

# 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:**

**3 CANDIDATE / OFFICEHOLDER NAME**

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

**OFFICE USE ONLY**

Date Received  
14 OCT 27 PM 4: 26  
FILED FOR RECORD  
DERBIE HOLLAN  
COUNTY CLERK  
WALLER COUNTY, TX.  
DEPUTY

**4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS**

ADDRESS / 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  
09 26 / 14 THROUGH 10 25 / 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

GENERAL

SPECIFIC

COMMITTEE NAME

Campaign to Elect Trey Duhon County Judge

COMMITTEE ADDRESS

P.O. Box 640  
Waller, TX 77484

COMMITTEE CAMPAIGN TREASURER NAME

Matthew Menke

COMMITTEE CAMPAIGN TREASURER ADDRESS

39838 Addie Gee, Hempstead TX 77445

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

\$ 377.76

4. TOTAL POLITICAL EXPENDITURES

\$ 978.42

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.

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 27<sup>th</sup> day of October, 20 14, to certify which, witness my hand and seal of office.

Sheila Mundy  
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 <b>Carbett "Trey" J. Duhan III</b>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <b>10/1/14</b>	5 Payee name <b>Carbett "Trey" J. Duhan III</b>
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6 Amount (\$) <b>400</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <b>P.O. Box 640 Waller, TX 77484</b>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <b>Office overhead</b>	(b) Description (If travel outside of Texas, complete Schedule T) <b>Reimbursement of 1/2 Rent of October</b> <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Date <b>10/1/14</b>	Payee name <b>Carbett "Trey" J. Duhan III</b>
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Amount (\$) <b>60</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <b>P.O. Box 640 Waller, TX 77484</b>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Office overhead</b>	Description (If travel outside of Texas, complete Schedule T) <b>Reimbursement of 1/2 Cell Phone expense</b> <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	--	--

Date <b>10/25/14</b>	Payee name <b>Facebook</b>
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Amount (\$) <b>518.42</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <b>1 Hacker Way Menlo Park, CA 94025</b>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising/Marketing</b>	Description (If travel outside of Texas, complete Schedule T) <b>Reimbursement for Facebook Ads</b> <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Date	Payee name
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Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code
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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
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED