

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH  
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.		<b>1</b> Filer ID (Ethics Commission Filers)	<b>2</b> Total pages filed: 11
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR                      FIRST    MI <p style="text-align: center; margin: 0;"><b>Marty</b></p> <hr style="border-top: 1px dotted black;"/> NICKNAME                                      LAST    SUFFIX <p style="text-align: center; margin: 0;"><b>Leonard</b></p>	<b>OFFICE USE ONLY</b> Date Received <div style="text-align: center; border: 1px solid blue; padding: 5px; color: blue; font-weight: bold; font-size: 1.2em;">RECEIVED</div> <div style="text-align: center; color: red; font-weight: bold; font-size: 1.2em;">JUL 12 2019</div> BY: <i>ET</i>	
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;    APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE <p style="text-align: center; margin: 0;"><b>1411 Shady Oaks Lane Fort Worth TX 76107</b></p>	Date Hand-delivered or Date Postmarked <p style="text-align: center; margin: 0;"><b>7-12-19</b></p>	
<b>5</b> CANDIDATE / OFFICEHOLDER PHONE	AREA CODE                      PHONE NUMBER    EXTENSION ( 817 )                      738-2424	Receipt #	Amount \$
<b>6</b> CAMPAIGN TREASURER NAME	MS / MRS / MR                      FIRST    MI <p style="text-align: center; margin: 0;"><b>Elaine</b></p> <hr style="border-top: 1px dotted black;"/> NICKNAME                                      LAST    SUFFIX <p style="text-align: center; margin: 0;"><b>Petrus</b></p>	Date Processed	
<b>7</b> CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);    APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE <p style="text-align: center; margin: 0;"><b>3736 Country Club Circle Fort Worth TX 76107</b></p>		
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE                      PHONE NUMBER    EXTENSION ( 817 )                      924-8898		
<b>9</b> REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
<b>10</b> PERIOD COVERED	Month                      Day                      Year    Month                      Day                      Year <p style="text-align: center; margin: 0;"><b>04 / 25 / 2019                      THROUGH                      06 / 30 / 2019</b></p>		
<b>11</b> ELECTION	ELECTION DATE Month                      Day                      Year <p style="text-align: center; margin: 0;"><b>05 / 04 / 2019</b></p>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
<b>12</b> OFFICE	OFFICE HELD (if any) <b>Director, Tarrant Regional Water District Board</b>	<b>13</b> OFFICE SOUGHT (if known) <b>Director, Tarrant Regional Water District Board</b>	

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# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME **Marty Leonard** 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 checked="" type="checkbox"/> SPECIFIC  <input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME
		Tarrant Water Alliance
	COMMITTEE ADDRESS	3327 Winthrop Avenue, Suite 208 Fort Worth, Texas 76116
	COMMITTEE CAMPAIGN TREASURER NAME	Vic Henderson
	COMMITTEE CAMPAIGN TREASURER ADDRESS	3327 Winthrop Avenue, Suite 208 Fort Worth, Texas 76116

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 55,405.49
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 53,512.12
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 1,000.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 6,487.88

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.

*Martha V. Leonard*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Martha V. Leonard, this the 12<sup>th</sup> day of July, 2019, to certify which, witness my hand and seal of office.

*Ellen Tingey*  
Signature of officer administering oath

Ellen Tingey  
Printed name of officer administering oath

Notary Public  
Title of officer administering oath

# SUBTOTALS - C/OH

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

19 FILER NAME

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 20,050.00
2.	<input checked="" type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 35,355.49
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	\$ 53,512.12
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:  
5

2 FILER NAME  
Marty Leonard

3 Filer ID (Ethics Commission Filers)

4 Date  
4/25/2019

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

7 Amount of contribution (\$)  
500.00

6 Contributor address; City; State; Zip Code  
201 Main Street #1310 Fort Worth TX 76102

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
4/25/19

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Paul E Andrews, Jr.

Amount of contribution (\$)  
2500.00

Contributor address; City; State; Zip Code  
700 Jenkins Rd. Aledo TX 76008

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
4/25/19

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

Amount of contribution (\$)  
250.00

Contributor address; City; State; Zip Code  
3707 Camp Bowie Blvd #300 Fort Worth TX 76107

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
4/25/19

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

Amount of contribution (\$)  
7500.00

Contributor address; City; State; Zip Code  
1701 River Run #308 Fort Worth TX 76107

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:  
5

2 FILER NAME  
Marty Leonard

3 Filer ID (Ethics Commission Filers)

4 Date  
4/26/2019

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

7 Amount of contribution (\$)  
50.00

6 Contributor address; City; State; Zip Code  
3718 Clarke Ave Fort Worth TX 76107

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
4/26/2019

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
HDR, INC. PAC

Amount of contribution (\$)  
1000.00

Contributor address; City; State; Zip Code  
600 W 6th St #200 Fort Worth TX 76107

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
4/29/2019

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

Amount of contribution (\$)  
250.00

Contributor address; City; State; Zip Code  
1800 Western Ave Fort Worth TX 76107

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
4/30/2019

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

Amount of contribution (\$)  
100.00

Contributor address; City; State; Zip Code  
PO Box 121488 Fort Worth TX 76121

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:  
5

2 FILER NAME

Marty Leonard

3 Filer ID (Ethics Commission Filers)

4 Date

5/1/2019

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

Scott Kleberg

6 Contributor address; City; State; Zip Code

301 Commerce St #1300 Fort Worth TX 76102

7 Amount of contribution (\$)

500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

5/2/2019

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

Robert Lansford

Contributor address; City; State; Zip Code

6900 Baltusrol Fort Worth TX 76132

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/7/2019

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

Michael & Linda Bourland

Contributor address; City; State; Zip Code

6912 Camino Ct Fort Worth TX 76126

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/7/2019

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

Jacobs CH2M Employees Texas State PAC

Contributor address; City; State; Zip Code

1999 Bryant St #1200 Dallas TX 75201

Amount of contribution (\$)

1000.00

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:  
5

2 FILER NAME  
Marty Leonard

3 Filer ID (Ethics Commission Filers)

4 Date  
5/8/2019

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Margaret & Jim DeMoss  
6 Contributor address; City; State; Zip Code  
2600 W 7th St #2644 Fort Worth TX 76107

7 Amount of contribution (\$)  
50.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Bill Barnes  
Contributor address; City; State; Zip Code  
2716 Heritage Hills Dr Fort Worth TX 76109

Amount of contribution (\$)  
250.00

5/10/2019

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Scott & Sally Mooring  
Contributor address; City; State; Zip Code  
3710 Avimore Fort Worth TX 76109

Amount of contribution (\$)  
100.00

6/10/2019

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
PSEL PAC  
Contributor address; City; State; Zip Code  
201 Main Street #2500 Fort Worth TX 76102

Amount of contribution (\$)  
2500.00

6/26/2019

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: 5
2 FILER NAME Marty Leonard		3 Filer ID (Ethics Commission Filers)
4 Date 6/26/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Good Government Fund 6 Contributor address; City; State; Zip Code 201 Main Street #2500 Fort Worth TX 76102	7 Amount of contribution (\$) 2500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
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: 2	
2 FILER NAME Marty Leonard		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 5/03/2019	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tarrant Water Alliance 7 Contributor address; City; State; Zip Code 3327 Winthrop Ave #208 Fort Worth TX 76116	8 Amount of Contribution \$ 5000.00	9 In-kind contribution description Social media advertising <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 5/03/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tarrant Water Alliance Contributor address; City; State; Zip Code 3327 Winthrop Ave #208 Fort Worth TX 76116	Amount of Contribution \$ 757.75	In-kind contribution description printing <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	
2 FILER NAME Marty Leonard		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 5/03/2019	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tarrant Water Alliance	8 Amount of Contribution \$ 4725.00	9 In-kind contribution description grassroots activities
7 Contributor address; City; State; Zip Code 3327 Winthrop Ave #208 Fort Worth TX 76116		<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 5/03/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tarrant Water Alliance	Amount of Contribution \$ 24,872.74	In-kind contribution description direct mail
Contributor address; City; State; Zip Code 3327 Winthrop Ave #208 Fort Worth TX 76116		<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: 1	<b>2</b> FILER NAME  Marty Leonard	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 05/03/2019	<b>5</b> Payee name Tarrant Water Alliance	
<b>6</b> Amount (\$) 45,000.00	<b>7</b> Payee address; City; State; Zip Code 3327 Winthrop Ave #208 Fort Worth TX 76116	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Contribution	<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  Contribution
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 06/30/2109	Payee name Marty Leonard	
Amount (\$) 8512.12	Payee address; City; State; Zip Code 1411 Shady Oaks Ln Fort Worth TX 76107	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Loan Repayment	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	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 <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	

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