# City of El Lago

411 Tallowood Drive El Lago, Texas 77586 Tel 281-326-1951 Fax 281-326-2134 www.ellago-tx.gov

March 8, 2018

Scott C. Greenlee 303 Shadow Creek Dr. El Lago, TX 77586

RE: Public Information Act Request sent on 2/28/2018

Dear Mr. Greenlee,

Your Public Information Act (PIA) request was received on February 28, 2018 by City Hall. This memo shall serve as notice that the following request is complete:

1. The campaign finance reporting forms submitted by ALL candidates for the 2017 El Lago city elections.

You have requested a waiver for the fees to provide this information, and your request for a waiver has been approved. Feel free to call me at 281-326-1951 ext 111 or email me at <a href="mailto:citysec@ellago-tx.gov">citysec@ellago-tx.gov</a> if you have any further questions.

Best regards,

William A. Grigsby

City Secretary



Offices in Houston | Dallas | San Antonio 800.925.7216

February 28, 2018

William Grigsby, City Secretary City of El Lago 411 Tallwood Dr. El Lago, Texas 77586 Via facsimile 281-326-2134 and email: citysec@ellago-tx.gov

RE: FOIA request

Dear Mr. Grigsby:

Pursuant to 5 U.S.C.A. § 552, the Freedom of Information Act (FOIA), I hereby request the following materials and request that they be saved in original form and in their entirety. The requested materials are:

> The campaign finance reporting forms submitted by ALL candidates for the 2017 El Lago city elections.

The Texas Public Information Act requires that you "promptly produce" the requested records unless, within 10 days, you have sought an Attorney General's Opinion. If you expect a significant delay in responding to this request, please contact me with information about when I might expect copies or the ability to inspect the requested records.

If you deny any or all of this request, please cite each specific exemption you feel justifies the refusal to release the information. If you have any questions or comments, please feel free to give me a call. Received

Sincerely,

Scott C. Greenlee

Scott Greenlee

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS (MRS / MR FIRST	MI	OFFICE USE ONLY
	NICKNAME LAST	SUFFIX	Date Received
	VERNON	)	11/08/11
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDOCCC LOC BOLL	CITY; STATE; ZIP CODE	9/10/1
Change of Address	EL LAGO, TX	77586	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (Z81) 615-083	EXTENSION	Sate Hand elivered of Date Postmarked
6 CAMPAIGN	MS / MRS / MR FIRST	MI	Peceipt # Amount S
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	NICKNAME LAST	SUFFIX	Date Imaged
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE): APT / SUI	TE#; CITY: STATE	
TREASURER ADDRESS	1807 RAINTREC		ZIP CODE (+0 TV 77586
(Residence or Business)		,	00, 17
8 CAMPAIGN TREASURER PHONE	(781) 214-348	EXTENSION 4	
9 REPORT TYPE	January 15 30th day before elec	oction Runot!	15th day after campaign
	July 15 Sth day before election	Section 2	treasurer appointment (Officeholder Only) Final Report (Attach COH - FR)
10 PERIOD COVERED	Month Day Year	Month	Day Year
	4/7/2017	THROUGH 4	28/2017
11 ELECTION	ELECTION DATE	ELECTION TYPE	
	Month Day Year Primary  5 6 2017 General	Runoff Other Description  Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	
	NIA	MAYE	OR
	GO TO P	AGE 2	

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

14 C/OH NAME	NN VE	enon 1	5 Filer ID (Ethics Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S)	SOFFORT THE CAME	OTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDIT IDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WI MSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS JRES.	THOUT THE CANDIDATE'S OF ASSICENDI DED'S
	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL		
	SPECIFIC	COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
Additional Pages		THE SAME THE SAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION TOTALS	1. TOTAL F PLEDGE	OLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THA S. LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE	N ED \$
	2. TOTAL	POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$
EXPENDITURE TOTALS	3. TOTAL P UNLESS	OLITICAL EXPENDITURES OF \$100 OR LESS. ITEMIZED	\$
	4. TOTAL	POLITICAL EXPENDITURES	\$ 33.57
CONTRIBUTION BALANCE	5. TOTAL P	OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DRITING PERIOD	DAY \$
OUTSTANDING LOAN TOTALS	6. TOTAL P LAST DA	RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF TH Y OF THE REPORTING PERIOD	HE \$
18 AFFIDAVIT			
No My	NNIE LYNN KUBRICHT tary ID #131017184 Commission Expires ebruary 23, 2021	I swear, or affirm, under penalty of pe true and correct and includes all infor under Fille 15, Election Code.  Signature of Candi	rijury, that the accompanying report is mation required to be reported by me
AFFIX NOTARY STAMP	SEALABOVE		
Sworn to and subscri	17	the said Ann Winner of certify which, witness my hand and seal of office.	this the
Signature of officer ad	ministering oath	Teannie Kubricht Printed name of officer administering oath	Party voting Clerk Title of officer administering oath

## SUBTOTALS - C/OH

19	19 FILER NAME 20 Filer ID (Ethics Co					
	ANN VERNON N/A					
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT			
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$			
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$			
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$			
4.	SCHEDULE E: LOANS	\$				
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	\$				
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$				
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	CONTRIBUTIONS	\$			
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	and the second s	\$			
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FU	INDS	\$ 33,57			
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO	A BUSINESS OF C/OH	\$			
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL C	ONTRIBUTIONS	\$			
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBURED TO FILER	TIONS	\$			
-						

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

#### SCHEDULE G

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

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

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

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

1,	Candidate/Officeholder/Politi Credit Card Payment	ical Committee	Legal Services	Salaries	:/Wages/Contract Labor	Travel Out Of Distri Other (enter a cate;	
L	Asset Omer dynam		The Instruction Guide explai	ins how to	complete this form.		
1	Total pages Schedule G:	Λ	IN VERNON	n de la desta de la dela dela dela dela dela dela de		3 Filer ID (Ethic	s Commission Filers)
4	Date	5 Payee nar			A CONTROL OF THE PROPERTY OF T	NIT	
	4/21/2017	1 .	ICE DEPOT				
6	Amount (\$) 33.57	7 Payee add	dress; City; State; Zi	ip Code W Y		vide framing and selections of the description and distributions and all all and selections are all and selections and all all and selections are all all all all all all all all all al	
	Reimbursement from political contributions intended	Ho	USTON, TX 7	705	58		
8	PURPOSE	(a) Category	(See Categories listed at the top of this so	chedule)	(b) Description		ettern den den den den den den den sept unt erus ett den
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9	Complete ONLY if direct expenditure to benefit C/O		ate / Officeholder name		Office sought	in hinde die vergeben volgen der erweitlich volge der ein den verbeiten der werden de seine zu vergeben von	Office held
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	Date	Payee nan	ne.		en e		
	Amount (\$)	Payee add	fress; City; State; Zi	p Code			occininas esta esta esta esta esta esta esta es
	Reimbursement from political contributions						
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-	Amount (\$)	Payee add	lress: City; State; Zip	p Code		and the straight of the state of the straight of the state of the stat	
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launced	Reimbursement from political contributions intended						
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and the state of the state of					L Check if Austin, TX,	officeholder living expr	ense
	Complete ONLY if direct expenditure to benefit C/O		ate / Officeholder name		Office sought		Office held
Market market market		ATTA	CH ADDITIONAL COPIES OF	F THIS S	CHEDULE AS NEEDE		

# CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

	The Instruction Guide explains how to complete this form.  Complete only if "Report Type" on page 1 is marked "Final Report" ••						
1	C/OH N	ANN VERNON  2 Filer ID (Ethics Commission Filers)	Antonio				
3	SIGNA	ATURE I NIA					
and the second	l do not ing a re contribu	expect any further political contributions or political expenditures in connection with my candidacy. I understand that designat- port as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign utions or make any campaign expenditures without a campaign treasurer appointment on file.  Signature of Candidate / Officeholder					
4		WHO IS NOT AN OFFICEHOLDER uplete A & B below only if you are not an officeholder	HAMMAN				
	A.	CAMPAIGN FUNDS					
	Check	k only one:					
	The second	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 may not convert unexpended political 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 and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. 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.	1				
	B.	ASSETS					
	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.					
-		Signature of Candidate					
•		HOLDER  plete 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 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					

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

The C/OH Instruction (	Guide explains how to complete this form.	1 Filer ID (Ethecs Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST MRS ANN	MI	OFFICE USE ONLY
	NICKNAME LAST VERNON	SUFFIX	Date Received 4 6 17
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #: CI		SV 1.45pm
Change of Address	EL LAGO, TX 1758	36	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER  (Z81) 615-083	EXTENSION Z	Date Hand/delivered or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST  YVR JON  NICKNAME LAST	MI //\	Receipt # Amount S  Date Processed
	VERNON		Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUI 1807 RAINTIZEE CI ELL LAGO, TY 775	IRCLE	ZIP CODE
8 CAMPAIGN TREASURER PHONE	1281) 216-3484	EXTENSION	
9 REPORT TYPE	July 15 30th day before elect	Section 1	15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C OH - FR)
10 PERIOD COVERED	Month Day Year Z / 17 / 2017	THROUGH 4	Day Year 6 / 70 17
11 ELECTION	Month Day Year Primary  O5 / O6 / 17 Seneral	Runoff Other Description  Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)  MAYOR	
	GO ТО Р	PAGE 2	

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

14 C/OH NAME			
14 C/OH NAME	ANN V	ERNON	15 Filer ID (Ethics Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S)	The Child	IOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDI DIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE W INSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT TH URES.	STHOUT THE CAMPINATE'S OF STREET
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Additional Pages			
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17 CONTRIBUTION TOTALS	1. TOTAL F PLEDGE	OLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THA S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ	AN \$
	2. TOTAL (OTHER	POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$
EXPENDITURE TOTALS	3. TOTAL P UNLESS	OLITICAL EXPENDITURES OF \$100 OR LESS, ITEMIZED	\$
	4. TOTAL I	POLITICAL EXPENDITURES	\$ 1,227.50
CONTRIBUTION BALANCE	5. TOTAL P OF REPO	OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DRTING PERIOD	
OUTSTANDING LOAN TOTALS	6. TOTAL P LAST DA	RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T Y OF THE REPORTING PERIOD	HE \$
18 AFFIDAVIT	erheimenstelle in des einsgehoste Kanalin vertreite deutschaft von Beweite die vertreite der des ein		
Nota My C	NIE LYNN KUBRICHT Iry ID #131017184 ommission Expires bruary 23, 2021	true and correct and includes all info	erjury, that the accompanying report is rmation required to be reported by me ideate or Officeholder
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day-of Ancil	11	Commence of the second	. this the
- Carpenty	7/1/1	o certify which, witness my hand and seal of office.	
	X	Jeannie Kubricht	city cherk
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of officer administering oath

# SUBTOTALS - C/OH

19	FILER NAME	
1.0		mmission Filers)
**************************************	ANN VERNON	
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 325,00
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 602 014
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$300.36
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# **UNPAID INCURRED OBLIGATIONS**

### SCHEDULE F2

## **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

Event Expense Fees Food/Beverage Expense Gill/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

Candidate/Officeholder/Politic		Salaries/Wages	Contract Labor	Travel Out Of District Other (enter a category not listed above)
	The Instruction Guide e	xplains how to compi	ete this form.	
1 Total pages Schedule F2:	AUN VERNON		ende mentifere mende de secreta proprieta de constitución es constitución de constitución de constitución de c O constitución de constitución	3 Filer ID (Ethics Commission Filers)
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5 Date	6 Payee name	>	and the second s	
7 Amount (\$)	MINUTEMAN T 8 Payee address; City: St	RESS ate: Zip Code	de de l'antitude de l'antique de la compa de des companys de la company de la company de la company de la comp	
325.00	1040 HERCULE			
	HOUSTON, TX			
9 TYPE OF EXPENDITURE	Political	Non-Political		
10	(a) Category (See Categories listed at the to	p of this schedule)	(b) Description	
PURPOSE			Check if t	ravel outside of Texas. Complete Schedule T.
EXPENDITURE	GIFTS PRINTIN	G	Check if	Austin, TX, officeholder living expense
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name		sought	Office held
	ANN VERNON	N	LAYOR	NA
Date	Payee name	n de de la company de la compa		
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TYPE OF EXPENDITURE	Political	Non-Political		
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PURPOSE OF		and distribution of the state o	Lorenza	avel outside of Texas, Complete Schedule T.
EXPENDITURE		The state of the s	L]Check if	Austin, TX. officeholder living expense
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	ATTACH ADDITIONAL COPIE	S OF THIS SCHE	DULE AS NEE	DED

# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Paytotal

Solicitation/Fundraising Expense

Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Politic		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Expense Printing Expens Salaries/Wages	e	Transportation Equipment & Related Expensi Travel In District Travel Out Of District Other (enter a category not listed above)
		The Instruction Guide expli	ins how to comp	lete this form.	
1 Total pages Schedule F4:	2 FILER	NAME ANN VERA	JON	eff år ermakte av ar elder til det av av elde stade en av elde som elde stade og av på ette stade	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEM	IZED EXP	ENDITURES CHARGE	DTOACRED	ITCARD	\$ 602014
5 Date 3/17/2017	6 Payee	HAM DEPOT			
7 Amount (\$)	8 Payee	address; City: State 3 COLONIAL	Zip Code		
#270.00		LANDO, FL 32			
9 TYPE OF EXPENDITURE	× i	Political	Non-Politica	ercommontates any sign of the "Agreement accommence or allowed company and consequent	
10	(a) Catego	ry (See Categories listed at the top of	this schedule)	(b) Descriptio	n
PURPOSE				Check if	travel outside of Texas. Complete Schedule T.
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11 Complete ONLY if direct expenditure to benefit C/ON	Can	didate / Officeholder name	Office	sought	Office held
experiumble to benefit C/Or		N VERNON	Μ	AYOR	NA
Date	Payee	name			
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Amount (\$)		address: City; State:	Zip Code		
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TYPE OF EXPENDITURE	⊠ F	olitical	Non-Politica		
	Catego	ry (See Categories listed at the top of	his schedule)	Descriptio	
PURPOSE OF			_	Check if t	ravel outside of Texas. Complete Schedule T.
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Complete ONLY if direct	Cano	didate / Officeholder name	Office	sought	Office held
expenditure to benefit C/OH	Ar	IN VERNON	N	LAYDR	NA
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# EXPENDITURES MADE BY CREDIT CARD

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense **Event Expense** Loan Repayment/Reimbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Accounting/Banking Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Office Overhead/Rental Expense Consulting Expense Contributions/Donations Made By Polling Expense **Printing Expense** Candidate/Officeholder/Political Committee Travel Out Of District **Legal Services** Salaries/Wages/Contract Labor Other (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F4: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ SER PA 1 6 Payee name 3/25/2017 GODADDY 8 Payee address: City: State: Zip Code 14455 N HAYDEN RD , STE ZZ6 SCOTTSDAZ, AZ 85260-6993 TYPE OF Political EXPENDITURE Non-Political 10 (a) Category (See Categories listed at the top of this schedule) (b) Description PURPOSE Check if travel outside of Texas. Complete Schedule T. ADVERTIGING (DOMAIN) EXPENDITURE Check if Austin, TX, officeholder living expense 11 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH ANN VERNON MAYOR Date Payee name 3/30/2017 IMPRINT Payee address: City: State; Zip Code #216.97 14550 BEECHNUT STREET HOUSTON, TX 77083 TYPE OF EXPENDITURE Political Non-Political Category (See Categories listed at the top of this schedule) Description PURPOSE Check it travel outside of Texas. Complete Schedule T. OF GIPTS Check if Austin, TX. officeholder fiving expense EXPENDITURE Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH ANN VERNON MAYOR NIA ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

#### SCHEDULE G

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

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

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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

The Instruction Guide explains how to complete this form. Total pages Schedule G: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 4 Date 5 Payee name 3/8/2017 FEDEX OFFICE
7 Payee address; City: State; Zip Code 6 Amount (\$) 495 BAY AREA BLYD 155.36 Reimbursement from HOUSTON, TX 77058-2639 political contributions intended 8 (a) Category (See Categories listed at the top of this schedule) (b) Description PURPOSE Check if travel outside of Texas. Complete Schedule T. OF PRINTING EXPENSE EXPENDITURE Check if Austin, TX, officeholder tiving expense Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH ANN VERNON MAYOR Date LA VENTANA DELLAGO
Payee address; City: State; Zip Code 3/16/2017 Amount (\$) 302 PINEVIEW CIRCLE 145.00 Reimbursement from political contributions GLLAGO, TX 77586 Category (See Categories listed at the top of this schedule) (b) Description PURPOSE Check if travel outside of Texas. Complete Schedule T. OF ADVERTISING EXPENSE EXPENDITURE \_\_ Check if Austin, TX, officeholder living expense Complete ONLY if direct Office held expenditure to benefit C/OH MAYOR VERNON Date Payee name City: State; Zip Code Amount (\$) Payee address: Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) (b) Description PURPOSE Check it travel outside of Texas. Complete Schedule T. OF EXPENDITURE Check if Austin, TX, officeholder fiving expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

			The state of the s
The C/OH Instruction	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST	MI M	OFFICE USE ONLY
	NICKNAME LAST	SUFFIX	Date Received
	BP1665		4/18/17
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS PO BOX: APT SUITE #: C	SITY: STATE: ZIP CODE	7/10/
Change of Address	EL LAGO, TX	77586	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (281) 704 ST	EXTENSION	Date Hand-pelivered or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST	MI M	Receipt # Amount S
	NICKNAME LAST	SUFFIX	Date Imaged
~ ~ ^ & & & & & & & & & & & & & & & & &	BRIGAS		Date mageu
7 CAMPAIGN TREASURER ADDRESS	303 CEDAL LA	THE #; CITY: STATE;	ZIP CODE
(Residence or Business)	EL LAGO, TX	7758 6	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER ( 281 ) 704 - 557	EXTENSION	
9 REPORT TYPE	January 15 30th day before ele	ection Runoff	15th day after campaign treasurer appointment (Officeholder Only)
	July 15 8th day before elect	tion Exceeded \$500 limit	Final Report (Attach C OH - FR)
10 PERIOD COVERED	Month Day Year 3 / 17 / 17	THROUGH	Day Year
11 ELECTION	ELECTION DATE	ELECTION TYPE	
1	Month Day Year Primary  5 6 17 General	Runoff Other Description Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	
	Council - Poss	MAYOR	-
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# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

14 C/OH NAME	MARK	BRICAS		15 Filer ID (	Ethics Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S)	SUPPORT THE CANE	DIDATE / OFFICEHOLDER. THE: DNSENT. CANDIDATES AND OFF	IBUTIONS ACCEPTED OR POLITICAL EXPENESE EXPENDITURES MAY HAVE BEEN MADE FICEHOLDERS ARE REQUIRED TO REPORT	WITHOUT THE CAL	NDIDATE'S OR OFFICEHOLDED'S
	COMMITTEE TYPE	COMMITTEE NAME	, in constitutions of the constitution of the		
	GENERAL				
	SPECIFIC	COMMITTEE ADDRESS		Provide de case a cincida y a plinota casidada a como cidar as e a agreci	under erotring, erote gegebe verschaft der Verschaften in Artiste erweit erhöhelte gegeben von
		COMMITTEE CAMPAIGN T	TREACHRED NAME		
Additional Pages		Visiting and State of the State	HEADUREN NAME		
		COMMITTEE CAMPAIGN	TREASURER ADDRESS		
	-				
17 CONTRIBUTION TOTALS	1. TOTAL P PLEDGE	OLITICAL CONTRIBUTIONS, LOANS, OR GUARAN	IONS OF \$50 OR LESS (OTHER TI NTEES OF LOANS), UNLESS ITEM	HAN S	0
		POLITICAL CONTRIBUTION PLEDGES, LOANS	UTIONS NS, OR GUARANTEES OF LOANS)	\$	0
EXPENDITURE TOTALS	3. TOTAL P	POLITICAL EXPENDITUR S ITEMIZED	RES OF \$100 OR LESS,	\$	0
	4. TOTAL I	POLITICAL EXPENDIT	rures	\$	571.00
CONTRIBUTION BALANCE	5. TOTAL P	POLITICAL CONTRIBUTION ORTING PERIOD	ONS MAINTAINED AS OF THE LAS	ST DAY \$	0
OUTSTANDING LOAN TOTALS	6. TOTAL P LAST DA	PRINCIPAL AMOUNT OF A AY OF THE REPORTING	ALL OUTSTANDING LOANS AS OF PERIOD	THE \$	0
18 AFFIDAVIT				management of the property of the second	
		=	I swear, or affirm, under penalty of true and correct and includes all in under Title 15, Election Code.	f perjury, that the nformation requ	e accompanying report is ired to be reported by me
Notary Po My Cor	NDA E HASCHKE ublic, State of Texas mmission Expires	,	back ho.	Brit	
	ine 20, 2018		Signature of Ca	andidate or Off	liceholder
AFFIX NOTARY STAME	P/SEALABOVE				2. 4.
Sworn to and subscr	10		ork MBrisss	COLUMN TO A COLUMN TO SERVICE	s the 18th
Malanda SI	1000	o certify which, witne	ess my hand and seal of office	Э.	
/ les mère 14	TWITTE	1/1/6/11	144 LINGSCINKE	enteriority on the transfer to the silent of the silent or the silent or the silent or the silent or the silent	
Signature of officer ac	dministering oath	Printed name of	officer administering oath	Title of c	officer administering oath

# SUBTOTALS - C/OH

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19	FILERN	ILER NAME  20 Filer ID (Ethics Commission Filers)		sion Filers)	
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE				SUBTOTAL
1.		SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS			
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS			
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS			
4.		SCHEDULE E: LOANS			atti omanaturus, risurenti serimi keta kasaruntukki kurdin yakun keraji - kanp ya masaki ketang
5.		SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS			and the second s
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS			et egisteri isida savi heralden Ari A.A. et et ett - A.A. et et ett - A.A. et ett ett - A.A. et ett ett - A.A.
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS			onnu data due recipión de side de frence de mensión mensión de se se successiva de se
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD			арадышта Адабея (до обложно почено обложно предоставления до од невое феодуации иза
9.	×	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$	571.00
10.		SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$	national met missione design va and order it in comments are also destinents designing addis, solding
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	ONTRIBUTIONS	\$	ente esta de la composition de la conferencia de la conferencia de la conferencia de la conferencia de la conf
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER			\$	and the second seco

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

### SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Gandidate/Officeholder/Polit Credit Card Payment	Fees Office ( Food/Beverage Expense Polling e By Gift/Awards/Memorials Expense Printin,	Repayment/Reimbursement Overhead/Rental Expense g Expense g Expense es/Wages/Contract Labor to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)				
1 Total pages Schedule G:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)				
	MARK BRIGAS Filer ID (Ethics Commission Filers						
4 Date 4/17/17	1 MARK BRIGHS  5 Payee name PECITICAL SIGNS TO YOU						
6 Amount (\$)  Reimbursement from political contributions intended	7 Payee address: City: State: Zip Code						
8 PURPOSE OF EXPENDITURE	PURPOSE  OF  Check if travel outside of Texas. Complete Schedule T.						
9 Complete ONLY if direct expenditure to benefit C/4		Office sought	Office held				
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)	(b) Description  Check it travel outside of Texas. Complete Schedule T.					
			officeholder living expense				
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH	Office sought	Office held				
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)	(b) Description  Check if travel outside of Texas Complete Schedule T.  Check if Austin, TX, officeholder living expense					
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name OH	Office sought	Office held				
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED							

FORM CTA PG 2

11 CANDIDATE NAME

P.O. Box 12070

12 MODIFIED REPORTING DECLARATION

### COMPLETE THIS SECTION ONLY IF YOU ARE CHOOSING MODIFIED REPORTING

- .. This declaration must be filed no later than the 30th day before the first election to which the declaration applies. ••
- \*\* The modified reporting option is valid for one election cycle only. \*\* (An election cycle includes a primary election, a general election, and any related runoffs.)
  - · Candidates for the office of state chair of a political party may NOT choose modified reporting. ..

I do not intend to accept more than \$500 in political contributions or make more than \$500 in political expenditures (excluding filing fees) in connection with any future election within the election cycle. I understand that if either one of those limits is exceeded, I will be required to file pre-election reports and, if necessary, a runoff report.

Year of election(s) or election cycle to which declaration applies

Signature of Candidate

FORM CTA PG 2

- Jeffrey S. "Jeff" Tave
- 12 MODIFIED REPORTING DECLARATION

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2017

Year of election(s) or election cycle to which declaration applies

Ciarrella - Ed - distant

P.O. Box 12070

FORM CTA PG 2

- 11 CANDIDATE NAME
- 12 MODIFIED REPORTING DECLARATION

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Year of election(s) or election cycle to which declaration applies

Signature of Candidate

FORM CTA PG 2

11 CANDIDATE NAME

Jeffery

Michalak

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2017

Year of election(s) or election cycle to which declaration applies

Signature of Candidate

P.O. Box 12070

FORM CTA PG 2

11 CANDIDATE NAME

William E. Heintzleman

12 MODIFIED REPORTING DECLARATION

## COMPLETE THIS SECTION ON LY IF YOU ARE CHOOSING MODIFIED REPORTING

(512) 463-5800

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2017

Year of election(s) or election cycle to which declaration applies

Signature of Candidate

William E. Hen