CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.			2 Total pages filed:		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST WY bett	SUFFIX	OFFICE USE ONLY Date Weslier County Elections		
	Tree Dulion	ILL	OCT 29 2018		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / NO BOX; APT / SUITE #; CO		Received		
5 CANDIDATE/	AREA CODE PHONE NUMBER	EXTENSION			
OFFICEHOLDER PHONE	936) 931 9627		Date Hand-delivered or Date Postmarked		
6 CAMPAIGN TREASURER	MS/MRS/MR Nather	, M	Receipt # Amount \$		
NAME	NICKNAME LAST	SUFFIX	Date Processed		
	Menke		Date Imaged		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SI 39838 Addi He was fewer		ZIP CODE		
	Cicapitati				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (979) 971-9409	EXTENSION			
9 REPORT TYPE	January 15 30th day before e		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	9 /28 / (8	THROUGH (O)	Day Year / 18		
11 ELECTION	ELECTION DATE	ELECTION TYPE			
	Month Day Year ☐ Primary [Runoff Other Description Special			
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known	1)		
	Walter County Judg	je Wallen (ounty Judge		
GO TO PAGE 2					

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME arbett	"Tree"	Dukon III	iler 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	COMMITTEE NAME			
3	GENERAL	Cangaign to Elect Trey Dulion hi	aller Couty Judge		
	SPECIFIC	COMMITTEE ADDRESS PO Box 640	,		
		Waller Tx 77484	·		
Additional Pages		Matthew Menke			
	21	COMMITTEE CAMPAIGN TREASURER ADDRESS			
		39838 Addie Geeld Hei	upstead TX 7744		
17 CONTRIBUTION TOTALS	1. TOTAL F	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$		
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$		
EXPENDITURE TOTALS		POLITICAL EXPENDITURES OF \$100 OR LESS, S ITEMIZED	\$		
	4. TOTAL	POLITICAL EXPENDITURES	\$ 975		
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					
	WELL LOWER	I swear, or affirm, under penalty of perju- true and correct and includes all inform			
KELLI LOWERY Notary Public, State of Texass Comm. Expires 02-05-2022 Notary ID 682751-6					
					- minim
AFFIX NOTARY STAMP/SEALABOVE					
Sworn to and subscribed before me, by the said, this the, this the,					
day of October, 20 B, to certify which, witness my hand and seal of office.					
Sille Young KERI LOWERY Notary					
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath					

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILEANAME 20 Filer ID (Ethics Commission arbett "Trey" J Duhan III				
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT			
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$			
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$			
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$			
4. SCHEDULE E: LOANS	\$			
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$			
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$			
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$			
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$			
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 975			
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$			
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$			
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$			

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense **Event Expense** Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Consulting Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel In District Gift/Awards/Memorials Expense Contributions/Donations Made By Printing Expense Travel Out Of District Salaries/Wages/Contract Labor Legal Services Candidate/Officeholder/Political Committee Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages/Schedule G: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 4 Date 5 Payee name 7 Payee address; State Zip Code Amount Reimbursement from political contributions intended (a) Category (See Categories listed at the top of this schedule) (b) Description 8 PURPOSE Check if travel outside of Texas. Complete Schedule T. OF Neinburesement of 25% office Check if Austin, TX, officeholder living expense **EXPENDITURE** Candidate / Officeholder name Office held Complete ONLY if direct Office sought expenditure to benefit C/OH Payer name Zip Code Pavee address: 00.00 Reimbursement from political contributions intended See Categories listed at the top of this schedule) (b) Description **PURPOSE** Check if travel outside of Texas. Complete Schedule T. OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Office sought Complete ONLY if direct Candidate / Officeholder name Office held expenditure to benefit C/OH Payee name State; Zip Code Payee address; Amount political contributions intended (b) Description Category (See Categories listed at the top of this schedule) **PURPOSE** Check if travel outside of Texas. Complete Schedule T. OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED