CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

P.O. Box 12070

FORM C/OH COVER SHEET PG 1

		1 ACCOUNT#	2 Total pages filed:
The C/OH Instruction G	Buide explains how to complete this form.	(Ethics Commission Filers)	
3 CANDIDATE /	MS/MRS/MR FIRST	MI	OFFICE USE ONLY
OFFICEHOLDER NAME	Mr. Floyd	alenn	Date Received 2013 AN CELL
	Beckendorff APPLISHTE# CITY;	STATE; ZIP CODE	- 98 L
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS change of address	ADDRESS / PO BOX; APT/SUITE#; CITY; 28423 Morton Rd Katy, Tx 77493		Date Hand-delivered or Postmarked Receipt # Amount
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (281) 391-8640	EXTENSION	Date Imaged
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST Mr Gary NICKNAME LAST Smith	SUFFIX	
7 CAMPAIGN TREASURER ADDRESS (residence or business)	street ADDRESS (NO POBOXPLEASE); APT/SUITE#, 34523 Joseph Roa. Hempstead, Tx 7	d	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (936) 931-9111	EXTENSION	
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	
11 ELECTION	Month ELECTION DATE Day Year Primary	Runoff C	General Special
12 OFFICE	OFFICE HELD (if any) Waller County Judge	13 OFFICE SOUGHT (If kno	wn)
	GOTOP	AGE 2	
			Davised 00/29/2011

CANDIDATE / OFFICEHOLDER REPORT: **SUPPORT & TOTALS**

P.O. Box 12070

FORM C/OH COVER SHEET PG 2

14 C/OH NAME	Glenn	Beckendorff	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 OF 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	COMMITTEE NAME			
	SPECIFIC	COMMITTEE ADDRESS			
additional pages		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRESS .			
17 CONTRIBUTION TOTALS	1. TOTAL PLEDGE	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THA ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ	s 14,800.00		
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 14,800.00		
EXPENDITURE TOTALS	3. TOTAL F	OLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITE	MIZED \$		
	4. TOTAL	POLITICAL EXPENDITURES	\$ 4,104.54		
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST ORTING PERIOD	\$ 4,104.54 \$ 28,882.34		
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF AY OF THE REPORTING PERIOD	THE \$		
18 AFFIDAVIT			f perjury, that the accompanying report		
KIM MACPHERSON Notary Public State of Texas My Comm. Exp. 11-07-2015 Signature of Candidate of Officeholder					
AFFIX NOTARY STAM		me, by the said <u>Floyd Glenn Beck</u>	Lendorff, this the		
day	of <u>Sanuar</u>	y, 20 13 , to certify which, witness	my hand and seal of office.		
Kim Mack Signature of officer adm	helser inistering oath	Kim MacPherson Printed name of officer administering oath	Notary Public Title of officer administering oath		



. .

P.O. Box 12070

SCHEDULE A

			1 Total pages Sche	odule A:
The I	nstruction Guide explains how to complete this	form.		10
2 FILER NAME	Glenn Beckendorff		3 ACCOUNT # (Et	thics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
11/13/10	6 Contributor address; City; State; Zip Code 11627 POSSUM Hollow Ln.		500.00	
	Houston, Tx 77065		(If travel outside	of Texas, complete Schedule T)
9 Principal occup	eation / Job title (See Instructions)	10 Employer (See	Instructions)	•
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
11/13	Contributor address; City; State; Zip Code 9511 Sam Houston Pkwy N		500.00	
	Houston, Tx 77064		(If travel outside	of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See		
Date	Full name of contributor out-of-state PAC (ID#:_		Amount of contribution (\$)	In-kind contribution description (if applicable)
11/13	Contributor address; City; State; Zip Code 4715 Menlo Park Dr. Sugar Land, Tx 77479		500.00	
	Houston, Tx 77479		(If travel outside	of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See	Instructions)	
Date	Full name of contributor out-of-state PAC (ID#_F, Paul Celauro		Amount of contribution (\$)	In-kind contribution description (if applicable)
11/13	Contributor address; City; State; Zip Code 5326 Mc Culloch Circle		500.00	1
	Houston, Tx 77056		(If travel outside	of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See		
Date	Full name of contributor out-of-state PAC (ID#_ James Moehlman)	Amount of contribution (\$)	In-kind contribution description (if applicable)
11/13	Contributor address; City; State; Zip Code 6211 North Woods Ln.		250.00	1
	Katy, Tx. 77494		(If travel outside	e of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

P.O. Box 12070

SCHEDULE A

esta na a v				
~ .	nstruction Guide explains how to complete this	form.	1 Total pages Sche	edule A:
The Instruction Guide explains now to complete this term			7 -	
2 FILER NAME			3 ACCOUNT # (Et	thics Commission Filers)
Flord	Glenn Beckendorff			a la biad contribution
4 Data	5 Full name of contributor Qut-of-state PAC (ID#:		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
, ,	Jeff Collins			
11/13/12	Jeff Collins 6 Contributor address; City; State; Zip Code 13510 Cahill Lane		250,00	
	Cypress, Tx 77429		(If travel outside	of Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See	Instructions)	at.
	Full name of contributor ut-of-state PAC (ID#	1	Amount of	In-kind contribution
Date	Republic Services Inc., E.	mployer PAC	contribution (\$)	description (if applicable)
11/13	Contributor address; City; State; Zip Code 18500 North Allied Way		500.00	,
	Phoenix AZ. 85054			(Cabadula T)
		- · · · · /0		of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See	instructions)	
Date	Full name of contributor ut-of-state PAC (ID#:_		Amount of	In-kind contribution description (if applicable)
,	Randy Randermann		contribution (\$)	description (ii applicable)
11/13	Contributor address; City; State; Zip Code		500.00	!
	Windsor Woods Lane			1
	Katy, 1x 77494		(If travel outside	of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See	Instructions)	
	1		Amount of	In-kind contribution
Date	Full name of contributor out-of-state PAC (ID#:_		Amount of contribution (\$)	description (if applicable)
11/13	Steven Alvis			1
11113	Contributor address; City; State; Zip Code		500.00	1
	8827 Sam Houston PKWY.			1
	Ste, 200			The second second
	Houston 1x 77040			of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See	Instructions)	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of	In-kind contribution
Date			contribution (\$)	description (if applicable)
11/13	Contributor address; City; State; Zip Code		500.00	
	P.O. Box 649			1
	Simonton, Tx 77476		(If travel outside	e of Texas, complete Schedule T)
Principal occu	upation / Job title (See Instructions)	Employer (See		

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POLITICAL CONTRIBUTIONS	
OTHER THAN PLEDGES OR LOANS	3

P.O. Box 12070

SCHEDULE A

The	Instruction Guide explains how to complete this	form.	1 Total pages Scho	edule A:
			3 ACCOUNT # (Et	thics Commission Filers)
2 FILER NAME	11 7 1 100			
Hoyd	Glenn Seckendor ff 5 Full name of contributor □ out-of-state PAC(ID#		7 Amount of	8 In-kind contribution
4 Date	5 Full name of contributor out-of-state PAC(ID#:		contribution (\$)	description (if applicable)
11/13/12	ABHR			
11113/1-	ABHR 6 Contributor address; City; State; Zip Code 3200 S.W. Frwy Ste. 3		500.00	
	3200 S.W. Frwy Ste. 8	1600		
	Houston, Tx. 77027		(If travel outside	of Texas, complete Schedule T)
Principal occur	pation / Job title (See Instructions)	10 Employer (See I	nstructions)	15.
3 Principal occup				
Date	Full name of contributor ut-of-state PAC (ID#:)	Amount of	In-kind contribution
,	Bryan Jordan		contribution (\$)	description (if applicable)
11/13	Contributor address; City; State; Zip Code		500.00	
	6335 Gulfton Dr.		500.	1
	1 100 100 100 100 100 100 100 100 100 1			1
	Houston, Tx 77801		(If travel outside	of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See	Instructions)	
				T
Date	Full name of contributor ut-of-state PAC (ID#:		Amount of contribution (\$)	In-kind contribution description (if applicable)
	IDS Engineers Group P.	HC		
11/13	Contributor address; City; State; Zip Code		500.00	1
	Contributor address; City; State; Zip Code	2300		1
	Houston, Tx 77040			of Texas, complete Schedule T)
Principal occu	upation / Job title (See Instructions)	Employer (See	Instructions)	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of	In-kind contribution
	Holff Associates - State	PAC	contribution (\$)	description (if applicable)
11/13	Contributor address; City; State; Zip Code		500.00	1
	1201 N. Bowser Rd.			1
	Richardson, Tx. 75081			AT
		Employer (See		of Texas, complete Schedule T)
Principal occu	upation / Job title (See Instructions)	Employer (dec	mondono)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of	In-kind contribution
,	Town Russ		contribution (\$)	description (if applicable)
11/13	James Russ Contributor address; City; State; Zip Code		500,00	1
	10555 West office Dr.		000,00	1
	Houston, Tx. 77042			e of Texas, complete Schedule T)
Principal occ	upation / Job title (See Instructions)	Employer (See	Instructions)	

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POLITICAL CONTRIBUTIONS					
OTHER THA	AN PLEDGES	OR LOANS			

P.O. Box 12070

SCHEDULE A

OTTLE			11 cm - 1245125612661266		
The	Instruction Guide explains how to complete this	form.	1 Total pages Scho	1 Total pages Schedule A:	
	-		3 ACCOUNT # (E	thics Commission Filers)	
Floud	Glenn Beckenderft	C			
			7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
11/13/12	Arthur Davis				
	6 Contributor address; City; State; Zip Code P.O. Box 451		250,00		
			(If traval outside	of Texas, complete Schedule T)	
	Katy, Tx. 17492	10 Employer (See		or texas, complete deficación vy	
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See	Instructions)		
Date	Full name of contributor ut-of-state PAC (ID#:		Amount of contribution (\$)	In-kind contribution description (if applicable)	
11/13	Welcome Wilson, Jr. Contributor address; City; State; Zip Code		250.00		
	5858 Westheimer, Ste.	800		1	
	Houston, Tx 77057		(If travel outside	I of Texas, complete Schedule T)	
Principal occu	pation / Job title (See Instructions)	Employer (See	Instructions)		
Date	Full name of contributor ut-of-state PAC (ID#:_		Amount of	In-kind contribution description (if applicable)	
11/13	Jerry Newell		contribution (\$)	1	
11/15	Contributor address; City; State; Zip Code		250,00	1	
	9402 Godstone Ln.			1	
	Spring, Tx. 77379		(If travel outside	of Texas, complete Schedule T)	
Principal occi	upation / Job title (See Instructions)	Employer (See	Instructions)		
Date	Full name of contributor out-of-state PAC (ID#:		Amount of	In-kind contribution description (if applicable)	
	Stan Stanley Contributor address; City; State; Zip Code		contribution (\$)	description (ii applicable)	
11/13	Contributor address; City; State; Zip Code		100.00	Į.	
	24611 Stoughton Cour	7		1	
	Katy, Tx. 77494			of Texas, complete Schedule T)	
Principal occ	upation / Job title (See Instructions)	Employer (See	Instructions)		
Date	Full name of contributor out-of-state PAC (ID#_		Amount of	In-kind contribution description (if applicable)	
,	David Hannah	*	contribution (\$)	description (ii applicable)	
11/13	David Hannah Contributor address; City; State; Zip Code		100.00	1	
	2312 Peckham St.			!	
	Houston, Tx. 77019		(If travel outside	e of Texas, complete Schedule T)	
Principal occ	cupation / Job title (See Instructions)	Employer (See			
		L			

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POLITICAL CONTRIBUTIONS					
OTHER THA	AN PLEDGES	OR LOANS			

P.O. Box 12070

SCHEDULE A

The	Instruction Guide explains how to complete this	form.	1 Total pages Sche	edule A:
			3 ACCOUNT # (Et	hics Commission Filers)
Flovd	Glenn Beckendorft	0		
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	Brent Lapsler		Contribution (¢)	
11/13/12	Brent Lapsley 6 Contributor address; City; State; Zip Code 9980 W. Sam Houston Pkw	y S., Ste so	0 100.00	
	Houston, Tx. 17099		(If travel outside of	of Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See	Instructions)	•
	Full name of contributor ut-of-state PAC (ID#)	Amount of	In-kind contribution
Date	1 dil ridirio di commente		contribution (\$)	description (if applicable)
11/12	Contributor address; City; State; Zip Code			
11/13	Contributor address; City; State; Zip Code		100.00	
	34523 Joseph Rd.			
		(l	
	Hempstead, Tx. 7744			of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See	Instructions)	
	Full name of contributor ut-of-state PAC (ID#:_		Amount of	In-kind contribution
Date			contribution (\$)	description (if applicable)
11/13	Contributor address; City; State; Zip Code		100.00	 -
	1707 Sturm Rd.	7		i .
	Brookshire, Tx. 7742	3	(If travel outside	of Texas, complete Schedule T)
		Employer (See	1	or rexas, complete constant ,
Principal occu	pation / Job title (See Instructions)	Employer (See	man dedoney	
	Full name of contributor out-of-state PAC (ID#:_		Amount of	In-kind contribution
Date			contribution (\$)	description (if applicable)
11/13	Ted Krenck Contributor address; City; State; Zip Code			1
1///3	Contributor address; City; State; Zip Code		100.00	1
	P.O. Box 491			1
	Pattison, Tx. 77466)
		Tourismes (See		of Texas, complete Schedule T)
Principal occu	upation / Job title (See Instructions)	Employer (See	Instructions)	
Date	Full name of contributor out-of-state PAC (ID#:_		Amount of	In-kind contribution
Date	Til Pholen		contribution (\$)	description (if applicable)
11/13	Timothy Phalen Contributor address; City; State; Zip Code P.O. Box 1274		100 00	1
	Contributor address; City; State; Zip Code	,	100.00	i
	P.O. 150x 1274			1
1	Waller, Tx 77484		(If travel outside	of Texas, complete Schedule T)
Dela de al care	upation / Job title (See Instructions)	Employer (See		- C. I-May Complete Company
Principal occ	upadoli / 300 dde (Oee iliaddodolia)			

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(TDD 1-800-735-2989)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The	Instruction Guide explains how to complete this	form.	1 Total pages Sche	edule A:
2 FILER NAME	Glenn Beckendor	fF	3 ACCOUNT # (E	hics Commission Filers)
A Data	5 Full name of contributor		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
11/13/12	Richard Patrick 6 Contributor address; City; State; Zip Code 21310 Lochmere LA,		100.00	
	Katy, Tx. 77450			of Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See	Instructions)	
Date	Full name of contributor ut-of-state PAC (ID#:_		Amount of contribution (\$)	In-kind contribution description (if applicable)
11/13	Doyle Callender Contributor address; City; State; Zip Code 906 Carnation		100,00	description (ii apparation)
	Katy, Tx 77493		(If traval outside	of Texas, complete Schedule T)
	pation / Job title (See Instructions)	Employer (See		of fexas, complete constant in
Principal occup	Dation / Job tile (See mandelons)			
Date	Full name of contributor out-of-state PAC (ID#:		Amount of contribution (\$)	In-kind contribution description (if applicable)
11/13	John Peyton Contributor address; City; State; Zip Code 13402 Taylor Crest Rd.		100,00	
	Houston, Tx. 77079		(If travel outside	of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See	Instructions)	
Date	Full name of contributor out-of-state PAC (ID#:_		Amount of	In-kind contribution
,	7 -		contribution (\$)	description (if applicable)
11/13	Contributor address; City; State; Zip Code 245 Waters Edge		100.00	1
	Burnet, Tx. 7864		(If travel outside	of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of	In-kind contribution
	1		contribution (\$)	description (if applicable)
11/13	Contributor address; City; State; Zip Code 7502 Foster Creek Dr. Richmond, Tx. 77406		100.00	1
	Kichmond, Tx. 77406		(If travel outside	of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See		

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P.O. Box 12070

SCHEDULE A

The	Instruction Guide explains how to complete this	form.	1 Total pages Scho	edule A:
2 FILER NAME	Glenn Beckendor	ff	3 ACCOUNT # (E	thics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#_ Cobb Fendley PAC		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
1113/12	6 Contributor address; City; State; Zip Code 13 430 N.W. Frwy., Ste	1100	500,00	
	Houston, Tx. 77040		(If travel outside	of Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See	nstructions)	·
Date	Full name of contributor out-of-state PAC (ID#:_ Ronald Henrik 301		Amount of contribution (\$)	In-kind contribution description (if applicable)
11/13	Contributor address; City; State; Zip Code 8831 Stable Ln.		500.00	
	Houston, Tx. 12024		(If travel outside	of Texas, complete Schedule T)
Principal occur	pation / Job title (See Instructions)	Employer (See		
Date	Full name of contributor out-of-state PAC (ID#_ Michael Montgomery		Amount of contribution (\$)	In-kind contribution description (if applicable)
11/13	Contributor address; City; State; Zip Code		500.00	<u> </u>
	Brookshire, Tx 77423	3	(If travel outside	of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See	Instructions)	
Date	Full name of contributor)	Amount of	In-kind contribution
	1 2 11		contribution (\$)	description (if applicable)
11/13	Keith Dalton Contributor address; City; State; Zip Code		250.00	1
	1011 Kingsgate Circle			1
	Katy, Tx 77494		(If travel outside	of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of	In-kind contribution
11/13	Jon Strange		contribution (\$)	description (if applicable)
11113	24823 Lake brian Dr.		250.00	1
	Katy, Tx, 77494		(If travel outside	of Texas, complete Schedule T)
Principal occu	upation / Job title (See Instructions)	Employer (See		

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P.O. Box 12070

SCHEDULE A

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			1 Total pages Sche	dule A:
The	Instruction Guide explains how to complete this	torm.		
			3 ACCOUNT # (Et	hics Commission Filers)
2 FILER NAME	5 Full name of contributor out-of-state PAC(ID#_	FF	_	
4 Date	5 Full name of contributor		7 Amount of	8 In-kind contribution
4 Date	Robert Ring 6 Contributor address; City; State; Zip Code		contribution (\$)	description (if applicable)
11113112	Contributor address: City: State: Zip Code		250.00	
	510 E. Hillary Circle		230,00	
	Sugar Land, Tv. 779			of Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See I	nstructions)	
			Amount of	In-kind contribution
Date	Full name of contributor out-of-state PAC (ID#	DAC	Amount of contribution (\$)	description (if applicable)
11/13	Responsible Government	PITC		7
11113	Contributor address; City; State; Zip Code		250,00	
	5005 Riverway, Ste.	500	230,00	
	,			
	Houston, Tx. 17056		(If travel outside	of Texas, complete Schedule T)
Principal occur	pation / Job title (See Instructions)	Employer (See	Instructions)	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of	In-kind contribution
500	To Duch		contribution (\$)	description (if applicable)
11/13	James Pugh Contributor address; City; State; Zip Code		2	Ĭ
11113	Contributor address; City; State; Zip Code		250,00	I
	10000 Cedar Creek Ct.			I I
	Brookshire, Tx. 77423		(If travel outside	of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See	Instructions)	
, , , , spar cood				
Date	Full name of contributor ut-of-state PAC (ID#_)	Amount of	In-kind contribution
Date			contribution (\$)	description (if applicable)
1./12	Evelio Fernandez			Ī
11/13	Contributor address; City; State; Zip Code		250.00	I.
	12119 Piping Rock			1
	Houston, Tx 77077			of Tours complete Cabadula T\
		Employer (See		of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) Employer (See Instructions)				
-	Full name of contributor	1	Amount of	In-kind contribution
Date	Full flame of contributor out-or-state PAC(ID#		contribution (\$)	description (if applicable)
11/13	Walter 2955			1
11117	Contributor address; City; State; Zip Code		250.00	1
	2707 Autumn Lake Dr	',		
1	1//			AT complete Cohedula To
	Katy, 1x. 77450	Employer (See		of Texas, complete Schedule T)
Principal occu	upation / Job title (See Instructions)	Employer (See	mstructions)	

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Austin, Texas 78711-2070

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The	Instruction Guide explains how to complete this	form.	1 Total pages Sche	edule A:
		3 ACCOUNT # /F	hics Commission Filers)	
2 FILER NAME	id Glenn Beckendo	rff		
4 Date	5 Full name of contributor out-of-state PAC (ID#:		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
11/13/12	Raymond Dollins 6 Contributor address; City; State; Zip Code 4804 Metzgar		250.00	
	Katy, Tx 77492			of Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See	Instructions)	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of	In-kind contribution description (if applicable)
4.1.2	Crais Wilson Contributor address; City; State; Zip Code		contribution (\$)	description (ii applicable)
11/13	Contributor address; City; State; Zip Code		250.00	
	2206 Del Monte Dr.			
	Houston, Tx. 77019		(If travel outside	of Texas, complete Schedule T)
Principal occur	pation / Job title (See Instructions)	Employer (See		
T Till diput occup				
Date	Full name of contributor out-of-state PAC (ID#:		Amount of	In-kind contribution description (if applicable)
	Welcome Wilson, Sr		contribution (\$)	description (ii applicable)
11/13	Contributor address; City; State; Zip Code		250.00	[
	5858 Westheimer, Ste. 80	0		
	Houston, Tx. 77057		(If travel outside	of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See	Instructions)	
Date	Full name of contributor		Amount of	In-kind contribution description (if applicable)
	Gary Trietsch		contribution (\$)	description (ii applicable)
11/13	Gary Trietsch Contributor address; City; State; Zip Code		250.00	1
	14911 Kimberly Ln.			1
	Houston, Tx. 77079			/ Towns consists Oak adula TV
Dringing!		Employer (See		of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)			T
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of contribution (\$)	In-kind contribution description (if applicable)
1 - 1 -	Ronald Dagley		ωπισιουπ (Φ)	
11/13	Ronald Dagley Contributor address; City; State; Zip Code 415 Hamden Ct,		250.00	
	415 Hamden CT,			1
	Katy, Tx. 27450		(If travel outside	of Texas, complete Schedule T)
Principal occu	upation / Job title (See Instructions)	Employer (See	Instructions)	
1				

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

J					
	hin to a complete this	form	1 Total pages Sche	edule A:	
The Instruction Guide explains how to complete this form.			(
2 FILER NAME			3 ACCOUNT # (Et	hics Commission Filers)	
	d Glenn Beckendorf	7		a la biad as Albudian	
4 Date	5 Full name of contributor out-of-state PAC (ID#:		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	Don Elder 6 Contributor address; City; State; Zip Code				
11113110	6 Contributor address; City; State; Zip Code 1615 Drexel		100.00		
	Katy, Tx. 77493			of Texas, complete Schedule T)	
9 Principal occup	ation / Job title (See Instructions)	10 Employer (See I	nstructions)		
Date	Full name of contributor uut-of-state PAC (ID#:		Amount of	In-kind contribution	
	Ranney McDonough		contribution (\$)	description (if applicable)	
11/13	Contributor address; City; State; Zip Code 3 Pin Oak Estates	**********	500.00	!	
	Bellaire, Tx. 77401			 	
	,	Employee (Co.		of Texas, complete Schedule T)	
Principal occup	pation / Job title (See Instructions)	Employer (See	maducuons)		
Date	Full name of contributor out-of-state PAC (ID#:		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	Berg - Oliver PAC Contributor address; City; State; Zip Code			l sosipiisii (ii sppiisiis)	
11/13	Contributor address; City; State; Zip Code		250.00	1	
	14701 Marys Ln., Ste	400		1	
	Houston, Tx. 77079		(If travel outside	of Texas, complete Schedule T)	
Principal occuj	pation / Job title (See Instructions)	Employer (See	Instructions)	Apr	
Date	Full name of contributor		Amount of	In-kind contribution	
Jate	Full name of contributor out-of-state PAC (ID#_ Costello, Inc., PAC Contributor address; City; State; Zip Code		contribution (\$)	description (if applicable)	
1/2/13	Contributor address; City; State; Zip Code		C00 00	1	
	9990 Richmond Ave., S	ite, 450	500,00	1	
	Houston, Tx. 77042			of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Employer (See Instructions)					
Date	Full name of contributor out-of-state PAC(ID#_		Amount of contribution (\$)	In-kind contribution description (if applicable)	
			. Commission (#)		
	Contributor address; City; State; Zip Code)		1	
				ì	
				of Texas, complete Schedule T)	
Principal occu	pation / Job title (See Instructions)	Employer (See	Instructions)		

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POLITICAL EXPENDITURES

SCHEDULE F

(512) 463-5800

Advertising Expense	EXPENDITURE CATEGORIES Gift/Awards/Memorials Expense Salaries/Wages/Co	ntract Labor Lo	an Repayment/Reimbursement
Accounting/Banking	Legal Services Solicitation/Fundral	sing Expense Tra	ansportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense Travel In District		ntributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense Travel Out Of Dist Printing Expense Office Overhead/R		THER (enter a category not listed above)
Fees	The Instruction Guide explains how to		
1 Total pages Schedule F:	2 FILER NAME	ac CC	3 ACCOUNT # (Ethics Commission Filers)
3	Floyd Glenn Beckend 5 Payee name Hempstead Chamber of	UTT	
4 Date	L C /	ſ	
7/26/12	7 Payee address; City; State; Zip Code	Commerce	
6 Amount (\$)			
220.00	P.O. BOX 517		
000,00	Hempstead, Tx. 27445		
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If t	ravel outside of Texas, complete Schedule T)
OF EXPENDITURE	Dona tion		
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought	Office held
	Payee name		
7/30/12			
Amount (\$)	Payee address; City; State; Zip Code	*	
	P.O. Box 4125		
100.00	Houston, Tx 77210		
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If	travel outside of Texas, complete Schedule T)
OF			
EXPENDITURE	Donation		
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH	Office sought	Office held
Date .	Payee name		
8/3/12	Di Irias		
Amount (\$)	Payee address; City; State; Zip Code		
2012	750 Business 290E		
30.13	Hempstead, Tx, 77445		
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If	travel outside of Texas, complete Schedule T)
OF EXPENDED IN	Award for Retireo		
EXPENDITURE	1		Office hold
Complete ONLY if direct expenditure to benefit C/0	Candidate / Officeholder name DH	Office sought	Office held
Date	Payee name		
8/3/12	Waller County Fair A. Payee address; City; State; Zip Code	SSOC,	
Amount (\$)	Payee address; City; State; Zip Code		
\$5500 H (\$65900456H00 1 4000	P.O. Box 911		
100.00	Hempstead, Tx 97445 Category (See categories listed at the top of this schedule)		
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If	travel outside of Texas, complete Schedule T)
OF EXPENDITURE	Awards - Sr. Citizen Lunch		
Complete ONLY if direct expenditure to benefit Co	Candidate / Officeholder name	Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F

POLITICAL EXPENDITURES

	TVPTUDITUDE ALTEA	ODIES FOD BOY 8/	al
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	EXPENDITURE CATEGORIES FOR BOX 8(a) Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense Travel Office Overhead/Rental Expense The policy of t		
	The Instruction Guide explains	how to complete this	ioriii.
1 Total pages Schedule F:	2 FILER NAME Floyd Glenn B	eckendorft	3 ACCOUNT # (Ethics Commission Filers)
4 Date 8/8/12	5 Payee name Waller County Fa 7 Payee address; City; State; Zip D. O. Box 911	ir Assuc	
6 Amount (\$)	7 Payee address; City; State; Zip	Code	
200.00	Hempstead, Tx 774	145	(()
8 PURPOSE OF	(a) Category (See categories listed at the top of this sche Advertising - Banner	dule) (b) Description	on (If travel outside of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sou	ight Office held
Date	Payee name		
914/12	Midway BBO	0.1	
Amount (\$)	, ayee address,	Code	
197.77	6025 Hwy, Blud. Karty, Tx, 77494		
PURPOSE	Category (See categories listed at the top of this sche	edule) Descripti	on (If travel outside of Texas, complete Schedule T)
OF EXPENDITURE	Awards - Vol. Fire Dept. L	unch	05. hald
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sou	ught Office held
Date	Payee name		
9/21/12			
Amount (\$)	Waller FFA Payee address; City; State; Zip P. O. Box 1528	Code	
	Waller, Tx 77484	Description	ion (If travel outside of Texas, complete Schedule T)
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch Donation	eaule) Descripti	ion (in naven publice on nexas, complete sociedarie i)
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name	Office so	ught Office held
Data	Payee name		
9/12/12	Western Star		
Amount (\$)	Payee address; City; State; Zip 819 Purdy Ave. Brookshire, Tx 7742	2.3	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch	edule) Descript	ion (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/	Candidate / Officeholder name	Office so	ught Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

POLITICAL EXPENDITURES

SCHEDULE F

	EXPENDITURE CATEGORIES I	OR BOX 8(a)	
Advertising Expense	Gift/Awards/Memorials Expense Salaries/Wages/Co	ntract Labor Loan Repayment/Reimbursement	
Accounting/Banking	Legal Services Solicitation/Fundral	Contributions/Donations Made By	
Consulting Expense	FOOd/Develage Expense	ict Candidate/Officeholder/Political Committee	
Event Expense	Foling Expense		
Fees	Printing Expense Office Overhead/AC The Instruction Guide explains how to c	complete this form.	
1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers	
5	Floyd Glenn Becken	dorft	
4 Date	5 Payee name		
9/24/12	Di Trio's Flower Shop 7 Pavee address; City; State; Zip Code		
6 Amount (\$)			
31.64	750 Business 290 E		
J /	Hempstead, Tx 77445	Description ((Should suite de et Toyas complete Schedule T)	
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)	
OF EXPENDITURE	Awards	Office held	
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought Office held	
Date	Payee name		
10/5/12	Payee address; City; State; Zip Code		
Amount (\$)	Payee address; City; State; Zip Code	e .	
100.00	1 00 0 10 00 1 10 00 1		
100,00	Hempstead, Tx 77445	The state of the s	
PURPOSE OF	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)	
EXPENDITURE	Donation	Office held	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH	Office sought Office held	
Date	Payee name		
10/5/12	Waller County Fair Payee address; City; State; Zip Code		
Amount (\$)	Payee address; City; State; Zip Code		
1,300.00	P.O. Box 911 Hempstead, TX 77445		
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)	
OF	Donation		
EXPENDITURE	Candidate / Officeholder name	Office sought Office held	
Complete ONLY if direct expenditure to benefit C/			
Date	Payee name		
10/5/12	Waller County Fair		
Amount (\$)	Payee address; City; State; Zip Code P. O. Box 911		
25.00	Hempstead, Tx 77445		
DUDD COT	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)	
PURPOSE OF	Donation		
EXPENDITURE Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held	
expenditure to benefit C	C/OH		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F

POLITICAL EXPENDITURES

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Gift/Awards/Memorials Expense

Legal Services Food/Beverage Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense

Travel In District

Loan Repayment/Reimbursement

(512) 463-5800

Transportation Equipment & Related Expense

Contributions/Donations Made By

Event Expense	Polling Expense	Travel Out Of Distr		THER (enter a category not listed about	
Fees	Printing Expense The Instruction Guide	Office Overhead/Re	S 120000 ALV		,
				3 ACCOUNT # (Ethics Commissio	n Filers)
1 Total pages Schedule F:	Floyd Glenn 5 Payee name	Rockwid	an ff	3 70000111 # (241100 001111111011	,
3	Floya Clienn	DECKENA	0111	1	
4 Date	5 Payee name	T. 'A			1
10/5/12	Waller County 7 Payee address; City; Sta P.O. Box 911	rall			
6 Amount (\$)	7 Payee address; City; Sta	ate; Zip Code			
800.00					1
	Hempstead, Tx	77445			
8 PURPOSE	(a) Category (See categories listed at the top		(b) Description (If	ravel outside of Texas, complete Schedule T)	
OF EXPENDITURE	Donation				
	Candidate / Officeholder name		Office sought	Office held	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
<u> </u>					
Date	Payee name	1 1	(0)		
10/25/12	Hempstead Chan Payee address; City; St	nher of	commer	ie	
Amount (\$)	P.O. Box 517	ate, Zip Code			
200.00		7-115			
	Hempstead, Tx	17993			
PURPOSE	Category (See categories listed at the top	p of this schedule)	Description (If	travel outside of Texas, complete Schedule T))
OF EXPENDITURE	Donation	-			
Complete ONLY if direct	Candidate / Officeholder name	1	Office sought	Office held	
expenditure to benefit C/OF	l				
Date	Payee name				
1 1 . 1	Malorie Hegem Payee address; City; St	2/100			
11/12/12	Payes address: City: St	ete: Zin Code			
Amount (\$)	Payee address, Oily, Oil	ato, Zip oodo			
200.00	Waller, Tx.				
				CT Chadde T	
PURPOSE	Category (See categories listed at the to	op of this schedule)	Description (If	travel outside of Texas, complete Schedule T	,
OF EXPENDITURE	Awards - Vet. day	cake			
Complete ONLY if direct	Candidate / Officeholder name	9	Office sought	Office held	
expenditure to benefit C/O	Н				
Date	Payee name		3M-11/2-2-11-211-211-211-211-211-211-211-2		
11/11/12	West I-10 City; St	ham ber			
Amount (\$)	Payee address; City; St	tate; Zip Code			
	907 Bains St.				
200.00	Brookshire, Tx	77413			
- DUDDOOF	Category (See categories listed at the to		Description (If	travel outside of Texas, complete Schedule T)
PURPOSE OF	Salego, J (ove anogenee nelectation)	•			
EXPENDITURE			Office south	Office held	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH	9	Office sought	Office field	
	ATTACH ADDITIONAL C	COPIES OF THIS	SCHEDULE AS N	EEDED	

POLITICAL EXPENDITURES

Texas Ethics Commission

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	EXPENDITURE CATEGORIES FOR BOX 8(a) Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor Legal Services Solicitation/Fundraising Expense Food/Beverage Expense Travel In District Contributions/Donations Made By Candidate/Officeholder/Political Commit 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 F:	2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)
4 Date 10/5/12 6 Amount (\$)	5 Payee name Rolling Hills VFD 7 Payee address; City; State; Zip Code P.O. Box 444 Hempstead, Tx 77445 (a) Category (See categories listed at the top of this schedule)		avel outside of Texas, complete Schedule T)
8 PURPOSE OF EXPENDITURE	Donation		
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If to	ravel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/0	Candidate / Officeholder name OH	Office sought	Office held
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (Ift	ravel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/	Candidate / Officeholder name OH	Office sought	Office held
Date	Payee name		
Amount (\$)	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)
Complete ONLY if direct expenditure to benefit C		Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS N	EDED