# SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

#### FORM SPAC COVER SHEET PG 1

The SPAC Instruction Guide	e explains how to complete this form.	Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 COMMITTEE NAME	-		OFFICE USE ONLY
coupaign to Ele	ect Trey Dulem W	elle Co. Judge	Date Received
4 COMMITTEE ADDRESS  Change of Address	ADDRESS / PO BOX; APT / SUITE #;  Po Box  Waller	CITY; STATE; ZIP CODE	Received Date Patienarked
TREASURER NAME	MS/MRS/MR FIRST  Matthe  NICKNAME LAST  Menk	SUFFIX	Receipt # Amount \$  Date Processed  Date Imaged
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT  39838 Ad  Hempste	dix Gee Rd  od TX M74	STATE; ZIP CODE
7 CAMPAIGN TREASURER MAILING ADDRESS  Change of Address		suite #; city;	STATE; ZIP CODE
8 CAMPAIGN TREASURER PHONE	921-941	extension 09	
9 REPORT TYPE		day before election	Exceeded \$500 limit  Dissolution (Attach PAC-DR)  10th day after campaign treasurer termination
10 PERIOD COVERED	Month Day Year	THROUGH	Month Day Year (2/31/19
11 ELECTION	ELECTION DATE  Month Day Year Prima  Gene	Description	
	GO T	O PAGE 2	

## SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

#### FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME  (a print to test Trey Dulus Wallen Co Judge 13 Filer ID (Ethics Commission Filers)					
14 COMMITTEE	a deg sour	CANDIDATE/OFFICEHOLDER NAME			
PURPOSE			1		
(Attach lists on plain paper to complete this report if necessary.)	CANDIDATE	Carbett "Try" J D.	ahon III		
SUPPORT (Candidate or Measure)	OFFICEHOLDER	OFFICE SOUGHT (candidate) / OFFICE HELD (Officeholder)	Dee		
OPPOSE (Candidate or Measure)		Waller Co. Ju			
		BALLOT IDENTIFICATION / # ELECTION   Month Day	DATE Year		
ASSIST (Officeholder)	MEASURE	DESCRIPTION			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS	L CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY), UNLESS ITEMIZED	\$		
		AL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS)	\$		
EXPENDITURE TOTALS	2 TOTAL DOLLTICAL EVDENDITUDES OF \$400 OD LEGG LINLEGG ITENIZED &				
	4. TOTAL POLITICA	AL EXPENDITURES	\$ 3939.30		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY NG PERIOD	\$ 1838.70		
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF THE REPORTING PERIOD	\$		
16 AFFIDAVIT					
Swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by metunder Title 15, Election Code.  Signeture of Companying report is true and correct and includes all information required to be reported by metunder Title 15, Election Code.					
Signature of Campaign Treasurer					
Sworn to and subscribed before me, by the said Matthew Meake this the 15th					
Sworm to and sindscribed before me, by the said					
day of, 20_20, to certify which, witness my hand and seal of office.					
Signature of officer adminis	Signature of officer administering oath  Printed name of officer administering oath  Title of officer administering oath				

## **SUBTOTALS - SPAC**

#### FORM SPAC COVER SHEET PG 3

2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS  3. SCHEDULE B: PLEDGED CONTRIBUTIONS  4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION  5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION  6. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION  7. SCHEDULE E: LOANS  8. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS  9. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS  \$  10. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS  \$  11. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD  \$  12. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS  \$  13. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS  \$	9	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
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SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS  SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD  SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH  SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS  SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED  SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED	8.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 3939
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SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS  SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED  \$	12.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 
	13.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
	14.		\$

## 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 Gifl/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out of District
Other (enter a category not listed above)

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/M	Vages/Contract Labor Other (enter	Of District a category not listed above)
	The Instruction Guide explains how to c	omplete this form.	
1 Total pages Schedule F1:	ausein to Elect Tray D	where we alle to Ju	(Ethics Commission Filers)
4 Date 5 20 19	5 Payee hame ty of Wallen	Police Dept	٥
6 Amount (\$)	7 Payee address;	City; Sta	ate; Zip Code
00.00/	1219 Farr St	Waller T	× 77484
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	donation		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officehold	der living expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
7/19/19	Old Washington &	storage	
Amount (\$)	Pavee address:	City; Sta	ate; Zip Code
70.00	31207 Old Washington	n, Waller TX	77484
PURPOSE OF EXPENDITURE	Storage rental expense	Description	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officehold	der living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date •	Payee name		
7/18/19	10 1 . (111.	selfare Charit	1
Amount (\$)	Payee address;	City; Sta	ate; Zip Code
750.00	826 Austin St	Hempstead T	x 77445
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Sponsorslip Donatu	'n	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officehold	der 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	

### POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District

Candidate/Officeholder/Politica			egory not listed above)
Credit Card Payment	The Instruction Guide explains how to o	complete this form.	
1 Total ages Schedule F1:	Carping to Elect Very V	when walls 3 Filer-ID (Et	nics Commission Filers)
4 Date 8 2 19	5 Payle name Hello Heurs	stead	
6 Amount (\$)	7 Payee address;	City; State;	Zip Code
[00.00]	914 Wilking St	Heupsterd Tr	177445
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	donation		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder liv	ving expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name	^	
9/14/19	Waller Country to	air Assoc.	
Amount (\$)	Payee address;	City; State;	Zip Code
(00.00)	21988 FM 359	Hempstead tx	77445
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	donation	Senior Cu	ncheon
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder liv	ving expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
1 ( 25 ( 19	Calvary Court H	otel	
Amount (\$)	Payee address;	City; State;	Zip Code
18,10	200 Century Ct (	ollege Station TX	77840
	Category (See Categories listed at the top of this schedule)	Description	0
PURPOSE OF EXPENDITURE	food   beverage	Judicial G	mterevee
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder liv	ving expense
Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED	
			Davids of 0/00/004

### **POLITICAL EXPENDITURES MADE** FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense
Travel In District

Contributions/Donations Made E Candidate/Officeholder/Politica			District category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1:	2 FILER NAME again to Elect Trey Du  5 Payee pains	le Waller (a Tud	Ethics Commission Filers)
11 25 19	alvary Court	Hotel	
6 Amount (\$)	7 Payee address;	City; State	e; Zip Code
\$6.67	200 Century Ct	College Station -	TX 77840
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	Con
PURPOSE OF EXPENDITURE	tood/beverage	Julicial Con	Melence
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholde	r living expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
12/3/19	Costco		
Amount (\$)	Payee address;	City; State	e; Zip Code
111.16	26960 Northwest fu	y Cypress T.	× 77433
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Giff Award Expense	Gift baskets fo	Christmas Luncheon
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder	r living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
123/19	CVS		
Amount (\$)	Payee address;	City; State	e; Zip Code
295.00	31013 FM 2920	Waller Tx	177484
	Category (See Categories listed at the top of this schedule)	Description Cards to	r County
PURPOSE OF EXPENDITURE	Gitt expense	Gift cards to Christwas	luncheon
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, 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	S SCHEDULE AS NEEDED	
		110	Revised 9/26/201

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

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

Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	-	xpense Travel Out Of District Vages/Contract Labor Other (enter a category)	
- C	The Instruction Guide explains how to c	complete this form.	
1 Total pages Schedule F1:	Carrier to thech I very	Tulion 3 Filer ID (Ethic	s Commission Filers)
4 Date 12 19	5 Payel name Cassic Events Ca	fe	
6 Amount (\$)	7 Payee address;	City; State;	Zip Code
60.20	615 US Bus 290	Heupstrad TX	77445
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 12/31/19	Payee name  Carbett "Trey" J	Dulin III	
Amount (\$)	Payee address;	City; State;	Zip Code
#2278.∞	Po Box 640	Waller TX	77484
PURPOSE OF EXPENDITURE	Cavelidate  Cavelidate	Pescription  for 1/119 to 6	30 (19
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living	expense
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 ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED	