

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

<p>The C/OH Instruction Guide explains how to complete this form.</p>		<p>1 Filer ID (Ethics Commission Filers)</p>	<p>2 Total pages filed: <b>11</b></p>						
<p>3 CANDIDATE / OFFICEHOLDER NAME</p>	<p>MS / MRS / MR FIRST MI <i>MS Linda Lee</i></p> <p>NICKNAME LAST SUFFIX <i>Harvell</i></p>		<p><b>OFFICE USE ONLY</b></p> <p>Date Received</p> <div style="border: 2px solid blue; padding: 5px; transform: rotate(180deg); color: red; font-weight: bold;">             RECEIVED OCT 30 2017           </div> <p>Date Hand-delivered or Date Postmarked</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">Receipt #</td> <td style="width:50%;">Amount \$</td> </tr> <tr> <td colspan="2">Date Processed</td> </tr> <tr> <td colspan="2">Date Imaged</td> </tr> </table>	Receipt #	Amount \$	Date Processed		Date Imaged	
	Receipt #	Amount \$							
Date Processed									
Date Imaged									
<p>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</p> <p>ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <i>1103 Anderson, Suite 102 College Station, TX 77840</i></p> <p><input type="checkbox"/> Change of Address</p>									
<p>5 CANDIDATE / OFFICEHOLDER PHONE</p>	<p>AREA CODE PHONE NUMBER EXTENSION <i>(979) 403-7200</i></p>								
<p>6 CAMPAIGN TREASURER NAME</p>	<p>MS / MRS / MR FIRST MI <i>MR Ben</i></p> <p>NICKNAME LAST SUFFIX <i>White</i></p>								
<p>7 CAMPAIGN TREASURER ADDRESS (Residence or Business)</p>	<p>STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <i>4759 Stonebriar College Station TX 77845</i></p>								
<p>8 CAMPAIGN TREASURER PHONE</p>	<p>AREA CODE PHONE NUMBER EXTENSION <i>(979) 219-2396</i></p>								
<p>9 REPORT TYPE</p>	<p> <input type="checkbox"/> January 15    <input type="checkbox"/> 30th day before election    <input type="checkbox"/> Runoff    <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)  <input type="checkbox"/> July 15    <input checked="" type="checkbox"/> 8th day before election    <input type="checkbox"/> Exceeded \$500 limit    <input type="checkbox"/> Final Report (Attach C/OH - FR)       </p>								
<p>10 PERIOD COVERED</p>	<p>           Month Day Year    Month Day Year  <i>9 / 29 / 2017</i>    THROUGH    <i>10 / 28 / 2017</i> </p>								
<p>11 ELECTION</p>	<p>           ELECTION DATE    ELECTION TYPE            Month Day Year    <input type="checkbox"/> Primary    <input type="checkbox"/> Runoff    <input type="checkbox"/> Other Description  <i>11 / 17 / 2017</i>    <input checked="" type="checkbox"/> General    <input type="checkbox"/> Special         </p>								
<p>12 OFFICE</p>	<p>           OFFICE HELD (if any)    OFFICE SOUGHT (if known)  <i>College Station City Council Place 3</i>    <i>College Station City Council Place 3</i> </p>								

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME Linda Harvell 15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

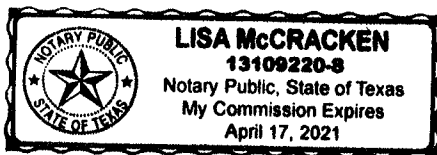
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

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

☐ Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 900.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4,975.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 195.97
	4. TOTAL POLITICAL EXPENDITURES	\$ 6,249.41
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 2,879.83
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

## 18 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Linda Harvell  
Signature of Candidate or Officeholder

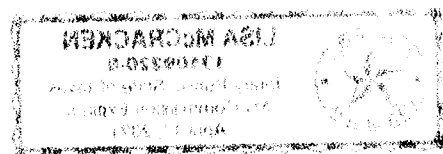
AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Linda Harvell, this the 30th day of October, 20 17, to certify which, witness my hand and seal of office.

Lisa McCracken  
Signature of officer administering oath

Lisa McCracken  
Printed name of officer administering oath

Notary Public  
Title of officer administering oath



# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME

*Linda Harvell*

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,975.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Linda Harvell

3 Filer ID (Ethics Commission Filers)

4 Date

9/29/17

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Ronald Schmidt

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

835 Rosemary Dr College Station, TX  
77802

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/02/17

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

George Dresser

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

501 Fairview Ave College Station, TX  
77840

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/02/17

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Dennis Berthold

Amount of contribution (\$)

200.00

Contributor address;

City; State; Zip Code

1204 Marsteller College Station, TX  
77840

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/04/17

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Linda Stearns

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

316 Suffolk Ave College Station TX  
77840

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Linda Harvell

3 Filer ID (Ethics Commission Filers)

4 Date

10/08/17

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Margaret M. Griffith

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

4606 Shire Ct College Station, TX 77845

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/09/17

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Stephen Beech

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

1101 Neal Pickett College Station, TX 77840

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/12/17

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Joe Guerra

Amount of contribution (\$)

175.00

Contributor address;

City; State; Zip Code

2079 Ravenstone Loop College Station TX 77845

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/14/17

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Robert McWhirter

Amount of contribution (\$)

150.00

Contributor address;

City; State; Zip Code

1708 Amber Ridge Drive, College Station TX 77845

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Linda Harvell

3 Filer ID (Ethics Commission Filers)

4 Date

10/16/17

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Laura Goehring

7 Amount of contribution (\$)

200.00

6 Contributor address;

City; State; Zip Code

8690 Weeden Loop College Station, TX  
77845

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/19/17

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Kerry Cooper

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

9201 Waterford Dr College Station, TX  
77845

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/20/17

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Richard A Smith

Amount of contribution (\$)

1750.00

Contributor address;

City; State; Zip Code

1215 E Villa Maria Rd, Bryan, TX  
77802

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/20/17

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Norma D. Smith

Amount of contribution (\$)

1750.00

Contributor address;

City; State; Zip Code

1215 E Villa Maria Rd, Bryan, TX  
77802

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Linda Harvell

3 Filer ID (Ethics Commission Filers)

4 Date

10/23/17

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Marie E Thompson

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

1411 Angelina Dr College Station TX 77840

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/23/17

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Mark Middlebrooks

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

5308 Saint Andrews Dr College Station TX 77845

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/23/17

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

John Hinkle

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

4104 Wimbledon Circle, College Station TX 77845

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/23/17

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Robert Hensz

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

3207 Westchester Ave College Station TX 77845

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

*Linda Harvell*

3 Filer ID (Ethics Commission Filers)

4 Date

*10/24/17*

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

*Bryan K. Watford*

7 Amount of contribution (\$)

*250.00*

6 Contributor address;

City; State; Zip Code

*2903 Camelot Dr Bryan TX 77802*

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

*10/25/17*

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

*Jill Eivair*

Amount of contribution (\$)

*100.00*

Contributor address;

City; State; Zip Code

*918 Hawthorn St College Station, TX 77840*

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*10/27/17*

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

*Dean L Boyd Jr.*

Amount of contribution (\$)

*200.00*

Contributor address;

City; State; Zip Code

*PO Box 425 Belton, TX 76513*

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <i>3</i>	<b>2</b> FILER NAME <i>Linda Harvell</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>10/09/17</i>	<b>5</b> Payee name <i>The Insite Group</i>	
<b>6</b> Amount (\$) <i>866.00</i>	<b>7</b> Payee address; City; State; Zip Code <i>123 E William J. Bryan Pkwy, Bryan, TX 77803</i>	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  <i>Advertising</i>	<b>(b)</b> Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date <i>10/16/2017</i>	Payee name <i>the Insite Group</i>	
Amount (\$) <i>692.80</i>	Payee address; City; State; Zip Code <i>123 E. William J Bryan Pkwy, Bryan, TX 77803</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  <i>Advertising</i>	Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date <i>10/20/2017</i>	Payee name <i>Copy Corner</i>	
Amount (\$) <i>142.89</i>	Payee address; City; State; Zip Code <i>2307 Texas Avenue South, College Station, TX 77840</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  <i>Advertising</i>	Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <u>3</u>		<b>2</b> FILER NAME <u>Linda Harvell</u>		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date <u>10/23/2017</u>		<b>5</b> Payee name <u>Bryan Broadcasting</u>			
<b>6</b> Amount (\$) <u>240.00</u>		<b>7</b> Payee address; City; State; Zip Code <u>PO Box 3248, Bryan, TX 77805</u>			
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule) <u>Advertising</u>		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <u>10/23/2017</u>		Payee name <u>Bryan Broadcasting</u>			
Amount (\$) <u>1488.00</u>		Payee address; City; State; Zip Code <u>PO Box 3248, Bryan, TX 77805</u>			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) <u>Advertising</u>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <u>10/31/2017</u>		Payee name <u>The Insite Group</u>			
Amount (\$) <u>1628.75</u>		Payee address; City; State; Zip Code <u>123 E. William J. Bryan Pkwy, Bryan, TX 77803</u>			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) <u>Advertising</u>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <i>3</i>	<b>2</b> FILER NAME <i>Linda Harvell</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>10/27/2017</i>	<b>5</b> Payee name <i>KBTX</i>	
<b>6</b> Amount (\$) <i>1,000.00</i>	<b>7</b> Payee address; City; State; Zip Code <i>4141 E. 29th St. Bryan, TX 77802</i>	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  <i>Advertising</i>	<b>(b)</b> Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>	
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>	
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>	
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>	

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