Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

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: 18

OFFICE USE ONLY

Date Received

Date Hand-delivered or Postmarked

Receipt # | Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: MR. | FIRST: JEFFREY | MI: L

NICKNAME | LAST: VASGAARD | SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ change of address

ADDRESS / PO BOX: 310 Eagles Nest Dr; P.O. Box 525 | APT / SUITE #: | CITY: Wimberley | STATE: TX | ZIP CODE: 78676

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (512) | PHONE NUMBER: 656-0690 | EXTENSION:

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: Ms | FIRST: KAREN | MI:

NICKNAME | LAST: BODEN | SUFFIX:

7 CAMPAIGN TREASURER ADDRESS (residence or business)

STREET ADDRESS (NO PO BOX PLEASE): 310 Eagles Nest Dr. | APT / SUITE #: | CITY: Wimberley | STATE: TX | ZIP CODE: 78676

8 CAMPAIGN TREASURER PHONE

AREA CODE: (512) | PHONE NUMBER: 695-1356 | EXTENSION:

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: 7 / 26 / 12 THROUGH Month / Day / Year: 9 / 26 / 12

11 ELECTION

ELECTION DATE — Month / Day / Year: 11 / 6 / 12

ELECTION TYPE: ☐ Primary ☐ Runoff ☒ General ☐ Special

12 OFFICE

OFFICE HELD (if any):

13 OFFICE SOUGHT (if known)

HTGCD 5

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME: JEFFREY VASGAARD

15 ACCOUNT # (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
☐ GENERAL
☐ SPECIFIC

COMMITTEE NAME

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	$ 0
2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 4077 00
	EXPENDITURE TOTALS	
3.	TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ 0
4.	**TOTAL POLITICAL EXPENDITURES**	$ 4273 39
	CONTRIBUTION BALANCE	
5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 803 61
	OUTSTANDING LOAN TOTALS	
6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 1000 00

18 AFFIDAVIT

BRIAN STERMER
Notary Public, State of Texas
My Commission Expires
May 03, 2016

AFFIX NOTARY STAMP / SEAL ABOVE

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.

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said JEFF VASGAARD, this the 3RD day of OCTOBER, 20 12, to certify which, witness my hand and seal of office.

Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath
B—S	BRIAN STERMER	NOTARY

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 8

2 FILER NAME: JEFFREY VASGAARD

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
7/26/12	David Baker 1405 Mt. Sharp Rd. Wimberley TX 78676	$100	(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/10/12	James McMeans 2000 Fischer Store Rd. Wimberley TX 78676	$500	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/11/12	Malcolm Harris 13501 R.R. 12 Wimberley TX 78676	$200	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/22/12	Jack Hollon 3700 River Rd. Wimberley TX 78676	$100	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/29/12	Terry Tull 16712 Rivendell Lane Austin TX 78737	$100	(If travel outside of Texas, complete Schedule T)

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 foradditional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 8

2 FILER NAME: JEFFREY VASGAARD

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
8/29/12	Protect Our Water Rights Texas PO Box 2904 Wimberley TX 78676	$1000.00	(If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
8/31/12	Blaine Nelson 111 Live Oak Dr. Wimberley TX 78676	$25.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
9/1/12	Janette Barlow 210 Winn Valley Dr. Wimberley TX 78676	$100.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
9/4/12	Garry Childs 857 Cherry Bark Lane Dripping Springs, TX 78620	$250.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
9/6/12	Gary + Leslie Weeks 202 W. Spoke Hill Rd. Wimberley TX 78676	$100.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 8

2 FILER NAME: JEFFREY VASGAARD

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/10/12	Rick + Carol Edgerley PO Box 140 Wimberley TX 78676	$250.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions):		Employer (See Instructions):	
9/11/12	Larry Calvert 650 Red Hawk Wimberley TX 78676	$50.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions):		Employer (See Instructions):	
9/16/12	Dorothy Knight 203 Blanco Dr. Wimberley TX 78676	$50.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions):		Employer (See Instructions):	
9/16/12	Helen Bowie 4771 Fischer Store Rd Wimberley TX 78676	$100.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions):		Employer (See Instructions):	
9/16/12	Rehmet Properties P.O. Box 425 Wimberley TX 78676	$50.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions):		Employer (See Instructions):	

Each row: Date | Full name of contributor ☐ out-of-state PAC (ID#:) | Amount of contribution ($) | In-kind contribution description (if applicable)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 8

2 FILER NAME: JEFFREY VASGAARD

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/16/12	Lin Weber-Andrew 913 University Rd. Wimberley TX 78676	$250.00	(If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/16/12	Rocky Boschert PO Box 2049 Wimberley TX 78676	$10.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/16/12	Betsy Landaker 4751 Fischer Store Rd. Wimberley TX 78676	$10.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/16/12	Deborah Bradshaw 605 DeerLake Rd. Wimberley TX 78676	$50.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/16/12	David Glenn PO Box 1089 Wimberley TX 78676	$50.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 8

2 FILER NAME: JEFFREY VASGAARD

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/16/12	Scott Todd 2339 Shady Point Wimb. TX 78676	$25.00	(If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions):		10 Employer (See Instructions):	
9/16/12	Edward Pope 2259 Shady Point Wimb. TX 78676	$25.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions):		Employer (See Instructions):	
9/16/12	S. Tevis Grinstead + Marilee Wood PO Box 1007 Wimb. TX 78676	$100.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions):		Employer (See Instructions):	
9/16/12	Linda Lang 35 Brookhollow Wimb TX 78676	$25.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions):		Employer (See Instructions):	
9/16/12	Herb Smith 312 Canyon Oaks Dr. Wimb TX 78676	$20.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions): Artist		Employer (See Instructions): Self	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 8

2 FILER NAME: JEFFREY VASGAARD

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
9/18/12	Michael Murphy 2005 Hilltop Dr. Wimberley TX 78676	$70.00			
9/16/12	Rehmet Properties PO Box 425 Wimberley TX 78676	$70.00			
9/17/12	Helen Bowie 4771 Fischer Store Rd. PO 2109 Wimberley TX 78676	$35.00			
9/16/12	Christine Middleton 750 green Acres Dr. Wimberley TX 78676	$70.00			
9/18	Steve & Susan Thurber PO Box 2425 Wimberley TX 78676	$70.00			

(If travel outside of Texas, complete Schedule T)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 8

2 FILER NAME: JEFFREY VASGAARD

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/16/12	MISC CASH	$17.00	

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions):

10 Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/19/12	Jake Patoski 706 Deer Run Wimberley TX 78676	$40.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/24/12	Peter + Rita Anderson PO Box 350 Wimberley. TX 78676	$25.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/24/12	Gordon Richmond 9000 Water Park Rd. Wimberley TX 78676	$50.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/24/12	MISC. Cash	$40.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 8

2 FILER NAME: JEFFREY VASGAARD

3 ACCOUNT # (Ethics 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)
9/24/12	Carolyn Nichols 6 Contributor address; City; State; Zip Code 6 garrison Trail Wimberley TX 78676	$50	(If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 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 of Texas, complete Schedule T)
Principal occupation / 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 of Texas, complete Schedule T)
Principal occupation / 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 of Texas, complete Schedule T)
Principal occupation / 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 of Texas, complete Schedule T)
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 foradditional reporting requirements.

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E: 1

2 FILER NAME: JEFFREY VASGAARD

3 ACCOUNT # (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ $

5 Date of loan: 8/29/12

6 Is lender a financial Institution? Y (N)

7 Name of lender: Protect Our Water Rights Texas ☐ out-of-state PAC (ID#:)

8 Lender address; City; State; Zip Code: PO Box 2904 Wimberley TX 78676

9 Loan Amount ($): $1000.00

10 Interest rate: N/A

11 Maturity date: N/A

12 Principal occupation / Job title (See Instructions)

13 Employer (See Instructions)

14 Description of Collateral ☒ none

15 Check if personal funds were deposited into political account ☐

16 GUARANTOR INFORMATION ☐ not applicable

17 Name of guarantor

18 Guarantor address; City; State; Zip Code

19 Amount Guaranteed ($)

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

Is lender a financial Institution? Y N

Name of lender ☐ out-of-state PAC (ID#:)

Lender address; City; State; Zip Code

Loan Amount ($)

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral ☐ none

Check if personal funds were deposited into political account ☐

GUARANTOR INFORMATION ☐ not applicable

Name of guarantor

Guarantor address; City; State; Zip Code

Amount Guaranteed ($)

Principal Occupation (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing 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 F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
7	JEFFREY VASGAARD	

Expenditure 1

4 Date	5 Payee name
8/7/12	Ozona Bank

6 Amount ($)	7 Payee address; City; State; Zip Code
$12.50	Wimberley, TX 78676

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	Acct./Banking	Print checks

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Expenditure 2

Date	Payee name
8/2/12	Marshalls

Amount ($)	Payee address; City; State; Zip Code
$9.73	1050 McKinley #200 San Marcos TX 78666

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Sol/Fund Raising Expense	Thank you notes

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Expenditure 3

Date	Payee name
8/3/12	USPS

Amount ($)	Payee address; City; State; Zip Code
$20.00	Wimberley, TX 78676

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Office Overhead/Rental Exp	P.O. Box Rental

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Expenditure 4

Date	Payee name
8/15/12	USPS

Amount ($)	Payee address; City; State; Zip Code
$9.00	Wimberley TX 78676

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Office Overhead	Stamps

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing 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 F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
7	JEFFREY VASGAARD	

Expenditure 1

4 Date	5 Payee name
8/21/12	Hobby Lobby
6 Amount ($)	**7 Payee address; City; State; Zip Code**
$12.96	4040 S. Lamar Austin TX 78704
8 PURPOSE OF EXPENDITURE	**(a) Category** (See categories listed at the top of this schedule): Office Overhead — **(b) Description** (If travel outside of Texas, complete Schedule T): Supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: — Office sought: — Office held:

Expenditure 2

Date	Payee name
9/1/12	A Studio Z
Amount ($)	**Payee address; City; State; Zip Code**
$1832.67	711 RR 2325 Wimberley TX 78676
PURPOSE OF EXPENDITURE	**Category** (See categories listed at the top of this schedule): Printing Expense — **Description** (If travel outside of Texas, complete Schedule T): Design, Signs, Cards
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: — Office sought: — Office held:

Expenditure 3

Date	Payee name
9/4/12	Pay Pal (Garry Childs)
Amount ($)	**Payee address; City; State; Zip Code**
$7.55	Internet
PURPOSE OF EXPENDITURE	**Category** (See categories listed at the top of this schedule): Acct/Banking — **Description** (If travel outside of Texas, complete Schedule T): Service Chg.
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: — Office sought: — Office held:

Expenditure 4

Date	Payee name
9/7/12	USPS
Amount ($)	**Payee address; City; State; Zip Code**
$74.82	San Marcos, TX 78666
PURPOSE OF EXPENDITURE	**Category** (See categories listed at the top of this schedule): Advertising Expense — **Description** (If travel outside of Texas, complete Schedule T): Postage for card mailing
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: — Office sought: — Office held:

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing 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 F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
7	JEFFREY VASGAARD	

4 Date	5 Payee name	
9/8/12	USPS	
6 Amount ($)	**7 Payee address; City; State; Zip Code**	
$706.88	Wimberley TX 78676	
8 PURPOSE OF EXPENDITURE	**(a) Category** (See categories listed at the top of this schedule)	**(b) Description** (If travel outside of Texas, complete Schedule T)
	Advertising Exp.	Postage for Card mailing
9 Complete ONLY if direct expenditure to benefit C/OH	**Candidate / Officeholder name**	**Office sought** / **Office held**

Date	Payee name	
9/10/12	USPS	
Amount ($)	**Payee address; City; State; Zip Code**	
$145.87	Driftwood, TX 78619	
PURPOSE OF EXPENDITURE	**Category** (See categories listed at the top of this schedule)	**Description** (If travel outside of Texas, complete Schedule T)
	Advertising Exp.	Postage for Card mailing
Complete ONLY if direct expenditure to benefit C/OH	**Candidate / Officeholder name**	**Office sought** / **Office held**

Date	Payee name	
9/11/12	Office Max	
Amount ($)	**Payee address; City; State; Zip Code**	
$10.04	5400 Brodie Lane Austin TX 78745	
PURPOSE OF EXPENDITURE	**Category** (See categories listed at the top of this schedule)	**Description** (If travel outside of Texas, complete Schedule T)
	Office Overhead	Paper Supplies
Complete ONLY if direct expenditure to benefit C/OH	**Candidate / Officeholder name**	**Office sought** / **Office held**

Date	Payee name	
9/14/12	7 A Resort	
Amount ($)	**Payee address; City; State; Zip Code**	
$100.00	Wimberley TX 78676	
PURPOSE OF EXPENDITURE	**Category** (See categories listed at the top of this schedule)	**Description** (If travel outside of Texas, complete Schedule T)
	Event Exp.	Deposit on hall - fund raising
Complete ONLY if direct expenditure to benefit C/OH	**Candidate / Officeholder name**	**Office sought** / **Office held**

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing 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 F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
7	JEFFREY VASGAARD	

4 Date	5 Payee name	6 Amount ($)	7 Payee address; City; State; Zip Code
9/14/12	Costco	$29.22	4301 W. William Cannon Dr. Austin TX 78749

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	Office overhead	Supplies

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name	Amount ($)	Payee address; City; State; Zip Code
9/14/12	Costco	$31.70	4301 W. William Cannon Dr. Austin TX 78749

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Event Exp.	Food for fund raising

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name	Amount ($)	Payee address; City; State; Zip Code
9/15/12	Walgreens	$8.95	1700 Old RR 12 San Marcos TX 78666

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Event Exp.	Supplies

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name	Amount ($)	Payee address; City; State; Zip Code
9/15/12	Fed Ex	$56.83	301 N. Edward gary St San Marcos TX 78666

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Printing Exp.	Print posters

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing 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 F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
7	JEFFREY VASGAARD	

Entry 1

4 Date	5 Payee name
9/15/12	Dollar General
6 Amount ($)	**7 Payee address; City; State; Zip Code**
$373	610 FM 2325 Wimberley TX 78676

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	Event Exp.	Decorations

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Entry 2

Date	Payee name
9/16/12	Dollar General
Amount ($)	**Payee address; City; State; Zip Code**
$893	610 FM 2325 Wimberley TX 78676

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Event Exp.	Decorations

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Entry 3

Date	Payee name
9/16/12	Dollar General
Amount ($)	**Payee address; City; State; Zip Code**
$757	610 FM 2325 Wimberley TX 78676

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Office Overhead	Supplies

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Entry 4

Date	Payee name
9/18/12	Home Depot
Amount ($)	**Payee address; City; State; Zip Code**
$5459	Hwy. 290 Dripping Springs, TX

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Advertising Exp.	Sign posts

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing 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 F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
7	JEFFREY VASGAARD	

Expenditure 1

4 Date	5 Payee name
9/19/12	Ace Hardware
6 Amount ($)	**7 Payee address; City; State; Zip Code**
$12.30	R.R. 12 Wimberley TX 78676
8 PURPOSE OF EXPENDITURE	**(a) Category** (See categories listed at the top of this schedule): Advertising Exp — **(b) Description** (If travel outside of Texas, complete Schedule T): Sign supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: — Office sought: — Office held:

Expenditure 2

Date	Payee name
9/19/12	King Feed
Amount ($)	**Payee address; City; State; Zip Code**
$71.25	14210 RR 12 Wimberley TX 78676
PURPOSE OF EXPENDITURE	**Category** (See categories listed at the top of this schedule): Advertising Exp. — **Description** (If travel outside of Texas, complete Schedule T): Sign Posts
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: — Office sought: — Office held:

Expenditure 3

Date	Payee name
9/19/12	PayPal (Jake Patoski)
Amount ($)	**Payee address; City; State; Zip Code**
$1.46	Internet
PURPOSE OF EXPENDITURE	**Category** (See categories listed at the top of this schedule): Acct/ Banking — **Description** (If travel outside of Texas, complete Schedule T): Service Chg.
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: — Office sought: — Office held:

Expenditure 4

Date	Payee name
9/24/12	King Feed
Amount ($)	**Payee address; City; State; Zip Code**
$36.73	14210 RR 12 Wimberley TX 78676
PURPOSE OF EXPENDITURE	**Category** (See categories listed at the top of this schedule): Advertising Exp. — **Description** (If travel outside of Texas, complete Schedule T): Sign Posts
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: — Office sought: — Office held:

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing 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 F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
7	JEFFREY VASGAARD	

4 Date	5 Payee name
9/25/12	A Studio Z

6 Amount ($)	7 Payee address; City; State; Zip Code
$1008.11	711 RR 2325 Wimberley TX 78676

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	Printing Expense	cards

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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)

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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)

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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)

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

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: 2

3 CANDIDATE / OFFICEHOLDER NAME
MS / MRS / MR: MR. FIRST: JIMMY MI: K
NICKNAME LAST: SKIPTON SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
☐ change of address
ADDRESS / PO BOX: 7890 W. HWY 290 APT / SUITE #: CITY: STATE: ZIP CODE
DRIPPING SPRINGS, TX 78620

5 CANDIDATE/ OFFICEHOLDER PHONE
AREA CODE: (512) PHONE NUMBER: 658-5046 EXTENSION:

6 CAMPAIGN TREASURER NAME
MS / MRS / MR: MRS FIRST: LAURIE MI:
NICKNAME LAST: SKIPTON SUFFIX

7 CAMPAIGN TREASURER ADDRESS (residence or business)
STREET ADDRESS (NO PO BOX PLEASE): 7890 W. HWY 290 APT / SUITE #: CITY: STATE: ZIP CODE
DRIPPING SPRINGS, TX 78620

8 CAMPAIGN TREASURER PHONE
AREA CODE: (512) PHONE NUMBER: 658-5046 EXTENSION:

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: 8 / 20 / 12 THROUGH Month Day Year: 9 / 26 / 12

11 ELECTION
ELECTION DATE Month Day Year: 11 / 6 / 12
ELECTION TYPE ☐ Primary ☐ Runoff ☒ General ☐ Special

12 OFFICE
OFFICE HELD (if any): HTGCD 1 DIRECTOR

13 OFFICE SOUGHT (if known)

OFFICE USE ONLY
Date Received: RECEIVED OCT - 5 2012
Date Hand-delivered or Postmarked
Receipt # Amount
Date Processed: RECEIVED OCT - 5 2012
Date Imaged: RECEIVED OCT - 5 2012

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME: JIMMY SKIPTON

15 ACCOUNT # (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
- ☐ GENERAL
- ☐ SPECIFIC

COMMITTEE NAME

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	$ - 0 -
2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ - 0 -

EXPENDITURE TOTALS

3.	TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ - 0 -
4.	**TOTAL POLITICAL EXPENDITURES**	$ - 0 -

CONTRIBUTION BALANCE

5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ - 0 -

OUTSTANDING LOAN TOTALS

6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ - 0 -

18 AFFIDAVIT

COLLEEN MARIE PRIMM
Notary Public, State of Texas
My Commission Expires 10-09-2012

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.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the 5th day of October, 20 12, to certify which, witness my hand and seal of office.

Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath
	Colleen Marie Primm	CSR

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

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:

OFFICE USE ONLY

Date Received
RECEIVED OCT -4 2012

Date Hand-delivered or Postmarked

Receipt # | Amount

Date Processed
RECEIVED OCT - 4 2012

Date Imaged
RECEIVED OCT - 4 2012

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: Mr. | FIRST: Mark | MI: C.
NICKNAME | LAST: Hastings | SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ change of address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
13524 Evergreen Way, Austin TX 78737

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (512) | PHONE NUMBER: 301-2195 | EXTENSION

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: Mr. | FIRST: Marvin | MI:
NICKNAME | LAST: Williams | SUFFIX

7 CAMPAIGN TREASURER ADDRESS (residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
13401 Evergreen Way Austin TX 78737

8 CAMPAIGN TREASURER PHONE

AREA CODE: (512) | PHONE NUMBER: 301-5005 | EXTENSION

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: 8/20/2012 THROUGH Month Day Year: 9/27/2012

11 ELECTION

ELECTION DATE Month Day Year: 11/6/2012

ELECTION TYPE
☐ Primary ☐ Runoff ☒ General ☐ Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)
Hays Trinity Groundwater Conservation District Single Member District 3

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME: Mark C. Hastings

15 ACCOUNT # (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
- ☐ GENERAL
- ☐ SPECIFIC

COMMITTEE NAME

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	$ 49.00
2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 2,449.00

EXPENDITURE TOTALS

3.	TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ 50.32
4.	**TOTAL POLITICAL EXPENDITURES**	$ 1,210.93

CONTRIBUTION BALANCE

5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 1,238.07

OUTSTANDING LOAN TOTALS

6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 1,000.00

18 AFFIDAVIT

MIGUEL D MELLADO
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 7/18/16

AFFIX NOTARY STAMP / SEAL ABOVE

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.

Mark Hastings
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Mark Hastings, this the 4th day of October, 20 12, to certify which, witness my hand and seal of office.

Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath
Miguel D Mellado	Miguel D Mellado	Notary

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: Mr. Mark C. Hastings

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
8-31-12	Ms Jean Avera 5798 Hwy 290 W Dripping Springs TX 78620	100.00	(If travel outside of Texas, complete Schedule T)		
8-31-12	Ms Lucinda Kapral 14607 Echo Bluff Austin TX 78737	20.00	(If travel outside of Texas, complete Schedule T)		
8-31-12	Mr. Terry Tull 16712 Revendell Ln Austin TX 78737	500.00	(If travel outside of Texas, complete Schedule T)		
8-31-12	Ms. Betty Finley PO Box 163 Dripping Springs TX 78620	30.00	(If travel outside of Texas, complete Schedule T)		
8-28-12	Mr. James McMeans 2000 Fischer Store Rd. Wimberley TX 78676	500.00	(If travel outside of Texas, complete Schedule T)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: Mr. Mark C. Hastings

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
8-29-12	Protect our Water Rights, Texas PO Box 2904 Wimberley TX 78676	1,000.00	(If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9-19-12	Mr. Larry Calvert 650 Red Hawk Wimberley TX 78676	50.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9-25-12	Ms Susan Mitchell 424 Hidden Creek Dripping Springs TX 78620	100.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9-26-12	Mr. John Adams 1005 Oak Meadow Dr Dripping Springs	100.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T)
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 foradditional reporting requirements.

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

2 FILER NAME
Mr. Mark C. Hastings

3 ACCOUNT # (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ $

5 Date of loan: 8-29-12

7 Name of lender: Protect Our Water Rights Texas ☐ out-of-state PAC (ID#: _____)

9 Loan Amount ($): 1,000.00

6 Is lender a financial institution? Y (N)

8 Lender address; City; State; Zip Code: P.O. Box 2904 Wimberley TX 78676

10 Interest rate: 0

11 Maturity date:

12 Principal occupation / Job title (See Instructions):

13 Employer (See Instructions):

14 Description of Collateral ☒ none

15 Check if personal funds were deposited into political account ☐

16 GUARANTOR INFORMATION ☐ not applicable

17 Name of guarantor:

18 Guarantor address; City; State; Zip Code:

19 Amount Guaranteed ($):

20 Principal Occupation (See Instructions):

21 Employer (See Instructions):

Date of loan:

Name of lender: ☐ out-of-state PAC (ID#: _____)

Loan Amount ($):

Is lender a financial institution? Y N

Lender address; City; State; Zip Code:

Interest rate:

Maturity date:

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Description of Collateral ☐ none

Check if personal funds were deposited into political account ☐

GUARANTOR INFORMATION ☐ not applicable

Name of guarantor:

Guarantor address; City; State; Zip Code:

Amount Guaranteed ($):

Principal Occupation (See Instructions):

Employer (See Instructions):

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing 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 F:	**2** FILER NAME Mr. Mark C. Hastings	**3** ACCOUNT # (Ethics Commission Filers)
4 Date 8-31-12	**5** Payee name Online Candidate.com	
6 Amount ($) $149.00	**7** Payee address; City; State; Zip Code PO Box 402 Montgomery NY 12549	
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) web hosting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9-6-12	Payee name Allied Advertising	
Amount ($)	Payee address; City; State; Zip Code 3700 Blanco Rd San Antonio TX 78212	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) signs
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9-17-12	Payee name Allied Advertising	
Amount ($)	Payee address; City; State; Zip Code 3700 Blanco Rd San Antonio TX 78212	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) sign stands
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

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)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 / OFFICEHOLDER NAME
MS / MRS / MR: MR | FIRST: Mark | MI: A.
NICKNAME | LAST: Key | SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
☐ change of address
ADDRESS / PO BOX: 278 Mountain Laurel Way | APT / SUITE #: | CITY: Austin | STATE: TX | ZIP CODE: 78737

5 CANDIDATE/ OFFICEHOLDER PHONE
AREA CODE: (512) | PHONE NUMBER: 773 0570 | EXTENSION:

6 CAMPAIGN TREASURER NAME
MS / MRS / MR: MR | FIRST: Mark | MI: A.
NICKNAME | LAST: Key | SUFFIX

7 CAMPAIGN TREASURER ADDRESS (residence or business)
STREET ADDRESS (NO PO BOX PLEASE): 278 Mountain Laurel Way | APT / SUITE #: | CITY: Austin | STATE: TX. | ZIP CODE: 78737

8 CAMPAIGN TREASURER PHONE
AREA CODE: (512) | PHONE NUMBER: 773-0570 | EXTENSION:

OFFICE USE ONLY
Date Received: RECEIVED OCT - 8 2012
Date Hand-delivered or Postmarked:
Receipt # | Amount
Date Processed: RECEIVED OCT - 8 2012
Date Imaged: RECEIVED OCT - 8 2012

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: 07 / 16 / 2012 THROUGH 10 / 06 / 2012

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

12 OFFICE
OFFICE HELD (if any): H.T.G.C.D. #3

13 OFFICE SOUGHT (if known): H.T.G.C.D. #3

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME: Mark A. Key

15 ACCOUNT # (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.

☐ additional pages

COMMITTEE TYPE
☐ GENERAL
☐ SPECIFIC

COMMITTEE NAME: N/A

COMMITTEE ADDRESS:

COMMITTEE CAMPAIGN TREASURER NAME:

COMMITTEE CAMPAIGN TREASURER ADDRESS:

17 CONTRIBUTION TOTALS

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

EXPENDITURE TOTALS

3.	TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ Ø
4.	**TOTAL POLITICAL EXPENDITURES**	$ 949.86

CONTRIBUTION BALANCE

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

OUTSTANDING LOAN TOTALS

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

18 AFFIDAVIT

PATRICIA A. MORGAN
Notary Public, State of Texas
My Commission Expires
June 27, 2015

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.

Mark Key
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Mark Key, this the 8 day of October, 20 12, to certify which, witness my hand and seal of office.

Patricia Morgan — Signature of officer administering oath
Patricia Morgan — Printed name of officer administering oath
Notary — Title of officer administering oath

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing 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	3 ACCOUNT # (Ethics Commission Filers)
	Mark A. Key	

4 Date	5 Payee name
Sept 9, 2012	PEEL, Inc.

6 Amount ($) 230.00	7 Payee address; City; State; Zip Code
☐ Reimbursement from political contributions intended	308 Meadowlark St. Lakeway, Tx. 78734

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	Advertising Expense	Ad in Newsletter

Date	Payee name
Aug 24, 2012	AMPRO Signs
Amount ($) 719.86 ☐ Reimbursement from political contributions intended	**Payee address; City; State; Zip Code** 7202 Smokey Hill Austin, TX. 78736
PURPOSE OF EXPENDITURE	**Category** (See categories listed at the top of this schedule): Advertising Expense — **Description** (If travel outside of Texas, complete Schedule T): Signs and Sign Stands

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)

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

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

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: 1

3 CANDIDATE / OFFICEHOLDER NAME
MS / MRS / MR: Mr. FIRST: Mike MI: D
NICKNAME: LAST: Cox SUFFIX:

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
☐ change of address
ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
2701 Lone Man Mountain Rd
Driftwood, TX 78619

5 CANDIDATE/ OFFICEHOLDER PHONE
AREA CODE: (512) PHONE NUMBER: 923-2596 EXTENSION:

6 CAMPAIGN TREASURER NAME
MS / MRS / MR: Mrs FIRST: Diane MI:
NICKNAME: LAST: Cox SUFFIX:

7 CAMPAIGN TREASURER ADDRESS (residence or business)
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
2701 Lone Man Mountain Road
Driftwood, TX 78619

8 CAMPAIGN TREASURER PHONE
AREA CODE: (512) PHONE NUMBER: 923-2625 EXTENSION:

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 THROUGH Month 09 / Day 26 / Year 2012

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

12 OFFICE
OFFICE HELD (if any):

13 OFFICE SOUGHT (if known): Hays Trinity Groundwater Dist 5

OFFICE USE ONLY
Date Received: RECEIVED OCT - 8 2012
Date Hand-delivered or Postmarked:
Receipt # Amount
Date Processed: RECEIVED OCT - 8 2012
Date Imaged: RECEIVED OCT - 8 2012

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

15 ACCOUNT # (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

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

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

EXPENDITURE TOTALS

3.	TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$
4.	**TOTAL POLITICAL EXPENDITURES**	$

CONTRIBUTION BALANCE

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

OUTSTANDING LOAN TOTALS

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

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.

_____

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20 _____, to certify which, witness my hand and seal of office.

_____ _____ _____

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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: 5

3 CANDIDATE / OFFICEHOLDER NAME
MS / MRS / MR: Mrs. | FIRST: Roberta | MI: J
NICKNAME: Robbie | LAST: Zamora | SUFFIX:

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
☐ change of address
ADDRESS / PO BOX: 2370 McGregor Ln | APT / SUITE #: | CITY: Dripping Springs | STATE: Tx | ZIP CODE: 78620

5 CANDIDATE/ OFFICEHOLDER PHONE
AREA CODE: (512) | PHONE NUMBER: 627-7114 | EXTENSION:

6 CAMPAIGN TREASURER NAME
MS / MRS / MR: Mrs. | FIRST: Roberta | MI: J
NICKNAME: Robbie | LAST: Zamora | SUFFIX:

7 CAMPAIGN TREASURER ADDRESS (residence or business)
STREET ADDRESS (NO PO BOX PLEASE): 4007 Lochwood Bend Ct | APT / SUITE #: | CITY: Austin | STATE: Tx | ZIP CODE: 78738

8 CAMPAIGN TREASURER PHONE
AREA CODE: (512) | PHONE NUMBER: 627-7114 | EXTENSION:

OFFICE USE ONLY
Date Received: RECEIVED OCT - 8 2012
Date Hand-delivered or Postmarked:
Receipt # | Amount
Date Processed: RECEIVED OCT - 8 2012
Date Imaged: RECEIVED OCT - 8 2012

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 07 / Day 25 / Year 2012 THROUGH Month 09 / Day 26 / Year 2012

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

12 OFFICE
OFFICE HELD (if any):
13 OFFICE SOUGHT (if known): Hays Trinity Groundwater Conservation District, District 1

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME: Roberta Zamora

15 ACCOUNT # (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
☐ GENERAL
☐ SPECIFIC

COMMITTEE NAME

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	$ 100.00
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 2452.31
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ Ø
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 1286.08
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 463.92
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ Ø

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.

AMY J. DORSEY
Notary Public,
State of Texas
Comm. Exp. 09-01-14

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Roberta Zamora, this the 8th day of October, 20 12, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Amy J. Dorsey
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 Schedule A: 2

2 FILER NAME: Roberta Zamora

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
8/22/12	David H. Glenn PO Box 1089 Wimberley, Tx 78676	$500.-	(If travel outside of Texas, complete Schedule T)	retired	
8/12/12	Alice and James McMeans 2000 Fischer Store Rd Wimberley Tx 78676	$500.-	(If travel outside of Texas, complete Schedule T)		
8/29/12	Lila McCall 2500 River Road Wimberley Tx 78676	$702.31	printing of mailers (If travel outside of Texas, complete Schedule T)	retired	
9/12/12	Anne & Garry Child 857 Cherry Bark Ln Dripping Springs Tx 78620	$250.-	(If travel outside of Texas, complete Schedule T)		
9/24/12	Lyssa Slate 330 Grafton Ln Austin Tx 78737	$300.-	(If travel outside of Texas, complete Schedule T)	homemaker	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 2

2 FILER NAME: Roberta Zamora

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/12/12	Terry Tull 16712 Rivendell Ln Austin, Tx 78737	$100.-	(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
retired	

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T)

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 foradditional reporting requirements.

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing 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 F:	2 FILER NAME: Roberta Zamora	3 ACCOUNT # (Ethics Commission Filers)
4 Date: 8-29-12	5 Payee name: SuperCheap Signs	
6 Amount ($): $612.57	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): Printing	(b) Description (If travel outside of Texas, complete Schedule T): SIGNS
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: Robbie Zamora	Office sought: HTGCD #1 — Office held:

Date: 9-17-12	Payee name: AlphaGraphics	
Amount ($): $419.47	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): printing	Description (If travel outside of Texas, complete Schedule T): mailer
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: Robbie Zamora	Office sought: HTGCD #1 — Office held:

Date: 9-25-12	Payee name: USPS	
Amount ($): $254.04	Payee address; City; State; Zip Code: Dripping Springs, Tx 78620	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule):	Description (If travel outside of Texas, complete Schedule T):
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name:	Office sought: — Office held:

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):
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name:	Office sought: — Office held:

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED