# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:		
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST	MI	OFFICE USE ONLY		
NAME	MR Jose NICKNAME LAST	SUFFIX	Date Received		
	MACIAS	Jr.			
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT / SUITE #; C	CITY; STATE; ZIP CODE	RECEIXED JUL 1 2 2016		
MAILING ADDRESS	6855 CANARY M	L CIYN VVK			
Change of Address		01			
5 CANDIDATE/ OFFICEHOLDER PHONE	(70) 386,0075	EXTENSION	Date Hand-delivered or Date Postmarked		
6 CAMPAIGN	MS / MRS / MR FIRST	МІ	Receipt # Amount \$		
TREASURER NAME	SEAN NICKNAME LAST	Date Processed			
	Sutton	SUFFIX	Date Imaged		
7 CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX PLEASE); APT / SL	JITE #; CITY; STATE;	ZIP CODE		
ADDRESS (Residence or Business)	8318 Marden Converse, T	// SAY			
(Nestached of Basinoss)	Converse, T	X 78109			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER	EXTENSION			
9 REPORT TYPE	January 15 30th day before el	lection Runoff	15th day after campaign treasurer appointment		
	July 15 8th day before elec	ction Exceeded \$500 limit	(Officeholder Only) Final Report (Attach C/OH - FR)		
40 555105					
10 PERIOD COVERED	Month Day Year  01/01/2016	THROUGH $\partial \epsilon /$	Day Year 30 / 2016		
11 ELECTION	ELECTION DATE  Month - Day Year Primary	ELECTION TYPE Runoff Other			
	Month Day Year General	Description  Special			
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known			
	Judson ISD#4		b		
GO TO PAGE 2					

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME	¥.	15 Fil	er ID (Ethics Commission Filers)		
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.				
	COMMITTEE TYPE  GENERAL  SPECIFIC	COMMITTEE NAME  COMMITTEE ADDRESS  6855 CANARY  COMMITTEE CAMPAIGN TREASURER NAME	ect Jose Macias		
Additional Pages		COMMITTEE CAMPAIGN THEASURER NAME  Seas Suffau  COMMITTEE CAMPAIGN TREASURER ADDRESS  8318 Mande-ly B  Converse Tx 781			
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, 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		\$ \$\display\$		
ger all ger ble har har hell hall all ger ber all all	4. TOTAL	POLITICAL EXPENDITURES	\$ 57564		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD		\$ 2,11530		
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD	s 6		
18 AFFIDAVIT					
JACQUELYN PEREZ  MY COMMISSION EXPIRES  May 21, 2017  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/SEALABOVE					
Sworn to and subscribed before me, by the said, this the, this the					
day of, 20, to certify which, witness my hand and seal of office.					
MYMK JWWWWINI DAYYA WUJAW					
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath					

#### POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

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

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

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

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

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

The Instruction Guide explains how to complete this form.						
1 Total pages Schedule F1:	2 FILER NAME JOSE MACIAS		3 Filer ID (Ethics Commission Filers)			
4 Date 7 18 (16	5 Payee name  Constant Conta	~ct				
6 Amount (\$) \$575.64	7 Payee address; City; State; Zip Code					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the lop of this schedule)		utside of Texas. Complete Schedule T. n, TX, officeholder living expense			
<b>9</b> Complete ONLY if direct expenditure to benefit C/OF	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  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	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)		ulside of Texas. Complete Schedule T. I, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED						

# Print **Gredit Amount** \$575.64 USD Cancel **Charge Amount** 10 ■ to 07-12-2016 O Lat. 6 Morrors 🔻 O 106-12-2016 e lizile This artifity was sent to unabij@gmail.gom. Payment - Credit Card - 1401 ny Aersoum's Billing Acetylly mad Bescription