

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

<b>The C/OH Instruction Guide explains how to complete this form.</b>		1 Filer ID (Ethics Commission Filers)	2 Total pages filed:				
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR <i>Mr</i>	FIRST <i>Justin</i>	MI <i>G</i>	<b>OFFICE USE ONLY</b>  Date Received  <div style="border: 1px solid black; padding: 5px; display: inline-block; transform: rotate(90deg); transform-origin: center;">                     RECEIVED                      WALLER COUNTY ELECTIONS                      REGISTRATIONS OFFICE                      2016 JUL -6 PM 1:11                 </div>			
	NICKNAME <i>Beckendorf</i>	LAST	SUFFIX				
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP CODE					
<input type="checkbox"/> Change of Address	<i>3506 Pitts Rd. Katy TX 77493</i>						
<b>5 CANDIDATE / OFFICEHOLDER PHONE</b>	AREA CODE <i>(281)</i>	PHONE NUMBER <i>382-2644</i>	EXTENSION	Date Hand-delivered or Date Postmarked			
<b>6 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR <i>Mr.</i>	FIRST <i>Charles</i>	MI <i>D</i>	Receipt #			
	NICKNAME <i>Wilson</i>	LAST	SUFFIX	Amount \$			
<b>7 CAMPAIGN TREASURER ADDRESS</b> (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;		CITY; STATE; ZIP CODE	Date Processed			
	<i>3408 Ave J Pattison TX 77466</i>			Date Imaged			
<b>8 CAMPAIGN TREASURER PHONE</b>	AREA CODE <i>(281)</i>	PHONE NUMBER <i>375-7894</i>	EXTENSION				
<b>9 REPORT TYPE</b>	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)						
<b>10 PERIOD COVERED</b>	Month	Day	Year	Month	Day	Year	
	<i>1</i>	<i>1</i>	<i>2016</i>	THROUGH	<i>6</i>	<i>30</i>	<i>2016</i>
<b>11 ELECTION</b>	ELECTION DATE			ELECTION TYPE			
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description	
	<i>/</i>	<i>/</i>		<input type="checkbox"/> General	<input type="checkbox"/> Special		
<b>12 OFFICE</b>	OFFICE HELD (if any) <i>Waller County Commissioner</i> <i>Pct. 4</i>			<b>13 OFFICE SOUGHT (if known)</b>			

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME Justin Beckendorf 15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

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

<input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	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)	\$ 9554.61
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,379.90
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 9,906.92
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.

Justin Beckendorf  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Justin Beckendorf, this the 16th day of July, 2016, to certify which, witness my hand and seal of office.

Hilary Avery  
Signature of officer administering oath

Hilary Avery  
Printed name of officer administering oath

Chief Deputy  
Title of officer administering oath

# SUBTOTALS - C/OH

**FORM C/OH  
COVER SHEET PG 3**

<b>19 FILER NAME</b> <i>Justin Beckendorf</i>	<b>20 Filer ID (Ethics Commission Filers)</b>
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21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 8,000.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1,554.61
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 1,379.90
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

1 of 6

2 FILER NAME

Justin Beckendorf

3 Filer ID (Ethics Commission Filers)

4 Date

1/19/16

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MHM Consultant

7 Amount of contribution (\$)

100.00

6 Contributor address; City; State; Zip Code

8810 Stone Village Ln. Houston TX 77040

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

1/19/16

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Ronald Henriksen

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

8831 Stacolle Ln Houston TX 77024

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/6/16

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

David Minze

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

6205 Frenze Rd Katy TX 77492

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/3/16

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

James Rose

Amount of contribution (\$)

200.00

Contributor address; City; State; Zip Code

1707 Sturm Rd. Brookshire TX 77423

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
 If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 of 6

2 FILER NAME:

Justin Beckendorff

3 Filer ID (Ethics Commission Filers)

4 Date

1/18/16

5 Full name of contributor

Jack Miller

out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

250.00

6 Contributor address;

City; State; Zip Code

2019 Spring Cedar Houston TX 77077

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

1/19/16

Full name of contributor

Thomas Staudt

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

7525 FM 723 Richmond TX 77406

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/4/16

Full name of contributor

Raba-Kistner PAC

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

P.O. Box 690287 San Antonio TX 78269

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/16/16

Full name of contributor

Richard Patrick

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

21310 Lochmere Ln. Katy TX 77450

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

**MONETARY POLITICAL CONTRIBUTIONS**

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

3 of 6

2 FILER NAME

Justin Beckendorf

3 Filer ID (Ethics Commission Filers)

4 Date

1/19/16

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Glenn Beckendorf

7 Amount of contribution (\$)

300.00

6 Contributor address; City; State; Zip Code

28423 Morton Rd Katy TX 77493

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

1/19/16

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Carol Gostecnik

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

6632 Diemer Rd Brookshire TX 77423

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/7/16

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Aguirre + Fields LR PAC

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

12999 Jess Pirtle Blvd Sugarland TX 77478

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/18/16

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Walter Sass

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

2707 Autumn Lake Dr. Katy, TX 77450

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
 If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

4 of 6

2 FILER NAME

Justin Beckendorf

3 Filer ID (Ethics Commission Filers)

4 Date

1/19/16

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Costello PAC

6 Contributor address; City; State; Zip Code

9990 Richmond Ave. Ste 480 Houston TX 77042

7 Amount of contribution (\$)

500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

1/7/16

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Terracon PAC

Contributor address; City; State; Zip Code

11555 Cley Rd. Suite 100 Houston TX 77043

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/4/16

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Perdue, Brandon, Fielder, Collins & Matt

Contributor address; City; State; Zip Code

1235 N. Loop W. Ste 600 Houston TX 77008

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/13/16

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Jim Russ

Contributor address; City; State; Zip Code

10555 Vost Office Dr. Houston TX 77042

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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



# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

5 of 6

2 FILER NAME

Justin Beckendorf

3 Filer ID (Ethics Commission Filers)

4 Date

1/6/16

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Randy Randermann

6 Contributor address; City; State; Zip Code

903 Windsor Woods Ln Katy TX 77494

7 Amount of contribution (\$)

500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

1/19/16

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Harish Narayanappa

Contributor address; City; State; Zip Code

5110 Camden Haven Ct Sugarland TX 77479

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/19/16

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Travis Sellers

Contributor address; City; State; Zip Code

20502 Keamier Rd Weller TX 77484

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/19/16

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

David Tinney

Contributor address; City; State; Zip Code

17319 Fairgrove Park Dr Houston TX 77095

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

6 of 6

2 FILER NAME

Justin Beckendorf

3 Filer ID (Ethics Commission Filers)

4 Date

1/19/16

5 Full name of contributor

Ted Krenak

out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

P.O. Box 491 Pattison TX 77466

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

1/8/16

Full name of contributor

Jones + Carter PAC

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

6335 Guffton St. STE 100 Houston, TX 77081

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/15/16

Full name of contributor

ABHR

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

3200 SW Fwy. Ste 2600 Houston TX 77027

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/18/16

Full name of contributor

HALFF Associates - State PAC

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

1201 N. Bowser Rd Richardson TX 75081

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.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <i>1 of 4</i>	
2 FILER NAME: <i>Justin Beckendorf</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date: <i>1/19/16</i>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____): <i>Jim Russ</i>	8 Amount of Contribution \$: <i>194.37</i>	9 In-kind contribution description: <i>Fundraiser Breakfast</i>
7 Contributor address; City; State; Zip Code: <i>10555 Westlake Rd Houston TX 77042</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date: <i>1/19/16</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____): <i>Pam Puckett</i>	Amount of Contribution \$: <i>194.32</i>	In-kind contribution description: <i>Fundraiser breakfast</i>
Contributor address; City; State; Zip Code: <i>9990 Richmond Ave. Ste 450 Houston TX 77042</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
 If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <i>2 of 4</i>	
2 FILER NAME <i>Justin Beckendorf</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <i>1/19/16</i>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Randy Rensdormann</i>	8 Amount of Contribution \$ <i>194.32</i>	9 In-kind contribution description <i>Fundraiser breakfast</i>
7 Contributor address; City; State; Zip Code <i>903 Windsor Woods Ln Katy TX 77494</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date <i>1/19/16</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>David Tinney</i>	Amount of Contribution \$ <i>194.32</i>	In-kind contribution description <i>Fundraiser Breakfast</i>
Contributor address; City; State; Zip Code <i>17319 Fairgrove Park dr. Houston TX 77095</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <i>3 of 4</i>	
2 FILER NAME <i>Justin Beckendoff</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <i>1/19/16</i>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Steve Robinson</i>	8 Amount of Contribution \$ <i>194.32</i>	9 In-kind contribution description <i>Breakfast Fundraiser</i>
7 Contributor address; City; State; Zip Code <i>3200 SW Fwy Ste 2600 Houston TX 77027</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date <i>1/19/16</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Mike Darlow</i>	Amount of Contribution \$ <i>194.32</i>	In-kind contribution description <i>Breakfast Fundraiser</i>
Contributor address; City; State; Zip Code <i>1235 N. Loop W. Ste 600 Houston TX 77008</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <i>4 of 4</i>	
2 FILER NAME <i>Justin Beckendorf</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <i>1/19/16</i>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Bobby Adams</i>	8 Amount of Contribution \$ <i>194.32</i>	9 In-kind contribution description <i>Breakfast Fundraiser</i>
7 Contributor address; City; State; Zip Code <i>1201 N. Bowser Rd. Richardson TX 75081</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date <i>1/19/16</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jones + Carter PAC</i>	Amount of Contribution \$ <i>194.32</i>	In-kind contribution description <i>Breakfast Fundraiser</i>
Contributor address; City; State; Zip Code <i>6335 Gullfong St. Ste 100 Houston TX 77081</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <i>1 of 2</i>	2 FILER NAME <i>Justin Beckendorf</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>1/29/16</i>	5 Payee name <i>Focusing Families</i>
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6 Amount (\$) <i>150.00</i>	7 Payee address; City; State; Zip Code <i>P.O. Box 1053 Hempstead TX 77445</i>
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <i>Donation</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>1/29/16</i>	Payee name <i>Old Katy Originals</i>
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Amount (\$) <i>500.00</i>	Payee address; City; State; Zip Code <i>PO Box 132 Katy TX 77493</i>
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Donation</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>2/18/16</i>	Payee name <i>Katy Sign Shop</i>
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Amount (\$) <i>129.90</i>	Payee address; City; State; Zip Code <i>1812 Ave. D #202 Katy TX 77493</i>
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <i>2 of 2</i>	<b>2</b> FILER NAME <i>Justin Beckendorf</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>4-10-16</i>	<b>5</b> Payee name <i>Royal FFA Ag Club</i>	
<b>6</b> Amount (\$) <i>100.00</i>	<b>7</b> Payee address; City; State; Zip Code <i>unknown</i>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>Donation</i>	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name                      Office sought                      Office held	

Date <i>5/31/16</i>	Payee name <i>Katy ISD Livestock Show</i>		
Amount (\$) <i>500.00</i>	Payee address; City; State; Zip Code <i>6301 S. Stadium Ln Katy TX 77494</i>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Donation</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name                      Office sought                      Office held		

Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name                      Office sought                      Office held		

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