

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: <u>Dr</u> FIRST: <u>Steven</u> MI: <u>C</u> NICKNAME: _____ LAST: <u>Hobbs</u> SUFFIX: _____	OFFICE USE ONLY Date Received <div style="border: 2px solid blue; padding: 5px; text-align: center; 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;">AUG 23 2022</div> BY: <u>[Signature]</u> Date Hand-delivered or Date Postmarked Receipt # _____ Amount \$ _____ Date Processed _____ Date Imaged _____	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <u>1706 Harvard Ave Big Spring TX 79720</u>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <u>(432) 352-8315</u>		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR: _____ FIRST: <u>Edward</u> MI: _____ NICKNAME: _____ LAST: <u>Moughon</u> SUFFIX: _____		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <u>1607 THORPE ST Big Spring TX 79720</u>		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <u>(432) 816-7252</u>		
9 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 checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year <u>JAN / 1 / 2022</u> THROUGH <u>6 / 30 / 2022</u>		
11 ELECTION	ELECTION DATE Month Day Year <u>11 / 8 / 2022</u>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) <u>Howard County Judge</u>	
14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> 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.		
<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE COMMITTEE NAME _____ COMMITTEE ADDRESS _____ COMMITTEE CAMPAIGN TREASURER NAME _____ COMMITTEE CAMPAIGN TREASURER ADDRESS _____		

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JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 2

15 JC/OH NAME <u>Dr Steven C Hobbs</u>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ <u>2005</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2005
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>Ø</u>

18 SIGNATURE 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 of Candidate/Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ this the _____ day of _____, 20 _____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Steven Hobbs, and my date of birth is 12/17/1981.

My address is 1706 Harvard (street), Big Spring (city), TX (state), 79720 (zip code), USA (country).

Executed in Howard County, State of Texas, on the 30th day of June, 20 22.

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - JC/OH

FORM JC/OH
COVER SHEET PG 3

19 FILER NAME

Dr Steven Hobbs

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2005
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
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	\$
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 622.41
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 622.41
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	\$ 300.00
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	\$

622.41
300.00

922.41

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 3
2 FILER NAME Dr Steven Hobbs		3 Filer ID (Ethics Commission Filers)
4 Date 1/31/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Stephen Turner	7 Amount of contribution (\$) \$100⁰⁰
6 Contributor address; City; State; Zip Code 1403 Aylesford Big Springs TX 79720		
8 Contributor's principal occupation Retired		9 Contributor's job title NA
10 Contributor's employer/law firm NA		11 Law firm of contributor's spouse (if any) NA
12 If contributor is a child, law firm of parent(s) (if any) NA		
Date 1/31/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Mariann Williams	Amount of contribution (\$) 25⁰⁰
Contributor address; City; State; Zip Code 206 Circle Dr Big Springs TX 79720		
Contributor's principal occupation Retired		Contributor's job title NA
Contributor's employer/law firm NA		Law firm of contributor's spouse (if any) NA
If contributor is a child, law firm of parent(s) (if any) NA		
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Ed Moughon	Amount of contribution (\$) \$40⁰⁰
Contributor address; City; State; Zip Code 1607 Thorpe St Big Springs TX 79720		
Contributor's principal occupation Retired		Contributor's job title NA
Contributor's employer/law firm NA		Law firm of contributor's spouse (if any) NA
If contributor is a child, law firm of parent(s) (if any) NA		

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 (JUDICIAL)

SCHEDULE A(J)1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 8
2 FILER NAME Dr Steven Hobbs		3 Filer ID (Ethics Commission Filers)
4 Date 2/7/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Stephen Turner	7 Amount of contribution (\$) 50⁰⁰
6 Contributor address; City; State; Zip Code 1403 Aylesford Big Springs TX 79720		
8 Contributor's principal occupation Retired		9 Contributor's job title NA
10 Contributor's employer/law firm NA		11 Law firm of contributor's spouse (if any) NA
12 If contributor is a child, law firm of parent(s) (if any) NA		
Date 2/7/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Suzanne Marckwell	Amount of contribution (\$) 20⁰⁰
Contributor address; City; State; Zip Code Big Springs TX 79720		
Contributor's principal occupation Retired		Contributor's job title NA
Contributor's employer/law firm NA		Law firm of contributor's spouse (if any) NA
If contributor is a child, law firm of parent(s) (if any) NA		
Date 2/7/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Priscilla Corbett	Amount of contribution (\$) 200⁰⁰
Contributor address; City; State; Zip Code 400 E 16th ST Big Springs TX 79720		
Contributor's principal occupation Retired		Contributor's job title NA
Contributor's employer/law firm NA		Law firm of contributor's spouse (if any) NA
If contributor is a child, law firm of parent(s) (if any) NA		

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
(JUDICIAL)**

SCHEDULE A(J)1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 8
2 FILER NAME Dr Steven Hobbs		3 Filer ID (Ethics Commission Filers)
4 Date 2/7/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ GLORIA BAINES	7 Amount of contribution (\$) 20⁰⁰
6 Contributor address; City; State; Zip Code 306 Circle Dr Big Spring TX 79720		
8 Contributor's principal occupation Retired		9 Contributor's job title NA
10 Contributor's employer/law firm NA		11 Law firm of contributor's spouse (if any) NA
12 If contributor is a child, law firm of parent(s) (if any) NA		
Date 2/14/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Howard BAINES	Amount of contribution (\$) 50⁰⁰
Contributor address; City; State; Zip Code 306 Circle Dr Big Spring TX 79720		
Contributor's principal occupation Retired		Contributor's job title NA
Contributor's employer/law firm NA		Law firm of contributor's spouse (if any) NA
If contributor is a child, law firm of parent(s) (if any) NA		
Date 3/7/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ KATHY SALAZAR	Amount of contribution (\$) 500⁰⁰
Contributor address; City; State; Zip Code 808 W 17th St Big Spring TX 79720		
Contributor's principal occupation Retired		Contributor's job title NA
Contributor's employer/law firm NA		Law firm of contributor's spouse (if any) NA
If contributor is a child, law firm of parent(s) (if any) NA		

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
(JUDICIAL)**

SCHEDULE A(J)1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 8
2 FILER NAME Dr Steven Hobbs		3 Filer ID (Ethics Commission Filers)
4 Date 3/7/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Stephen Turner	7 Amount of contribution (\$) 50⁰⁰
	6 Contributor address; City: State; Zip Code 1403 Aylesford Big Springs TX 79720	
8 Contributor's principal occupation Retired		9 Contributor's job title NA
10 Contributor's employer/law firm NA		11 Law firm of contributor's spouse (if any) NA
12 If contributor is a child, law firm of parent(s) (if any) NA		
Date 3/7/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Tim Sliger	Amount of contribution (\$) 100⁰⁰
	Contributor address; City: State; Zip Code 3615 Dixon Big Springs TX 79720	
Contributor's principal occupation ACCOUNTANT		Contributor's job title ACCOUNTANT
Contributor's employer/law firm NA		Law firm of contributor's spouse (if any) NA
If contributor is a child, law firm of parent(s) (if any) NA		
Date 3/7/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Edward Moughon	Amount of contribution (\$) 25⁰⁰
	Contributor address; City: State; Zip Code 1607 TARBIDE ST Big Springs TX 79720	
Contributor's principal occupation Retired		Contributor's job title NA
Contributor's employer/law firm NA		Law firm of contributor's spouse (if any) NA
If contributor is a child, law firm of parent(s) (if any) NA		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 8
2 FILER NAME Dr Steven Hobbs		3 Filer ID (Ethics Commission Filers)
4 Date 3/19/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Suzanne Markwell	7 Amount of contribution (\$) 20⁰⁰
	6 Contributor address; City; State; Zip Code Big Springs TX 79720	
8 Contributor's principal occupation Retired		9 Contributor's job title NA
10 Contributor's employer/law firm NA		11 Law firm of contributor's spouse (if any) NA
12 If contributor is a child, law firm of parent(s) (if any) NA		
Date 3/19/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Becky Moughon	Amount of contribution (\$) 40⁰⁰
	Contributor address; City; State; Zip Code 1607 Thorpe St Big Springs TX 79720	
Contributor's principal occupation Retired		Contributor's job title NA
Contributor's employer/law firm NA		Law firm of contributor's spouse (if any) NA
If contributor is a child, law firm of parent(s) (if any) NA		
Date 3/19/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Dana Turner	Amount of contribution (\$) 100⁰⁰
	Contributor address; City; State; Zip Code 1403 Aylesford Big Springs TX 79720	
Contributor's principal occupation Retired		Contributor's job title NA
Contributor's employer/law firm NA		Law firm of contributor's spouse (if any) NA
If contributor is a child, law firm of parent(s) (if any) NA		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 8
2 FILER NAME Dr Steven Hobbs		3 Filer ID (Ethics Commission Filers)
4 Date 3/21/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Ed Vinson	7 Amount of contribution (\$) 50⁰⁰
	6 Contributor address: City: State: Zip Code 1708 37th ST Snyder TX 79549	
8 Contributor's principal occupation Retired		9 Contributor's job title NA
10 Contributor's employer/law firm NA		11 Law firm of contributor's spouse (if any) NA
12 If contributor is a child, law firm of parent(s) (if any) NA		
Date 3/19/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Lisa Frany	Amount of contribution (\$) 25⁰⁰
	Contributor address: City: State: Zip Code Big Springs TX 79720	
Contributor's principal occupation Social worker		Contributor's job title V.A Social worker
Contributor's employer/law firm NA		Law firm of contributor's spouse (if any) NA
If contributor is a child, law firm of parent(s) (if any) NA		
Date 3/21/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Stephen Turner	Amount of contribution (\$) 50⁰⁰
	Contributor address: City: State: Zip Code 1403 Aylesford Big Springs TX 79720	
Contributor's principal occupation Retired		Contributor's job title NA
Contributor's employer/law firm NA		Law firm of contributor's spouse (if any) NA
If contributor is a child, law firm of parent(s) (if any) NA		

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
(JUDICIAL)**

SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 8
2 FILER NAME Dr Steven Hobbs		3 Filer ID (Ethics Commission Filers)
4 Date 4/25/22	5 Full name of contributor: <input type="checkbox"/> out-of-state PAC ID#: _____ Suzanne Markwell	7 Amount of contribution (\$) 20⁰⁰
6 Contributor address; City; State; Zip Code Big Spring TX 79720		
8 Contributor's principal occupation Retired		9 Contributor's job title NA
10 Contributor's employer/law firm NA		11 Law firm of contributor's spouse (if any) NA
12 If contributor is a child, law firm of parent(s) (if any) NA		
Date 5/16/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Steven Turner	Amount of contribution (\$) 20⁰⁰
Contributor address; City; State; Zip Code 1403 Aylesford Big Spring TX 79720		
Contributor's principal occupation Retired		Contributor's job title NA
Contributor's employer/law firm NA		Law firm of contributor's spouse (if any) NA
If contributor is a child, law firm of parent(s) (if any) NA		
Date 6/4/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ John Ferguson	Amount of contribution (\$) 100⁰⁰
Contributor address; City; State; Zip Code 6556 43rd St Lubbock, TX 79407		
Contributor's principal occupation Retired		Contributor's job title NA
Contributor's employer/law firm NA		Law firm of contributor's spouse (if any) NA
If contributor is a child, law firm of parent(s) (if any) NA		

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 (JUDICIAL)

SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

The instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 8
2 FILER NAME Dr Steven Hobbs		3 Filer ID: (Ethics Commission Filers)
4 Date 6/4/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Roder Flew	7 Amount of contribution (\$) 100⁰⁰
	6 Contributor address; City; State; Zip Code 1208 E 17th Big Springs TX 79720	
8 Contributor's principal occupation Retired		9 Contributor's job title NA
10 Contributor's employer/law firm NA		11 Law firm of contributor's spouse (if any) NA
12 If contributor is a child, law firm of parent(s) (if any) NA		
Date 6/27/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Priscilla Corbett	Amount of contribution (\$) 300⁰⁰
	Contributor address; City; State; Zip Code 400 E 16th Big Springs TX 79720	
Contributor's principal occupation Retired		Contributor's job title NA
Contributor's employer/law firm NA		Law firm of contributor's spouse (if any) NA
If contributor is a child, law firm of parent(s) (if any) NA		
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	
6 Amount (\$)	7 Payee address;	City; State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(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 <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
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 <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
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 <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