politics: Communies
1 Total pages Schedue G:	2 FILER NAME			3 ACCOLINT # (E	thics Commission Filers)
4 Domo / A3/10	THE SIGN	Stop			
6 Armount (S) / 30.50 Patroburgement from petitized contributions relanced	7 Payee address: City: 30.6 N Hu			City TX ?	7573
8 PURPOSE OF EXPENDITURE	(a) Cistergory (See categories listed at 2) PRINTING	s lóp ór this achedula)		$\mathcal{M}$ . Alternation of the second s	nowie Šchedule T)
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	ATTACH ADDITIONA	L COPIES OF T	HIS SCHEDULE A	S NEEDED	

Revenue 04/01/2010

#### APPLICATION FOR PLACE ON BALLOT

I, <u>ULTE</u> <u>HALL</u>, do hereby make application for a place on the ballot of the election to Directors of SAN LEON MUNICIPAL UTILITY DISTRICT. Pursuant to Election Code 141.031, I do hereby swear to the following facts:

My name is: JULTE HALC My occupation is: BETTRED INSURANCE AGENCY. T DECRETPHY (full term). Office sought: 4532579N

I am a citizen of the United States of America.

I have not been determined mentally incompetent by a final judgment of any court.

I have not been finally convicted of a felony from which I have not been pardoned or otherwise released from the resulting disabilities.

My date of birth is:
My residence address is: 114 5TH ST SANKEON TX. 71539
My mailing address is: Same as about
I have lived in the State of Texas for $\frac{36}{44}$ years and in the SAN LEON MUNICIPAL UTILITY DISTRICT for $\frac{44}{44}$ years.
I, <u>JULTE HALC</u> , of Galveston County, Texas, being a candidate for the office of Board of Directors of the San Leon Municipal Utility District, swear that I will support and defend the constitution and laws of the United States and of the State of Texas.

I am aware of the nepotism law, Articles 5996(a) through 5996(g) of the Revised Civil Statutes of the State of Texas.

I am a resident of the SAN LEON MUNICIPAL UTILITY DISTRICT.

I own land in said District subject to taxation, and I am 21 years of age or over.

Julii Stall

THE STATE OF TEXAS

COUNTY OF GALVESTON

SUBSCRIBED AND SWORN TO before me on this the <u>3RD</u> day of <u>Jebnuary</u>, 2012

Notary Public, State of Texas



#### APPLICATION FOR PLACE ON BALLOT

I, <u>KENNETH BESHOP</u>, do hereby make application for a place on the ballot of the election to Directors of SAN LEON MUNICIPAL UTILITY DISTRICT. Pursuant to Election Code 141.031, I do hereby swear to the following facts:

My name is: KEWNETH BISHUP.

My occupation is: MECHANIC .

Office sought: BOARD OF DIRECTOR (full term).

I am a citizen of the United States of America. Yes

I have not been determined mentally incompetent by a final judgment of any court. No

I have not been finally convicted of a felony from which I have not been pardoned or otherwise released from the resulting disabilities. NO

Mv	date	of	birth	is'
TATA	unic	UL	onui	10.

My residence address is:	2	251	AVED	D SAW	LEON	Tx	77539
My mailing address is:	20	Box	862	BACLI	FFTX	ר'	1513

I have lived in the State of Texas for  $\frac{4}{2}$  years and in the SAN LEON MUNICIPAL UTILITY DISTRICT for  $\frac{1}{2}$  years.

I, <u>*KEWNEHH BISHOF*</u>, of Galveston County, Texas, being a candidate for the office of Board of Directors of the San Leon Municipal Utility District, swear that I will support and defend the constitution and laws of the United States and of the State of Texas.

I am aware of the nepotism law, Articles 5996(a) through 5996(g) of the Revised Civil Statutes of the State of Texas.

I am a resident of the SAN LEON MUNICIPAL UTILITY DISTRICT.

I own land in said District subject to taxation, and I am 21 years of age or over.

Jere Kom

THE STATE OF TEXAS

COUNTY OF GALVESTON

SUBSCRIBED AND SWORN TO before me on this the 18th day of

otary Public, State of Texas

