

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 Filers)

2 Total pages filed:

OFFICE USE ONLY

Date Received

Date Hand-delivered or Postmarked

Receipt #

Amount

Date Processed

Date Imaged

RECEIVED
WALLER COUNTY ELECTIONS
ADMINISTRATIONS OFFICE
2015 JAN 15 AM 9:45

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR FIRST MI
Mr. Carbett J.
NICKNAME LAST SUFFIX
Trey Duhon III

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS (NO PO BOX) APT / SUITE # CITY STATE ZIP CODE
P.O. Box 640
Waller, TX 77484
 change of address

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION
936) 931-9627

6 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI
Mr. Matthew K.
NICKNAME LAST SUFFIX
Menke

7 CAMPAIGN TREASURER ADDRESS (residence or business)

STREET ADDRESS (NO PO BOX PLEASE) APT / SUITE # CITY STATE ZIP CODE
39838 Addie Gee
Hempstead TX 77445

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
(979) 921-9409

9 REPORT TYPE

January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only)
 July 15 8th day before election Exceeded \$500 limit Final report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year THROUGH Month Day Year
10 / 26 / 14 THROUGH 12 / 31 / 14

11 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year Primary Runoff General Special
11 / 04 / 14

12 OFFICE

OFFICE HELD (if any)

none

13 OFFICE SOUGHT (if known)

Waller County Judge

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME Carbett "Trey" J. Duhon III

15 ACCOUNT # (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
<input type="checkbox"/> GENERAL	<u>Campaign to Elect Trey Duhon County Judge</u>
<input checked="" type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
	<u>P.O. Box 640 Waller, TX 77484</u>
	COMMITTEE CAMPAIGN TREASURER NAME
	<u>Matthew Menke</u>
	COMMITTEE CAMPAIGN TREASURER ADDRESS
	<u>39838 Addie Gee, Hempstead TX 77445</u>

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) \$ 0

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 0

4. TOTAL POLITICAL EXPENDITURES \$ 1523.42

CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 0

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.

[Handwritten Signature]

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Carbett J. Duhon III, this the 14th day of January, 20 15, to certify which, witness my hand and seal of office.

[Handwritten Signature]
Signature of officer administering oath

Sheila Mundy
Printed name of officer administering oath

Title of officer administering oath

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:	2 FILER NAME <i>Carbett "Trey" J. Dehon III</i>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <i>10/27/14</i>	5 Payee name <i>Facebook</i>	
6 Amount (\$) <i>541.41</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <i>1 Hackerway Menlo Park, CA 94025</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Advertising/Marketing</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>Reimbursement for Facebook Ads</i> <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Date <i>10/31/14</i>	Payee name <i>Facebook</i>	
Amount (\$) <i>62.01</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>1 Hackerway Menlo Park, CA 94025</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Advertising/Marketing</i>	Description (If travel outside of Texas, complete Schedule T) <i>Reimbursement for Facebook Ads</i> <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense

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)

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1 Total pages Schedule G:	2 FILER NAME Carbett "Trey" J. Duhon III	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 11/1/14	5 Payee name Carbett "Trey" J. Duhon III
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6 Amount (\$) 400 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 640 Waller, TX 77484
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) office overhead	(b) Description (If travel outside of Texas, complete Schedule T) Reimbursement of 1/2 Rent of October <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Date 11/1/14	Payee name Carbett "Trey" J. Duhon III
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Amount (\$) 60 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 640 Waller, TX 77484
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) office overhead	Description (If travel outside of Texas, complete Schedule T) Reimbursement of 1/2 cell phone expense <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Date 12/1/14	Payee name Carbett "Trey" J. Duhon III
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Amount (\$) 400 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 640 Waller, TX 77484
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) office overhead	Description (If travel outside of Texas, complete Schedule T) Reimbursement of 1/2 Rent of December <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Date 12/1/14	Payee name Carbett "Trey" J. Duhon III
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Amount (\$) 60 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 640 Waller, TX 77484
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) office overhead	Description (If travel outside of Texas, complete Schedule T) Reimbursement of 1/2 cell phone expense <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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