

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 Filer)	2 Total pages filed: 10
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR <input checked="" type="checkbox"/>	FIRST	MI
	NICKNAME	LAST	SUFFIX
		Linda Kaye Rogers	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX	APT / SUITE #	CITY
	STATE	ZIP CODE	
		PO Box 721 Wimberley TX 78676	
<input type="checkbox"/> change of address			
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(512) 847-0634		
6 CAMPAIGN TREASURER NAME	MS/MRS/MR <input checked="" type="checkbox"/>	FIRST	MI
	NICKNAME	LAST	SUFFIX
		Edward Pope	
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE)	APT / SUITE #	CITY
	STATE	ZIP CODE	
		2259 Sandy Point Rd Wimberley Tx 78676	
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(512) 468-8191		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" 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 type="checkbox"/> 9th day before election <input type="checkbox"/> Exceeded \$200 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month	Day	Year
	Aug 6 2013 THROUGH Sept 26 2013		
11 ELECTION	ELECTION DATE	ELECTION TYPE	
	Month Day Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff
		<input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
		11 5 13	
12 OFFICE	OFFICE HELD (if any)		
	Board of Directors Hays Trinity Groundwater Conservation Dist 4		
13 OFFICE SOUGHT (if known)	OFFICE SOUGHT (if known)		
	Board of Directors Hays Trinity Groundwater Conservation District 4		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

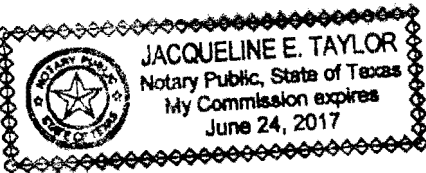
14 C/OH NAME	15 ACCOUNT # (Ethics Commission Filers)
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16 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> additional pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO 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 <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
		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	\$ 75. ⁰⁰
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2320. ⁰⁰
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ - 0 -
	4. TOTAL POLITICAL EXPENDITURES	\$ 1555. ⁸⁷
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 764. ³³
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ - 0 -

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.



AFFIX NOTARY STAMP / SEAL ABOVE

Linda Kaye Rogers

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Linda Rogers, this the 7 day of October, 20 13, to certify which, witness my hand and seal of office.

[Signature]

Signature of officer administering oath

Jacqueline Taylor

Printed name of officer administering oath

Officer - Broadway Bank

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: <i>1 of 3 4</i>	
2 FILER NAME <i>Linda Kaye Rogers</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>10/5/13</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>David Glenn</i>	7 Amount of contribution (\$) <i>50⁰⁰</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>500 Outball Tr Wimberley TX 78676</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>retired</i>		10 Employer (See Instructions)	
Date <i>10/5/13</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Dina Rodriguez</i>	Amount of contribution (\$) <i>50⁰⁰</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2005 Hilltop Dr Wimberley TX 78676</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Independent Consultant</i>		Employer (See Instructions) <i>Self</i>	
Date <i>10/5/13</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Jeanette Barlow</i>	Amount of contribution (\$) <i>50.00/xx</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>210 Winn Valley Dr Wimberley, TX 78676</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>retired educator</i>		Employer (See Instructions)	
Date <i>10/5/13</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Barbara Hopson</i>	Amount of contribution (\$) <i>50⁰⁰/xx</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>PO Box 1753 Wimberley TX 78676</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>10/5/13</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Louis Parks & Susan Nonney</i>	Amount of contribution (\$) <i>50⁰⁰</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>820 Red Hawk Rd Wimberley TX 78676</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Louis - Writer Susan - retired</i>		Employer (See Instructions) <i>Louis - Self</i>	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional 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: <i>2 of 34</i>	
2 FILER NAME <i>Linda Kaye Rogers</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>8/6/2013</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Edward Pope</i>	7 Amount of contribution (\$) <i>500.⁰⁰</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>2259 Sandy Point Wimberley TX 78676</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>retired</i>		10 Employer (See Instructions)	
Date <i>10/5/13</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Karen Boden</i>	Amount of contribution (\$) <i>50.⁰⁰</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>310 Eagles Nest Dr Wimberley TX 78676</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>10/5/13</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Jack Hallon</i>	Amount of contribution (\$) <i>100.⁰⁰</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>3700 River Rd Wimberley TX 78676</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>retired</i>		Employer (See Instructions)	
Date <i>10/5/13</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>James McMeans</i>	Amount of contribution (\$) <i>300.⁰⁰ XX</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2000 Fischer Wimberley, TX 78676</i>		(If travel outside of Texas, complete Schedule T)	
Store Rd			
Principal occupation / Job title (See Instructions) <i>Retired</i>		Employer (See Instructions)	
Date <i>10/19/13</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Edward Pope</i>	Amount of contribution (\$) <i>100.⁰⁰</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2259 Sandy Point Rd Wimberley TX 78676</i>		(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: <i>304</i>	
2 FILER NAME <i>Linda Kaye Rogers</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>10/5/13</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Janet Acord</i>	7 Amount of contribution (\$) <i>100.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>PO Box 408 Wimberley TX 78676</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>retired</i>		10 Employer (See Instructions)	
Date <i>10/5/13</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Jane Little</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>16 Woodcreek Dr Wimberley TX 78676</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>8/31/13</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Joan Jernigan</i>	Amount of contribution (\$) <i>25.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2170 Hilltop Dr Wimberley, TX 78676</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>retired</i>		Employer (See Instructions)	
Date <i>8/31/13</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Judy Bradburg</i>	Amount of contribution (\$) <i>25.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>PO Box 982 Wimberley, TX 78676</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>retired</i>		Employer (See Instructions)	
Date <i>8/31/13</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Peter Anderson</i>	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>PO Box 350</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>retired</i>		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: <i>4 of 4</i>	
2 FILER NAME <i>Linda Kaye Rogers</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>8/31/13</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Terry Tull</i>	7 Amount of contribution (\$) <i>500.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>16712 Rivardell LN Austin, TX 78737</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>retired</i>		10 Employer (See Instructions)	
Date <i>9/9/13</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>BRENT PULLEY</i>	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>26 WOODCREEK DR WIMBERLEY, TX 78674</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>attorney</i>		Employer (See Instructions) <i>self</i>	
Date <i>8/25/13</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Eduard Pope</i>	Amount of contribution (\$) <i>75.00</i>	In-kind contribution description (if applicable) <i>rent for building for campaign meeting</i>
Contributor address; City; State; Zip Code <i>2259 Sandy Point Rd Wimberley TX 78676</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> 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 <input type="checkbox"/> 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 for additional reporting requirements.

POLITICAL EXPENDITURES

SCHEDULE F

183

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 |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:		2 FILER NAME <i>Linda Kaye Rogers</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>8/27/13</i>		5 Payee name <i>USPO</i>			
6 Amount (\$) <i>18.46</i>		7 Payee address; City; State; Zip Code <i>Joe Wimberley Dr Wimberley, TX 78676</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Office Overhead</i>		(b) Description (If travel outside of Texas, complete Schedule T) <i>Stamps</i>	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Linda Kaye Rogers</i>		Office sought <i>Hays Trinity Groundwater Conservation Dist 4</i>	
Date <i>8/30/13</i>		Payee name <i>Wal Mart</i>			
Amount (\$) <i>115.50</i>		Payee address; City; State; Zip Code <i>1015 Hwy 80 San Marcos TX 78666</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Office Overhead</i>		Description (If travel outside of Texas, complete Schedule T) <i>cell phone minutes</i>	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Linda Kaye Rogers</i>		Office sought <i>Hays Trinity GCD 4</i>	
Date <i>8/8/13</i>		Payee name <i>Astudaz Printing</i>			
Amount (\$) <i>136.25</i>		Payee address; City; State; Zip Code <i>103 FM Wimberley TX 78676 2325</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Advertising</i>		Description (If travel outside of Texas, complete Schedule T) <i>sign design manufacture</i>	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought <i>HTGCD-4</i>	
Date <i>8/13/2013</i>		Payee name <i>Gwennies Signs</i>			
Amount (\$) <i>275.00</i>		Payee address; City; State; Zip Code <i>162 Ideal Ave Mobile, AL 36608</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Advertising</i>		Description (If travel outside of Texas, complete Schedule T) <i>Campaign yard signs</i>	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Linda Kaye Rogers</i>		Office sought <i>HTGCD-4</i>	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

293

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 |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:		2 FILER NAME <i>Linda Kaye Rogers</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>8/19/13</i>		5 Payee name <i>Gwenies Signs</i>			
6 Amount (\$) <i>542.00</i>		7 Payee address; City; State; Zip Code <i>162 Ideal Mobile, AL 36608 Ave</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Advertising</i>		(b) Description (If travel outside of Texas, complete Schedule T) <i>large campaign signs</i>	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Linda Kaye Rogers</i>		Office sought <i>HTGCD-4</i>	
Date <i>8/13/13</i>		Payee name <i>Ozona Bank</i>			
Amount (\$) <i>39.20</i>		Payee address; City; State; Zip Code <i>P.O. Box 598 Wimberley TX 78676</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Office Overhead</i>		Description (If travel outside of Texas, complete Schedule T) <i>checks</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Linda Kaye Rogers</i>		Office sought <i>HTGCD-4</i>	
Date <i>8/19/13</i>		Payee name <i>Astoria Z Printing</i>			
Amount (\$) <i>149.49</i>		Payee address; City; State; Zip Code <i>103 Wimberley Fm 2325</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <i>duplicate error JK Rogers</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <i>9/12/13</i>		Payee name <i>Ozona Bank - Wimberley Bryce Engelhart Printing</i>			
Amount (\$) <i>37.81</i>		Payee address; City; State; Zip Code <i>Wimberley, TX 7867</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Advertising</i>		Description (If travel outside of Texas, complete Schedule T) <i>business cards</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Linda Kaye Rogers</i>		Office sought <i>HTGCD-4</i>	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

3 of 3

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 |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME <i>Linda Kaye Rogers</i>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <i>9/3/13</i>	5 Payee name <i>Deleup WS - Candidate on line</i>
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6 Amount (\$) <i>99.00</i>	7 Payee address; City; State; Zip Code <i>PO Box 402 Montgomery NY 12549</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Advertising</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>web pages</i>
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Linda Kaye Rogers</i>	Office sought <i>HTGLD-4</i>	Office held
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Date <i>9/17/13</i>	Payee name <i>The hearing room</i>
------------------------	---------------------------------------

Amount (\$) <i>30.17</i>	Payee address; City; State; Zip Code <i>111 River Rd Wimberly TX 78676</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Food / Beverage</i>	Description (If travel outside of Texas, complete Schedule T) <i>consulting mtgs</i>
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Linda Kaye Rogers</i>	Office sought <i>HTGLD-4</i>	Office held
---	---	---------------------------------	-------------

Date <i>9/18/13</i>	Payee name <i>Lorenitas Mexican Cafe</i>
------------------------	---

Amount (\$) <i>10.85</i>	Payee address; City; State; Zip Code <i>934 N. Boerne, TX 78006 Main St</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Food / Beverage</i>	Description (If travel outside of Texas, complete Schedule T) <i>Regional Water Mgmt J Henche</i>
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Linda Kaye Rogers</i>	Office sought <i>HTGLD-4</i>	Office held
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Date <i>9-16-13</i>	Payee name <i>Wimberly Institute of Culture</i>
------------------------	--

Amount (\$) <i>16.00</i>	Payee address; City; State; Zip Code <i>PO Box 1145 Wimberly TX 78676</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Food - Beverage</i>	Description (If travel outside of Texas, complete Schedule T) <i>Campaigning</i>
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Linda Kaye Rogers</i>	Office sought <i>HTGLD-4</i>	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: <i>1</i>		2 FILER NAME <i>Jinda Kaye Rogers</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>8/2/13</i>		5 Payee name <i>USPO</i>			
6 Amount (\$) <input checked="" type="checkbox"/> Reimbursement from political contributions intended <i>14.60/xx</i>		7 Payee address; City; State; Zip Code <i>Joe Wimberley TX 78676</i> <i>Wimberley Dr</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Office/Rental</i>		(b) Description (If travel outside of Texas, complete Schedule T) <i>Campaign post office box</i>	
Date <i>8/3/13</i>		Payee name <i>Wal Mart</i>			
Amount (\$) <input checked="" type="checkbox"/> Reimbursement from political contributions intended <i>\$46.69</i>		Payee address; City; State; Zip Code <i>1015 Hwy 80 San Marcos, TX 78666</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Office Overhead</i>		Description (If travel outside of Texas, complete Schedule T) <i>cell phone for campaign</i>	
Date <i>8/12/13</i>		Payee name <i>Dollar General Store</i>			
Amount (\$) <input checked="" type="checkbox"/> Reimbursement from political contributions intended <i>3.25</i>		Payee address; City; State; Zip Code <i>125 Carney Wimberley TX 78676</i> <i>LW</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Office Overhead</i>		Description (If travel outside of Texas, complete Schedule T) <i>envelopes for contributions</i>	
Date <i>8/23/13</i>		Payee name <i>Dollar Tree Stores, TN # 1172</i>			
Amount (\$) <input checked="" type="checkbox"/> Reimbursement from political contributions intended <i>14.91</i>		Payee address; City; State; Zip Code <i>1050 McKinley San Marcos, TX 78666</i> <i>Place Dr Ste 100</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Event Expense</i>		Description (If travel outside of Texas, complete Schedule T) <i>Food, paper goods for Campaign Kick-off</i>	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					