

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 12
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Rawley	OFFICE USE ONLY	
	NICKNAME LAST SUFFIX McCoy		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 302 Whispering Creek St. Victoria, TX 77904	Date Received APR 26 2019 RECEIVED City Secretary 9:35am <i>CS</i>	
	Date Hand-delivered or Date Postmarked APR 26 2019 9:35am <i>CS</i>		
	Receipt #	Amount	
	Date Processed	Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Spencer		
	NICKNAME LAST SUFFIX Klotzman		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 603 E. Mesquite Ln. Victoria, TX 77901		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION 361-485-9312		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input 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 checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month Day Year Month Day Year 03/26/2019 THROUGH 04/24/2019		
10 ELECTION	ELECTION DATE Month Day Year 05/04/2019	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) None	12 OFFICE SOUGHT (if known) Mayor	

GO TO PAGE 2

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

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

2 of 12

13 C / OH NAME McCoy, Rawley	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S)
 Additional Pages

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.

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

16 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	3,077.50
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	1.75
	4.	TOTAL POLITICAL EXPENDITURES	\$	27,321.93
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	10,536.57
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	30,000.00

17 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.

[Handwritten Signature]

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Rawley McCoy, this the twenty-fifth (25) day of April, 2019, to certify which, witness my hand and seal of office.

[Handwritten Signature: Karen S. Pantel]
Signature of officer administering

Karen Pantel
Printed name of officer administering

Notary Public
Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME McCoy, Rawley	19 Filer ID
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20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,165.00
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 912.50
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 20,000.00
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 27,150.84
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 171.09
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES 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: Sch: 1/4 Rpt: 4/12
2 FILER NAME McCoy, Rawley		3 Filer ID
4 Date 04/24/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ajrami, Heidi	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 104 Wildrose Victoria, TX 77904		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/24/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baass, Allen	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 4700 SW Moody St Victoria, TX 77905		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/02/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cain, Teresa & Alan	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code 708 W. Stayton Victoria, TX 77901		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/28/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crain, O. C. "Bebe"	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 11718 Persuasion San Antonio, TX 78216		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/16/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Day, Donald	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 207 Brocton Victoria, TX 77904		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/4 Rpt: 5/12
2 FILER NAME McCoy, Rawley		3 Filer ID
4 Date 04/10/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Engel, David S (Mrs.)	7 Amount of Contribution (\$) \$150.00
6 Contributor address; City; State; Zip Code 6112 Country Club Dr Victoria, TX 77904		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/02/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J & D Services	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code PO Box 5114 Victoria, TX 77903		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/02/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnston, Sara S. (Mrs.)	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code 6001 A Country Club Dr. Victoria, TX 77904-1608		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/02/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kopecky M.D., Alfred Allen	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 112 Hollywood Blvd Victoria, TX 77904-1643		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/02/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKay, Bonnie & Robert	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code 609 E Mockingbird Ln Victoria, TX 77904		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/4 Rpt: 6/12
2 FILER NAME McCoy, Rawley		3 Filer ID
4 Date 04/02/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pall, Christina	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code 235 Holly Dr. Victoria, TX 77905		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/24/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rachid, Omar	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 8231 Meadow Rd #1141 Dallas, TX 75231		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/27/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rippstein, Diana & Ken	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 303 Woodway Dr. Victoria, TX 77904		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/02/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCT Building Systems	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 701 E Mockingbird Ln Victoria, TX 77904		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/24/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlenken, Austin	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 501 E Larkspur Apt 2005 Victoria, TX 77904		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/4 Rpt: 7/12
2 FILER NAME McCoy, Rawley		3 Filer ID
4 Date 04/19/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Witte, Lori & Daniel <hr/> 6 Contributor address; City; State; Zip Code 1079 Dodd Rd Inez, TX 77968	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 8/12	
2 FILER NAME McCoy, Rawley		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 04/18/2019	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvarez, Emmet 7 Contributor address; City; State; Zip Code P.O. Box 282 Victoria, TX 77902	8 Amount of contribution (\$) \$300.00	9 In-kind contribution description Advertising Expense
<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 04/02/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvarez, Emmet Contributor address; City; State; Zip Code P.O. Box 282 Victoria, TX 77902	Amount of contribution (\$) \$212.50	In-kind contribution description Advertising
<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)			
Date 04/22/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyna, Ron Contributor address; City; State; Zip Code 703 Chaparral Dr Victoria, TX 77905	Amount of contribution (\$) \$400.00	In-kind contribution description Advertising
<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)			

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 9/12
2 FILER NAME McCoy, Rawley		3 Filer ID
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 04/19/2019	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) McCoy, Rawley	9 Loan Amount (\$) \$20,000.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 302 Whispering Creek St Victoria, TX 77904	10 Interest Rate 0
		11 Maturity Date 12/31/2019
12 Principal occupation / Job title (See Instructions) Architect		13 Employer (See Instructions) Rawley McCoy & Associates
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)

POLITICAL EXPENDITURES 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: Sch: 1/2 Rpt: 10/12	2 FILER NAME McCoy, Rawley	3 Filer ID
4 Date 04/12/2019	5 Payee name Golden Crescent Habitat for Humanity	
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 4103 N Navarro St. #200 Victoria, TX 77901	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Backyard Boil
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/28/2019	Payee name John & Judy Clegg Investments Ltd.	
Amount (\$) \$300.00	Payee address; City; State; Zip Code 16400 NW Zac Lentz Pkwy Victoria, TX 77905	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Cleaning Fee for Event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/19/2019	Payee name Lopez Broadcasting	
Amount (\$) \$300.00	Payee address; City; State; Zip Code P.O. Box 407 Victoria, TX 77901	
PURPOSE OF EXPENDITURE	(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 Radio Advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES 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: Sch: 2/2 Rpt: 11/12	2 FILER NAME McCoy, Rawley	3 Filer ID
4 Date 04/02/2019	5 Payee name Patterson & Company	
6 Amount (\$) \$10,301.23	7 Payee address; City; State; Zip Code 166 Hargraves Dr Ste# C-400, Box 423 Austin, TX 78737	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Campaign Materials, Advertising & Consulting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/19/2019	Payee name Patterson & Company	
Amount (\$) \$15,697.86	Payee address; City; State; Zip Code 166 Hargraves Dr Ste# C-400, Box 423 Austin, TX 78737	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Advertising, Campaign Materials
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/02/2019	Payee name Revista de Victoria	
Amount (\$) \$350.00	Payee address; City; State; Zip Code P.O. Box 1412 Victoria, TX 77902	
PURPOSE OF EXPENDITURE	(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 Print Advertisement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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 G: Sch: 1/1 Rpt: 12/12	2 FILER NAME McCoy, Rawley	3 Filer ID
4 Date 04/24/2019	5 Payee name Capital One Mastercard	
6 Amount (\$) \$48.86 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 71083 Charlotte, NC 28272-1083	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Credit Card Charges for Campaign Rally
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/24/2019	Payee name Chase Visa	
Amount (\$) \$122.23 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 6294 Carol Stream, IL 60197-6294	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Charges for Campaign Rally
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held