# SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

### FORM SPAC COVER SHEET PG 1

The SPAC Instruction Guide explains how to complete this form.  1 Filer ID (Ethics Commission Filers)  2 Total pages filed:				
3 COMMITTEE NAME		OFFICE USE ONLY		
1 + 1	tot Trey Dukon Waller Co. Judge	Date Received		
4 COMMITTEE	ADDRESS / PO BCX; APT / SUITE #; CITY; STATE; ZIP CODE	Waller County Elections		
ADDRESS	Po Box 640	FEB 2 6 2018		
Change of Address	Waller TX 77484	Received		
		Date Hand-delivered or Date Postmarked		
5 CAMPAIGN TREASURER NAME	MS/MRS/MR MATHOW K	Receipt # Amount \$  Date Processed		
	NICKNAME SUFFIX	Date Imaged		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE;  39838 Addie Gec Rd  Hempstead TX 770	ZIP CODE		
7 CAMPAIGN TREASURER MAILING ADDRESS  Change of Address	STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE;	ZIP CODE		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION  (979) 921-9409			
9 REPORT TYPE	January 15  July 15  Sth day before election  Runoff	Exceeded \$500 limit  Dissolution (Attach PAC-DR)  10th day after campaign treasurer termination		
10 PERIOD COVERED	Month Day Year  /26 / 18  THROUGH	Month Day Year 2 /24/18		
11 ELECTION	ELECTION DATE  Month Day Year Primary Runoff Other Description  General Special			
GO TO PAGE 2				

### SPECIFIC-PURPOSE COMMITTEE REPORT: **PURPOSE AND TOTALS**

#### FORM SPAC **COVER SHEET PG 2**

12 COMMITTEE NAME	+ 0 (	· · · · · · · · · · · · · · · · · · ·	D (Ethics Commission Filers)
eungen to Elec	t Vey Dulion	Walter Co. Judge	
14 COMMITTEE PURPOSE		CANDIDATE/OFFICEHOLDER NAME	
(Attach lists on plain paper to complete this report if necessary.)	CANDIDATE	Carbett "Trey" J Dul	ion III
SUPPORT (Candidate or Measure)	OFFICEHOLDER	OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)	1 0
OPPOSE (Candidate or Measure)		Waller County	Judge
ACCICT	□ MEAGURE	BALLOT IDENTIFICATION /# ELECTION Month Day	DATE Year
ASSIST (Officeholder)	MEASURE	DESCRIPTION	
15 CONTRIBUTION TOTALS		CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
		AL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS)	9636.87
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 150
	4. TOTAL POLITICAL EXPENDITURES		\$ 7054.62
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$20,534.25		
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF THE REPORTING PERIOD	\$
Notary Pu	ETT J DUHON III blic, State of Texas xpires 11-12-2021 ID 12542580-5	I swear, or affirm, under penalty of perjury, the report is true and correct and includes all in the reported by the under Title 15, Election Consideration of Campaign Treations of Campaign Treations.	formation required to
AFFIX NOTARY STAMP / SEA	ALABOVE	1 . AA 1 AA	7/:0
Sworn to and subscribed		o certify which, witness my hand and seal of office	this the 26th
day of Tev ( viii)		rbett J Dulin III	Votary
Signature of officer adminis	stering oath Printed	d name of officer administering oath  Title of o	officer administering oath
	1600	were othics state ty us	Revised 9/8/20

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Forms provided by Texas Ethics Commission

## SUBTOTALS - SPAC

#### FORM SPAC COVER SHEET PG 3

7 <sup>17</sup>	committee NAME  pain to Elect Trey Duhon Waller Co Judge  18 Filer ID (Ethics Cor	mmission Filers)
19	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$6,136.87
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	\$6,606.22
9. ,	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 430.40
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 TO A BUSINESS OF C/OH	\$
13.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
14.	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. 3 Filer ID (Ethics Commission Filers) FILER NAME 7 Amount of contribution (\$) #2,000 Principal occupation / Job title (See Instructions) Amount of contribution (\$) Full name of contributor out-of-state PAC (ID#: ark, Waller Tx 77484 Principal occupation / Job title (See Instructions) Amount of contribution (\$) Date Principal occupation / Job title (See Instructions) Amount of contribution (\$) Date Employer (See Instructions) Principal occupation / Job title (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 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. FILER NAME 3 Filer ID (Ethics Commission Filers) 7 Amount of contribution (\$) \$2,500.00 30142 Southern Sky Brookshire Tx 77423 8 Principal occupation / Job title (See Instructions) Amount of contribution (\$) Full name of contributor Date James Heitmann DVM Contributor address; City; State; Zip Code 2660 Gratchouse Ln Hempstead Tx 77495 #1,000.00 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of contribution (\$) Full name of contributor out-of-state PAC (ID#: Date Zip Code Contributor address; City; State: Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of contribution (\$) Date Full name of contributor out-of-state PAC (ID#: City; State; Zip Code Contributor address; Employer (See Instructions) Principal occupation / Job title (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.

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

Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME 1 Total pages Schedule F1: augaign to 5 Payee name 4 Date 7 Pavee address: 6 Amount (b) Description (a) Category (See Categories listed at the top of this schedule) 8 Check if travel outside of Texas. Complete Schedule T. PURPOSE Check if Austin, TX, officeholder living expense OF **EXPENDITURE** Office held Candidate / Officeholder name Office sought 9 Complete ONLY if direct expenditure to benefit C/OH Date Amount (\$) 892 Mack Washington, Hearpstead TX 77445 #500 Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. PURPOSE Contribution/Donation Check if Austin, TX, officeholder living expense EXPENDITURE Office held Office sought Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Date ace DOO City; State; Zip Code Amount (\$) Hacker Way, Menlo Park, CA 94025 Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. PURPOSE Check if Austin, TX, officeholder living expense Advertising Expense EXPENDITURE Office held Office sought Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH 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
Contributions/Donations Made By Candidate/Officeholder/Political Committee Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

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

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

Credit Card Payment	The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1:	P FILER NAME  Least Trey Duha Wallan & Judge  3 Filer ID (Ethics Commission Filers)		
4 Date 22 18	5 Payedname Knights of Columbus # 12672		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
# (00	22892 Mack Washington Hempstead TX 77445		
8	(a) Category (See Categories listed at the top of this schedule) (b) Description		
PURPOSE	Check if travel outside of Texas. Complete Schedule T.		
OF EXPENDITURE	Contribution Direction Check if Austin, TX, officeholder living expense		
EXTENSIONE			
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Office sought Office held		
Date	Payee name		
2 (7(18	Classic Events Cafe		
Amount (\$)	Payee address; City; State; Zip Code		
\$30.05	615 Bus. Hwy 290 N, Hempstead TX 77445		
	Category (See Categories listed at the top of this schedule)  Description		
PURPOSE	Check if travel outside of Texas. Complete Schedule T.		
OF EXPENDITURE	Food Bevarge Expense		
Complete ONLY if direct expenditure to benefit C/O	Candidate / Office holder name Office sought Office held H		
Date	Payee name		
2/9/18	Reba's Village		
Amount (\$)	Payee address; City; State; Zip Code		
\$9.20	208 E. Austin St., Gidlings, TX 78942		
	Category (See Categories listed at the top of this schedule)  Description		
DUDDOCE	Check if travel outside of Texas. Complete Schedule T.		
PURPOSE OF	Food Beverage Expense Check if Austin, TX, officeholder living expense		
EXPENDITURE			
	Condidate / Officeholder name Office sought Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officenoider name		
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

## POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Solicitation/Fundraising Expense Transportation Equipment & Related Expense Event Expense Loan Repayment/Reimbursement Advertising Expense Accounting/Banking Office Overhead/Rental Expense Fees Food/Beverage Expense Polling Expense Travel In District Consulting Expense Gift/Awards/Memorials Expense Printing Expense Travel Out Of District Contributions/Donations Made By Other (enter a category not listed above) Legal Services Salaries/Wages/Contract Labor Candidate/Officeholder/Political Committee Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME 1 Total pages Schedule 5 Payee name 4 Date City; State; Zip Code 7 Payee address; Main St. Waller Tx 77484 33.00 (b) Description (a) Category (See Categories listed at the top of this schedule) 8 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Check if Austin, TX, officeholder living expense Advertisin Expense OF EXPENDITURE Office held Office sought ·Candidate / Officeholder name 9 Complete ONLY if direct expenditure to benefit C/OH Pavee name utoo, Com City: State; Zip Code Amount (\$) Way, San Mateo CA 94403 19,00 Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Fundrasing Expense Check if Austin, TX, officeholder living expense **EXPENDITURE** Office held Office sought Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Payee name Date City; State; Zip Code Amount (\$) 2906 us 290, Waller TX 77484 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 PURPOSE advertising Expense **EXPENDITURE** Office held Office sought Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED