Texas Ethics Commission

Austin, Texas 78711-2070

(512) 463-5800 (TDD 1-800-735-2989)

APPOINTMENT OF A CAMPAIGN TREASURER BY A SPECIFIC-PURPOSE COMMITTEE

FORM STA PG 1

	Se	1 Total pages filed:			
	COMMITTEE NAME	BACK The Bullog Bond PAC	OFFICE USE ONLY		
-	COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 20727 New Kentucky	Date Received		
-	CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MI MPS. Deneille Lynn NICKNAME LAST SUFFIX	HD/PM		
	CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT/SUITE #; CITY; STATE; ZIP CODE 3. D73.7 Mew Kentucky Vig Nockley TY 77447	Date Processed		
-	MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE			
-	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (1)3) 907 - 9/94			
	PERSON APPOINTING TREASURER	FIRST MI LAST Elizabeth Nicho.	IS MRS		
9 :	SIGNATURE	I understand that I have been appointed as the campaign treas committee and that I am responsible for filing all required report to fines for failure to do so. I am aware of the restrictions in the contributions from corporations and labor organizations.	rts and that I may be subject		
	ASSISTANT CAMPAIGN TREASURER (see instructions)	FIRST MI LAST	SUFFIX		
	ASSISTANT CAMPAIGN TREASURER ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE			
	ASSISTANT CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION			
	CONTINUE ON PAGE 2				

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(512) 463-5800

SPECIFIC-F	URPOSE COMMITTEE:	FORM STA	
PURPOSEAND	MODIFIED REPORTING DECLARATION	PG 2	
13 COMMITTEE NAM	he Bulldog Bond PAC	<u>^</u>	
14 COMMITTEE PURPOSE	CANDIDATE / OFFICEHOLDER NAME		
SUPPORT CANDIDATE			
OPPOSE CANDIDATE			
ASSIST OFFICEHOLDER			
	BALLOT IDENTIFICATION OF MEASURE / #	ELECTION DATE	
SUPPORT MEASURE	WISD Bond Mensure	Month / Day / Year 11 / 3 / 2015	
OPPOSE MEASURE	School Band		
15 MODIFIED REPORTING DECLARATION	COMPLETE THIS SECTION ONLY IF Y MODIFIED REPORTI		
	••This declaration must be filed no later than the 30th day before the first election to which the declaration applies. ••		
	••The modified reporting declaration is valid for one election cycle only. •• (An election cycle includes a primary election, a general election, and any related runoffs.)		
	The committee does not intend to accept more than \$500 in political contributions or make more than \$500 in political expenditures (excluding filing fees) in connection with any future election within the election cycle. The committee understands that if either one of those limits is exceeded, the committee's campaign treasurer will be required to file pre-election reports and, if necessary, a runoff report.		
	Year of election(s) or election cycle to which declaration applies	Former e of Campaign Treasurer	
	ATTACH ADDITIONAL COPIES OF THIS FORM AS	NEEDED	

SPECIFIC-P CAMPAIGN	FORM SPAC COVER SHEET PG 1		
The SPAC Instruction Guide	2 Total pages filed:		
3 COMMITTEE NAME		OFFICE USE ONLY	
BACK the	Bulldog Bond PAC	Date Received	
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #: CITY: STATE; ZIP CODE 20727 1000 Kenfucky VIG,	CI -5	
Change of Address	Hockley TX 77447	Date Hand-delivered or Date Postmarked	
5 CAMPAIGN TREASURER	MS/MRS/MR FIRST MI	Receipt # Amount \$	
NAME	Alks. Venerile Lynn	· Date Processed	
	NICKNAME LAST SUFFIX	Date Imaged	
6 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE;	ZIP CODE	
TREASURER STREET ADDRESS (Residence or Business)	20127 New Kentucky 119		
	HOCKLOY TX 7744	47	
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE; 20727 New Kenfucky U	zip code	
Change of Address	Hockley TX 2744	47	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (113) 907 - 9194		
9 REPORT TYPE	January 15 30th day before election	Exceeded \$500 limit Dissolution (Attach PAC-DR) 10th day after campaign treasurer termination	
10 PERIOD	Month Day Year	Month Day Year	
COVERED	9 /10 / 2015 THROUGH	10 / 5 / 2015	
11 ELECTION	ELECTION DATE ELECTION TY Month Day Year Primary Runoff Other 11 /3 /2015 General Special		
GO TO PAGE 2			
Forms provided by Texas Ethi	cs Commission www.ethics.state.tx.us	Revised 9/8/2015	

SPECIFIC-PL PURPOSE AI		MITTEE REPORT:	FOF COVER SH	RM SPAC EET PG 2
12 COMMITTEE NAME	Bulldog	Bond PAC	13 Filer ID (Ethics 47-50	Commission Filers)
14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.)		CANDIDATE/OFFICEHOLDER NAME		
SUPPORT (Candidate or (Measure)	OFFICEHOLDER	OFFICE SOUGHT (candidate) / OFFICE HELD (of	ïceholder)	
OPPOSE (Candidate or Measure)		BALLOT IDENTIFICATION / #	ELECTION DATE	
(Officeholder)	MEASURE	DESCRIPTION TO help prass the	1011th Day Yea 0/3/201 WISD Bo	5
15 CONTRIBUTION TOTALS	1. TOTAL FOLLIONE CONTINUE OF CONCILIENT THE TIME			D
EXPENDITURE TOTALS	OTHER THAN PL	AL CONTRIBUTIONS EDGES. LOANS, OR GUARANTEES OF LOA . EXPENDITURES OF \$100 OR LESS, UNLE AL EXPENDITURES		0 D
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			600,00
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS A	IS OF THE \$	0
16 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. NANCY G. LONGO MY COMMISSION EXPIRES October 9, 2018 October 9, 2018				
AFFIX NOTARY STAMP/SEALABOVE Sworn to and subscribed before me, by the said Deneile Fourness, this the 574				
Sworn to and subscribed before me, by the said <u>Sterreite</u> <u>routine</u> , this the <u>ster</u> day of <u>ctobck</u> , 20_/S_, to certify which, witness my hand and seal of office. <u>Autopck</u> Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath				

Forms provided by Texas Ethics Commission

Revised 9/8/2015

S	SUBTOTALS - SPACFORM SPACCOVER SHEET PG 3				
17	COMMITTEE NAME BACK the Bulldog Bond Pipe 18 Filer ID (Ethics Com 417-5014				
19	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT			
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 5600,00			
2.	SCHEDULE A2 : NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ D			
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ D			
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ D			
5.	SCHEDULE C2 : NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ D			
6.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATON OR LABOR ORGANIZATION	\$			
7.	SCHEDULE E: LOANS	\$ ()			
8.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ D			
9.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ D			
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	\$ 0			
13.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ ()			
14.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	* O			

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MONETARY POLITICAL CONTRIBUTIONS

1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 47 - 5015 805 2 FILER NAME, 2 FILER NAME, BACK the Bulldog Band PAC 4 Date 5 Full name of contributor out-of-state PAC (ID#: 9/10/3015 6 Contributor address; City: State: Zip Coda 8 0737 New Kentucky Ulg 775 7 Amount of contribution (\$ 100.00 8 Principal occupation / Job title (See Instructions Employer (See Instructions) Amount of contribution (\$) Full name of contributor out-of-state PAC (ID# Date TER Contracting LLC Contributor address: 128 Ducskin DR. City; State; Zip Code 200.00 MPE TX 78006 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of contribution (\$) out-of-state PAC (ID#: Date Full name of contributor Andrew & KURTH TX PAC 1000,00 Contributor address; City: State; Zip Code Houston, TX 72002 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of contribution (\$) Date Full name of contributor out-of-state PAC (ID#: LISA PIENCE Contributor address; 21906 Decision City; State; Zip Code 1000,00 Principal occupation / Job title (See Inst ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1				
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:			
2 FILER NAME, BACK THE BUILDOG BOND PAC	3 Filer ID (Ethics Commission Filers) 47-5015805			
4 Date 5 Full name of contributor □ out-of-state PAC (ID#:) 9/24/ 0/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1	7 Amount of contribution $($)$ 200,60			
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instruct	ions)			
Date Full name of contributor [] out-of-state PAC (ID#:) Green Lawn Care Service	Amount of contribution (\$)			
2015 P.O. BOX 454 Brenham, TX 77834	1000,00,			
Principal occupation / Job title (See Instructions) Employer (See Instructions)	ions)			
Date Full name of contributor out-of-state PAC (ID#:) 9/24/ Rodgens Momist Grover 20/5 S718 Westheimen Ste 1200 Rodsford, TX 77057 Principal occupation / Job title (See Instructions)	Amount of contribution (\$) $500e^{00}$ ions)			
DateFull name of contributor \Box out-of-state PAC (ID#:) $9/24/$ $NNHNQSTPASSTAGE$ 2015 8955 $Raty Fwy$ $Stello5$ $A005H0N, TX, 77034$ Principal occupation / Job title (See Instructions)	Amount of contribution (\$) 500.77			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NE If contributor is out-of-state PAC, please see instruction guide for additional				

MONET	ARY POLITICAL CONTRIBUTIONS	SCHEDULE A1	
The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:	
2 FILER NAME,	K the Bulldog Bond PAC	3 Filer ID (Ethics Commission Filers) 47-5015805	
4 Date	5 Full name of contributor [] out-of-state PAC (ID#:)	7 Amount of contribution (\$)	
2015	6 Contributor address; City; State; Zip Code	500,00	
	Waller TX 77484		
B Principal occu	pation / Job title (See Instructions) 9 Employer (See Instruc	(IIONS)	
Date	Full name of contributor [] out-of-state PAC (ID#:)	Amount of contribution (\$)	
9/29/ 2015	Full name of contributor I out-of-state PAC (ID#:) BRYAN LOWE Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code 24303 Bot Kins Rd Hockley TK 77447 Dation / Job title (See Instructions) Employer (See Instructions)	100.00	
Principal occup	bation / Job title (See Instructions)	tions)	
Date 9/29/ 2015	Full name of contributor out-of-state PAC (ID#:) William F. Fendleg Contributor address; City: State; Zip Code 29442 Heggar Rd.	Amount of contribution (\$) 500,70	
Principal occupation / Job title (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)	
	Contributor address; City; State; Zip Code		
Principal occup	Deation / Job title (See Instructions) Employer (See Instructions)	tions)	
		<u> </u>	
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS N If contributor is out-of-state PAC, please see instruction guide for additional		

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LOANS			SCHEDULE E	
The	1 Total pages Schedule E:			
2 FILER NAME BACK +	3 Filer ID (Ethics Commission Filers) 47-50/5805			
4 TOTAL OF UN	ITEMIZED LOANS		\$ 3309,23	
5 Date of Ioan 9-29-20/5	7 Name of lender Dout-ot-state Elizabeth Nichtbes		9 Loan Amount (\$) 3309, 23	
6 Is lender a financial Institution?	8 Lender address; City; 24503 Old Window	State; Zip Code	10 Interest rate	
Y (N)	Wockley TX 7	7447	11 Maturity date	
12 Principal occupatio	n / Job title (See Instructions)	13 Employer (See Instructions)		
14 Description of Colla	ateral	15 Check if personal funds were (See Instructions)	deposited into political account	
16 GUARANTOR INFORMATION	17 Name of guarantor		19 Amount Guaranteed (\$)	
not applicable	18 Guarantor address; City; State; Zip Code			
20 Principal Occupat	ion (See Instructions)	21 Employer (See Instructions)		
Date of loan	Date of Ioan Name of lender Out-of-state PAC (ID#:)		Loan Amount (\$)	
ls lender a financial	Lender address; City;	State; Zip Code	Interest rate	
Institution? Y N			Maturity date	
Principal occupatio	Principal occupation / Job title (See Instructions) Employer (See Instructions)			
(See		Check if personal funds were (See Instructions)	deposited into political account	
GUARANTOR INFORMATION			Amount Guaranteed (\$)	
not applicable	Guarantor address; City;	State; Zip Code		
Principal Occupation	on (See Instructions)	Employer (See Instructions)	L	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.				

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