



# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH  
COVER SHEET PG 2**

**14 C/OH NAME** TROY GUIDRY **15 Filer ID** (Ethics Commission Filers)

**16 NOTICE FROM POLITICAL COMMITTEE(S)**

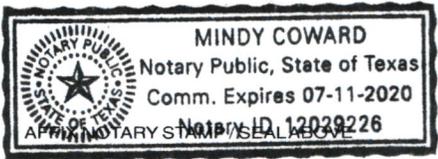
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

<input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC  <input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 35,395.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$ 12,022.45
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 8,271.87
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**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]  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Troy Guidry, this the 12 day of July, 2019, to certify which, witness my hand and seal of office.

[Signature] Signature of officer administering oath  
Mindy Coward Printed name of officer administering oath  
Notary Title of officer administering oath

# SUBTOTALS - C/OH

**FORM C/OH  
COVER SHEET PG 3**

19 FILER NAME <b>TRAY GUIDRY</b>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 21,510.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 13,885.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 12,022.45
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> 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.

1 Total pages Schedule A1: **10**

2 FILER NAME

**TROY GUIDRY**

3 Filer ID (Ethics Commission Filers)

4 Date

**2/15/19**

5 Full name of contributor

**REX OR VICKIE TICKNOR**

out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

**\$200.00**

6 Contributor address; City; State; Zip Code

**16120 BLACK FALCON RD  
WALLER, TX 77484**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

**2/25/19**

Full name of contributor

**KRISTI WIMBERLY**

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

**\$500.00**

Contributor address; City; State; Zip Code

**PO BOX 1433 CYPRESS, TX 77410**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**4/12/19**

Full name of contributor

**ROY JOHNSON**

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

**\$100.00**

Contributor address; City; State; Zip Code

**7273 CR 313  
PLANTERSVILLE, TX 77363**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**4/20/19**

Full name of contributor

**TIM LAUDER**

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

**\$1000.00**

Contributor address; City; State; Zip Code

**31015 TORREY RD.  
WALLER, TX 77484**

Principal occupation / Job title (See Instructions)

Employer (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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

TROY GUIDRY

3 Filer ID (Ethics Commission Filers)

4 Date

4/20/19

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

TALBOT ENTERPRISES

7 Amount of contribution (\$)

\$ 1460.00

6 Contributor address; City; State; Zip Code

19131 FM 362 WALLER, TX 77484

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/20/19

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

DESIRAE RENBARGER

Amount of contribution (\$)

\$ 50.00

Contributor address; City; State; Zip Code

9967 MANOR SPRING  
BROOKSHIRE, TX 77423

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/20/19

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

REX TICKNOR

Amount of contribution (\$)

\$ 710.00

Contributor address; City; State; Zip Code

16120 BLACK FALCON RD  
WALLER, TX 77484

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/20/19

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

CHRISTINA CASTILLO

Amount of contribution (\$)

\$ 150.00

Contributor address; City; State; Zip Code

20508 ANGELI DRIVE  
TOMBALL, TX 77377

Principal occupation / Job title (See Instructions)

Employer (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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <b>TROY GUIDRY</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4/20/19</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>JOHN FRANK</b>	7 Amount of contribution (\$) <b>\$690.00</b>
6 Contributor address; City; State; Zip Code <b>PO BOX 505 WALLER, TX 77484</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>4/20/19</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>BRANDON HERLONG</b>	Amount of contribution (\$) <b>\$800.00</b>
Contributor address; City; State; Zip Code <b>22903 CORIANDER DR MAGNOLIA, TX 77355</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>4/20/19</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>ANDREW HARMAN</b>	Amount of contribution (\$) <b>\$2250.00</b>
Contributor address; City; State; Zip Code <b>24038 AJ'S WAY RD HEMPSTEAD, TX 77445</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>4/20/19</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>ANDREW FAGERQUIST</b>	Amount of contribution (\$) <b>\$50.00</b>
Contributor address; City; State; Zip Code <b>17131 TELEGRAPH CREEK DR KLEIN, TX 77379</b>		
Principal occupation / Job title (See Instructions)		Employer (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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

TROY GUIDRY

3 Filer ID (Ethics Commission Filers)

4 Date

4/20/19

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

ANDREW PESTELL

7 Amount of contribution (\$)

\$ 250.00

6 Contributor address; City; State; Zip Code

407 MCDANIEL DR. MAGNOLIA, TX 77354

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/20/19

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

KATHLEEN BRAST

Amount of contribution (\$)

\$ 3450.00

Contributor address; City; State; Zip Code

9556 HOFF ROAD  
BELLVILLE, TX 77418

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/20/19

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

JOHN KROLCZYK

Amount of contribution (\$)

\$ 2600.00

Contributor address; City; State; Zip Code

PO BOX 539  
HEMPSTEAD, TX 77445

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/20/19

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

DARREN STOKES

Amount of contribution (\$)

\$ 1325.00

Contributor address; City; State; Zip Code

15623 MATHIS RD WALLER, TX 77484

Principal occupation / Job title (See Instructions)

Employer (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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

TROY GUIDRY

3 Filer ID (Ethics Commission Filers)

4 Date

4/20/19

5 Full name of contributor

BRADLEY METCALF

out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

\$ 180.00

6 Contributor address; City; State; Zip Code

14262 FM 1887 RD.  
HEMPSTEAD, TX 77445

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/20/19

Full name of contributor

JIMMIE & LINDA RANDALL

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

\$ 85.00

Contributor address; City; State; Zip Code

24231 GLENWOOD BLVD.  
HOCKLEY, TX 77447

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/20/19

Full name of contributor

TERESA FLETCHER

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

\$ 55.00

Contributor address; City; State; Zip Code

PO BOX 899 HEMPSTEAD, TX 77445

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/20/19

Full name of contributor

DENA WOULD'S

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

\$ 425.00

Contributor address; City; State; Zip Code

24602 MESQUITE RIVER TRL  
HOCKLEY, TX 77447

Principal occupation / Job title (See Instructions)

Employer (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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

TROY GUIDRY

3 Filer ID (Ethics Commission Filers)

4 Date

4/20/19

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

HEATHER McFARLANE

7 Amount of contribution (\$)

\$1800.00

6 Contributor address; City; State; Zip Code  
29300 SKYMAC RANCH RD  
HEMPSTEAD, TX 77445

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/20/19

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

TYE SMITH

Amount of contribution (\$)

\$400.00

Contributor address; City; State; Zip Code  
18619 BECKER RD HOCKLEY, TX  
77447

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/20/19

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

CAMBRI HUFF

Amount of contribution (\$)

\$170.00

Contributor address; City; State; Zip Code  
27201 KICKAPOO HOCKLEY, TX  
77447

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/20/19

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

LIZ KROLCZYK

Amount of contribution (\$)

\$25.00

Contributor address; City; State; Zip Code  
PO BOX 539  
HEMPSTEAD, TX 77445

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

TROY GUIDRY

3 Filer ID (Ethics Commission Filers)

4 Date

4/20/19

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

KAREN DAVIS

7 Amount of contribution (\$)

\$140.00

6 Contributor address; City; State; Zip Code

11075 BONNER RD  
BROOKSHIRE, TX 77423

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/20/19

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

SCOTT THORNTON

Amount of contribution (\$)

\$325.00

Contributor address; City; State; Zip Code

19802 COUNTRY LAKE DR.  
MAGNOLIA, TX 77355

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/20/19

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

SHARON MCCURDY

Amount of contribution (\$)

\$1400.00

Contributor address; City; State; Zip Code

33014 GROVE PARK DR.  
WALLER, TX 77484

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/20/19

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

SONYA SCHLUENS

Amount of contribution (\$)

\$60.00

Contributor address; City; State; Zip Code

34501 GLENMAR WALLER, TX 77484

Principal occupation / Job title (See Instructions)

Employer (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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

TROY GUIDRY

3 Filer ID (Ethics Commission Filers)

4 Date

4/20/19

5 Full name of contributor

KIM LAUDER

out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

\$15.00

6 Contributor address; City; State; Zip Code

31015 TORREY RD WALLER, TX 77484

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/20/19

Full name of contributor

ANTHONY LAMBOTH

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

\$35.00

Contributor address; City; State; Zip Code

2213 TYLER DR MCKINNEY, TX 75070

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/20/19

Full name of contributor

DON PIERCE

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

\$110.00

Contributor address; City; State; Zip Code

30SHILL ST DAYTON, TX 77535

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/20/19

Full name of contributor

IRENE SHEARD

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

\$75.00

Contributor address; City; State; Zip Code

23391 PLANTATION LAKE DR.  
HEMPSTEAD, TX 77445

Principal occupation / Job title (See Instructions)

Employer (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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

TROY GUIDRY

3 Filer ID (Ethics Commission Filers)

4 Date

4/20/19

5 Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

JEREMIAH HORN

6 Contributor address;

City; State; Zip Code

27030 BETHA MEMPSTEAD, TX 77445

7 Amount of contribution (\$)

\$100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/20/19

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

JO SHEFFIELD

Contributor address;

City; State; Zip Code

28898 FM 1488 HOCKLEY, TX 77447

Amount of contribution (\$)

\$60.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/20/19

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

LEONARD BORCHGARDT

Contributor address;

City; State; Zip Code

8668 LOOP RD. BELLVILLE TX 77418

Amount of contribution (\$)

\$65.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/20/19

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

NATALIE HELSCHUR

Contributor address;

City; State; Zip Code

PO BOX 505 WALLER TX 77484

Amount of contribution (\$)

\$60.00

Principal occupation / Job title (See Instructions)

Employer (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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

TROY GUIDRY

3 Filer ID (Ethics Commission Filers)

4 Date

4/20/19

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

STEVEN PFEIFFER

7 Amount of contribution (\$)

\$50.00

6 Contributor address; City; State; Zip Code

PO BOX 1911 WALLER, TX 77484

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/20/19

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

SUE CARR

Amount of contribution (\$)

\$120.00

Contributor address; City; State; Zip Code

579 PEAKSIDE CIRCLE  
DRIPPING SPRINGS, TX 78620

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/20/19

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

SUSAN SMOLLAR

Amount of contribution (\$)

\$20.00

Contributor address; City; State; Zip Code

19853 BAUER HOCKEY TOMBALL, TX  
77377

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/20/19

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

WAYNE HEBERT

Amount of contribution (\$)

\$150.00

Contributor address; City; State; Zip Code

31171 PECAN CREEK DR.  
BROOKSHIRE, TX 77423

Principal occupation / Job title (See Instructions)

Employer (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.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <b>18</b>
2 FILER NAME <b>TROY GUIDRY</b>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$
5 Date <b>4/20/19</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>JAMES KITCHENS</b>	8 Amount of Contribution \$ <b>\$150.00</b>
7 Contributor address: _____ City: _____ State: _____ Zip Code <b>14802 CANTWELL BEND CYPRESS, TX 77429</b>		9 In-kind contribution description <b>1 DAY GUIDED FISH TRIP</b>
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
12 Contributor's principal occupation (FOR JUDICIAL)		11 Employer (FOR NON-JUDICIAL) (See Instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

Date <b>4/20/19</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>JOHN AND LIZ KROLCEYK</b>	Amount of Contribution \$ <b>\$275.00</b>	In-kind contribution description <b>THROW BLANKET SHOP VAC POKER SET</b>
Contributor address: _____ City: _____ State: _____ Zip Code <b>PO BOX 539 HEMPSTEAD, TX 77445</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME <b>TROY GUIDRY</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <b>4/20/19</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>BRYANT SLAUGHTER</b>	8 Amount of Contribution \$ <b>\$400.00</b>	9 In-kind contribution description <b>2 CUTTING LESSONS</b>
7 Contributor address; City; State; Zip Code <b>26022 NELSON RD HEMPSTEAD, TX 77445</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date <b>4/20/19</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>CHRIS RAMOS</b>	Amount of Contribution \$ <b>\$200.00</b>	In-kind contribution description <b>TEXANS SIGNED JERSEY &amp; SHOOTING CLASSES</b>
Contributor address; City; State; Zip Code <b>27040 PALO PINO MAGNOLIA, TX 77355</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME <b>TROY GUIDRY</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <b>4/20/19</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>DON PIERCE</b>	8 Amount of Contribution \$ <b>\$2000.00</b>	9 In-kind contribution description <b>BBQ PIT</b>
7 Contributor address; City; State; Zip Code <b>305 HILL ST DAYTON, TX 77535</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date <b>4/20/19</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>DON PIERCE</b>	Amount of Contribution \$ <b>\$5000.00</b>	In-kind contribution description <b>3 GUNS - 2-AR 1-RUGER</b>
Contributor address; City; State; Zip Code <b>305 HILL ST DAYTON, TX 77535</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME <b>TROY GUIDRY</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <b>4/20/19</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>DUSTIN KNEESER</b>	8 Amount of Contribution \$ <b>\$125.00</b>	9 In-kind contribution description <b>1 DAY AXIS DOE HUNT</b>
7 Contributor address; City; State; Zip Code <b>1982 COUNTRY LAKE DR. MAGNOLIA, TX 77355</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date <b>4/20/19</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>TED GRAY</b>	Amount of Contribution \$ <b>\$150.00</b>	In-kind contribution description <b>GENERATOR INSPECTION/ SERVICE</b>
Contributor address; City; State; Zip Code <b>28737 SHEFFIELD HOCKLEY, TX 77447</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME <b>TROY GUIDRY</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <b>4/20/19</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>KYLIE SMOLLAR</b>	8 Amount of Contribution \$ <b>\$20.00</b>	9 In-kind contribution description <b>STRAWBERRY DREAM DESSERT</b>
7 Contributor address; City; State; Zip Code <b>19853 BAUER HOCKEY TOMBALL, TX 77374</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date <b>4/20/19</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>MARY DAVIS</b>	Amount of Contribution \$ <b>\$20.00</b>	In-kind contribution description <b>BANANA PUDDING</b>
Contributor address; City; State; Zip Code <b>33346 JOSEPH RD WALLER TX 77484</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME <b>TROY GUIDRY</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <b>4/20/19</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>MIKE AND ERIN WILSON</b>	8 Amount of Contribution \$ <b>\$1500.00</b>	9 In-kind contribution description <b>1/2 OF PROCESSED STEER</b>
7 Contributor address; City; State; Zip Code <b>18408 KERMIER HOCKLEY TX 77447</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date <b>4/20/19</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>REAGAN RAPE</b>	Amount of Contribution \$ <b>\$100.00</b>	In-kind contribution description <b>HAND-MADE KNIFE</b>
Contributor address; City; State; Zip Code <b>15425 FM 359 HEMPSTEAD TX 77445</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:

2 FILER NAME **TROY GUIDRY**

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date

4/20/19

6 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

ROBERT & KAREN DAVIS &  
STEVEN & RHONDA PFEIFFER

7 Contributor address; City; State; Zip Code

PO BOX 1911 WALLER, TX 77484

8 Amount of Contribution \$

\$400.00

9 In-kind contribution description

BBQ DINNER FOR QTY 50

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

4/20/19

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

ROBERT AND SANDRA HESSE

Contributor address; City; State; Zip Code

28811 SHEFFIELD RD  
HOCKLEY TX 77447

Amount of Contribution \$

\$500.00

In-kind contribution description

LUKE BRYAN SIGNED GUITAR

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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2 FILER NAME <b>TROY GUIDRY</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <b>4/20/19</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>SCOTT THORNTON</b>	8 Amount of Contribution \$ <b>\$450.00</b>	9 In-kind contribution description <b>QTY 3 TAXIDERMY MOUNTS</b>
7 Contributor address; City; State; Zip Code <b>19802 COUNTRY LAKE DR MAGNOLIA, TX 77355</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date <b>4/20/19</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>SUSAN SMOLLAR</b>	Amount of Contribution \$ <b>\$60.00</b>	In-kind contribution description <b>SUCCULENT ORANGECAKE</b>
Contributor address; City; State; Zip Code <b>19853 BAUER HOCKLEY TOMBALL, TX 77377</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME <b>TROY GUIDRY</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <b>4/20/19</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>JASON ANNIS</b>	8 Amount of Contribution \$ <b>\$100.00</b>	9 In-kind contribution description <b>EUROPEAN MOUNT</b>
7 Contributor address; City; State; Zip Code <b>17413 FM2920 TOMBALL, TX 77377</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date <b>4/20/19</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>LINDE GUIDRY</b>	Amount of Contribution \$ <b>\$285.00</b>	In-kind contribution description <b>TOOL KIT &amp; ENTERTAIN SIGN</b>
Contributor address; City; State; Zip Code <b>30501 HANER HOCKLEY TX 77447</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:

2 FILER NAME **TROY GUIDRY**

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date

4/20/19

6 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**WES AND MARY DAVIS**

7 Contributor address; City; State; Zip Code

**33346 JOSEPH RD  
WALLER TX 77484**

8 Amount of Contribution \$  
**\$150.00**

9 In-kind contribution description

**MANTIS  
TILVER**

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

4/20/19

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**CHANCE GRAHAM**

Contributor address; City; State; Zip Code

**30501 HANER HOCKLEY TX 77447**

Amount of Contribution \$  
**\$20.00**

In-kind contribution description

**VINTAGE  
MARKET  
TICKETS**

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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2 FILER NAME <b>TROY GUIDRY</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <b>4/20/19</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>GARRETT DENNIS</b>	8 Amount of Contribution \$ <b>\$50.00</b>	9 In-kind contribution description <b>50 GIFT CARD</b>
7 Contributor address: _____ City: _____ State: _____ Zip Code <b>21835 FM 2920 HOCKLEY, TX 77447</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date <b>4/20/19</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>JENNIFER KITCHENS</b>	Amount of Contribution \$ <b>\$50.00</b>	In-kind contribution description <b>YOUNG LIVING BASKET</b>
Contributor address: _____ City: _____ State: _____ Zip Code <b>14802 GANTWELL BEND CYPRESS, TX 77429</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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2 FILER NAME <b>TROY GUIDRY</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <b>4/20/19</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>JIM TALBOTT</b>	8 Amount of Contribution \$ <b>\$50.00</b>	9 In-kind contribution description <b>KNIFE</b>
7 Contributor address; City; State; Zip Code <b>19131 FM 362 WALLER TX 77484</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date <b>4/20/19</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>KAREN DAVIS</b>	Amount of Contribution \$ <b>\$15.00</b>	In-kind contribution description <b>A&amp;M CERAMIC MUG</b>
Contributor address; City; State; Zip Code <b>11075 BONNER RD BROOKSHIRE, TX 77423</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:

2 FILER NAME

TROY GUIDRY

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date

4/20/19

6 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MINDY WHITE

7 Contributor address; City; State; Zip Code

PO BOX 505 WALLER, TX 77484

8 Amount of Contribution \$

\$50.00

9 In-kind contribution description

BAKERS BASKET

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

4/20/19

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MINDY WHITE

Contributor address; City; State; Zip Code

PO BOX 505 WALLER, TX 77484

Amount of Contribution \$

\$50.00

In-kind contribution description

BAKERS BASKET

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME <b>TROY GUIDRY</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <b>4/20/19</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>PAUL AND HOLLY COX</b>	8 Amount of Contribution \$ <b>\$25.00</b>	9 In-kind contribution description <b>RELAXATION BASKET</b>
7 Contributor address; City; State; Zip Code <b>24381 BENTWOOD DR HOCKLEY TX 77447</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date <b>4/20/19</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>RHONDA PFEIFFER</b>	Amount of Contribution \$ <b>\$45.00</b>	In-kind contribution description <b>SCENTSY BASKET</b>
Contributor address; City; State; Zip Code <b>PO BOX 1911 WALLER, TX 77484</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME <b>TROY GUIDRY</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <b>4/20/19</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>TOYA TALBOTT</b>	8 Amount of Contribution \$ <b>\$25.00</b>	9 In-kind contribution description <b>SUMMER KIDS BASKET</b>
7 Contributor address; City; State; Zip Code <b>19131 FM 362 WALLER, TX 77484</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date <b>4/20/19</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>TRACY FRANK</b>	Amount of Contribution \$ <b>\$25.00</b>	In-kind contribution description <b>SUMMER THEME BASKET</b>
Contributor address; City; State; Zip Code <b>PO BOX 505 WALLER, TX 77484</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME <b>TROY GUIDRY</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <b>4/20/19</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>LISA PEREZ</b>	8 Amount of Contribution \$ <b>\$100.00</b>	9 In-kind contribution description <b>MOVIE PARTY + PORCH BASKETS</b>
7 Contributor address; City; State; Zip Code <b>407 McDANIEL DR MAGNOLIA, TX 77354</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date <b>4/20/19</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>WALTER AND SHARON SMITH</b>	Amount of Contribution \$ <b>\$30.00</b>	In-kind contribution description <b>WINE AND WINE BOTTLE HOLDER</b>
Contributor address; City; State; Zip Code <b>14116 LAKE ORANGE CT. HOUSTON, TX 77044</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME <b>TROY GUIDRY</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <b>4/20/19</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>ANDRON AND SALENA HARMAN</b>	8 Amount of Contribution \$ <b>\$600.00</b>	9 In-kind contribution description <b>STAINLESS TABLE</b>
7 Contributor address; City; State; Zip Code <b>24038 AJ'S WAY RD HEMPSTEAD, TX 77445</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date <b>4/20/19</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>CAMBRI HUFF</b>	Amount of Contribution \$ <b>\$15.00</b>	In-kind contribution description <b>ITALIAN CREAM CAKE</b>
Contributor address; City; State; Zip Code <b>2201 KICKAPOO HOCKLEY TX 77447</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME <b>TROY GUIDRY</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <b>4/20/19</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>MICHELLE HORTON</b>	8 Amount of Contribution \$ <b>\$400.00</b>	9 In-kind contribution description <b>LIVE MOSIC SIGN</b>
7 Contributor address; City; State; Zip Code <b>30531 HANER RD HOCKLEY TX 77447</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date <b>4/20/19</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>WALLER RUSTIC FURNITURE</b>	Amount of Contribution \$ <b>\$300.00</b>	In-kind contribution description <b>RUNNING HORSE BOWL</b>
Contributor address; City; State; Zip Code <b>21225 FM 362 WALLER, TX 77484</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

**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  
Credit Card Payment

Event Expense  
Fees  
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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 8	<b>2</b> FILER NAME TROY GUIDRY	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 1/25/19	<b>5</b> Payee name FRIENDS OF ROYAL FFA	
<b>6</b> Amount (\$) \$225.00	<b>7</b> Payee address; City; State; Zip Code PO BOX 32 BROOKSHIRE, TX 77423	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) CONTRIBUTION/ DONATIONS MADE BY CANDIDATE	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

Date 2/11/19	Payee name MORE THAN SIGNS	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1112 AUSTIN ST. HEMPSTEAD, TX 77445	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

Date 3/8/19	Payee name K9S4COPS	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 3515 B. LONGMIRE DR. STE 342 COLLEGE STATION, TX 77845	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) CONTRIBUTION/ DONATIONS MADE BY CANDIDATE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

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  
Credit Card Payment

Event Expense  
Fees  
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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME TROY GUIDRY	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 3/15/19	<b>5</b> Payee name TOTALLY PROMOTIONAL
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<b>6</b> Amount (\$) \$463.50	<b>7</b> Payee address; City; State; Zip Code 450 S. 2ND ST. COLDWATER, OH 45828
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/18/19	Payee name HOT CARDS
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Amount (\$) \$80.87	Payee address; City; State; Zip Code 2400 SUPERIOR AVENUE EAST CLEVELAND, OH 44114
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	<b>Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/17/19	Payee name MONAVILLE VFD
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Amount (\$) \$65.00	Payee address; City; State; Zip Code 13631 COCHRAN RD. WALLER, TX 77484
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) CONTRIBUTIONS/DONATIONS MADE BY CANDIDATE	<b>Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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**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  
Credit Card Payment

Event Expense  
Fees  
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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME TROY GUIDRY	3 Filer ID (Ethics Commission Filers)
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4 Date 4/26/19	5 Payee name WEST IIO CHAMBER OF COMMERCE
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6 Amount (\$) \$150.00	7 Payee address; City; State; Zip Code PO BOX 100 PATTISON, TX 77466
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/26/19	Payee name WALLER AREA CHAMBER OF COMMERCE
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Amount (\$) \$150.00	Payee address; City; State; Zip Code PO BOX 53 WALLER, TX 77484
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/26/19	Payee name FACEBOOK
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Amount (\$) \$20.99	Payee address; City; State; Zip Code 1 HACKER WAY MENLO, CA 94025
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Credit Card Payment  | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME TROY GUIDRY	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 4/29/19	<b>5</b> Payee name FRIENDS FOR WISHES
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<b>6</b> Amount (\$) \$425.00	<b>7</b> Payee address; City; State; Zip Code 22839 POWELL HOUSE LN. KATY, TX 77449
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) CONTRIBUTIONS/DONATIONS MADE BY CANDIDATE	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/30/19	Payee name FRIENDS FOR WISHES
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Amount (\$) \$200.00	Payee address; City; State; Zip Code 22839 POWELL HOUSE LN. KATY, TX 77449
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) CONTRIBUTIONS/DONATIONS MADE BY CANDIDATE	<b>Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/29/19	Payee name FRIENDS FOR WISHES
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Amount (\$) \$375.00	Payee address; City; State; Zip Code 22839 POWELL HOUSE LN. KATY, TX 77449
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) CONTRIBUTIONS/DONATIONS MADE BY CANDIDATE	<b>Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Credit Card Payment  | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date 5/2/19	5 Payee name WCAHMC
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6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code PO BOX 1891 WALLER, TX 77484
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) CONTRIBUTION / DONATIONS MADE BY CANDIDATE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5/13/19	Payee name FULLY PROMOTED
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Amount (\$) \$4790.55	Payee address; City; State; Zip Code 11808 BARKER CYPRESS #D CYPRESS, TX 77433
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5/15/19	Payee name SITE 123
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Amount (\$) \$100.00	Payee address; City; State; Zip Code 1322 SPACE PARK DR. KATY, TX 77449
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <b>TROY GUIDRY</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>6/3/19</b>	5 Payee name <b>BASS PRO SHOPS</b>
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6 Amount (\$) <b>\$726.20</b>	7 Payee address; City; State; Zip Code <b>5000 KATY MILLS CIRCLE KATY, TX 77494</b>
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>ADVERTISING EXPENSE</b>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>6/5/19</b>	Payee name <b>BASS PRO SHOPS</b>
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Amount (\$) <b>\$595.34</b>	Payee address; City; State; Zip Code <b>5000 KATY MILLS CIRCLE KATY, TX 77494</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>ADVERTISING EXPENSE</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>5/29/19</b>	Payee name <b>CAVEMAN ARMS</b>
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Amount (\$) <b>\$125.00</b>	Payee address; City; State; Zip Code <b>37888 BETKA RD HEMPSTEAD, TX 77445</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>ADVERTISING EXPENSE</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME TROY GUIDRY	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 6/8/19	<b>5</b> Payee name ROYAL FFA ADVISORY COMM
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<b>6</b> Amount (\$) \$600.00	<b>7</b> Payee address; City; State; Zip Code PO BOX 816 PATTISON, TX 77466
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) CONTRIBUTION / DONATIONS MADE BY CANDIDATE	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 6/8/19	Payee name ROYAL FFA ADVISORY COMM.
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Amount (\$) \$130.00	Payee address; City; State; Zip Code PO BOX 816 PATTISON, TX 77466
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) CONTRIBUTION / DONATIONS MADE BY CANDIDATE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 6/19/19	Payee name WALLER AREA CHAMBER OF COMMERCE
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Amount (\$) \$200.00	Payee address; City; State; Zip Code PO BOX 53 WALLER, TX 77484
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# 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  
Credit Card Payment

Event Expense  
Fees  
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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME <b>TROY GUIDRY</b>		3 Filer ID (Ethics Commission Filers)	
4 Date <b>6/25/19</b>		5 Payee name <b>FRIENDS OF NRA</b>			
6 Amount (\$) <b>\$400.00</b>		7 Payee address; City; State; Zip Code <b>11250 WAPLES MILL ROAD FAIRFAX, VA 22030</b>			
8 <b>PURPOSE OF EXPENDITURE</b>		(a) Category (See Categories listed at the top of this schedule) <b>CONTRIBUTION/DONATION MADE BY CANDIDATE</b>		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought		Office held	
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Date <b>4/22/19</b>		Payee name <b>DUSTIN STERLING</b>			
Amount (\$) <b>\$1500.00</b>		Payee address; City; State; Zip Code <b>19836 SCOTT GARDNER ROAD NEW CANEY, TX 77357</b>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <b>FOOD/ BEVERAGE EXPENSE</b>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought		Office held	
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Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought		Office held	
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