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 (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST NICKNAME NICKNAME LAST MALE MALE	MI) SUFFIX	OFFICE USE ONLY Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address 5 CANDIDATE / OFFICEHOLDER PHONE	ADDRESS / PO BOX; APT / SUITE #; CO BOX 49 (4) Will berly (X) AREA CODE PHONE NUMBER (5/2) SHY ZOO	EXTENSION	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS/MRS/MR NICKNAME NICKNAME NICKNAME NICKNAME NICKNAME	MI SUFFIX	Receipt # Amount \$ Date Processed Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SU AD BY 4/2(4) Wherly 7	IITE#; CITY; STATE;	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (5/2) 738 / Story	EXTENSION	A STATE
9 REPORT TYPE	July 15 8th day before elect		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year 7	THROUGH /2/	Day Year 3/ // 7
11 ELECTION	ELECTION DATE Month Day Year Prifnary General	ELECTION TYPE Runoff Other Description Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	
	GO TO P	PAGE 2	

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME	. ands	es Cable	15 Filer ID (Ethics Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S)	SUPPORT THE CAN	NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL MIDDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN INSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REURES.	MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S
	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL		
	SPECIFIC	COMMITTEE ADDRESS	
1/0			
		COMMITTEE CAMPAIGN TREASURER NAME	
Additional Pages			
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
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17 CONTRIBUTION TOTALS	1. TOTAL P PLEDGE	OLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTH S, LOANS, OR GUARANTEES OF LOANS), UNLESS	ER THAN ITEMIZED \$
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LO	* 7400
EXPENDITURE TOTALS		OLITICAL EXPENDITURES OF \$100 OR LESS, ITEMIZED	*
	4. TOTAL	POLITICAL EXPENDITURES	\$3 488.52
CONTRIBUTION BALANCE	5. TOTAL P	OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE DRTING PERIOD	\$3 488.52 LAST DAY \$ 1656 48
OUTSTANDING LOAN TOTALS	6. TOTAL P	RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS A Y OF THE REPORTING PERIOD	S OF THE \$
18 AFFIDAVIT			
My Cor	RY L GRIFFIN mmission Expires ember 11, 2019		all information required to be reported by me
AFFIX NOTARY STAMP	P/SEALABOVE	Signature o	Candidate or Office holder
Sworn to and subscri	bed before me, b	y the said ANDREW CARLE	this the 16-
day of LANDI	4,20 18 ,t	o certify which, witness my hand and seal of c	ffice.
A.J	Aff.	- GARY L. GRIFFI	Normey Public
Signature of officer ad	dministering oath	Printed name of officer administering oath	Title of officer administering oath

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 5 Date 6 Full name of contributor out-of-state PAC (ID#:	1 Total pages Schedule A2: 3 Filer ID (Ethics Commission Filers) 8 Amount of 9 In-kind contribution description 50 July Check if travel outside of Texas. Complete Schedule T. (FOR NON-JUDICIAL) (See Instructions)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 5 Date 6 Full name of contributor out-of-state PAC (IDE: O O T Contributor address: City: State; Zip Code 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) 11 Employer 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor out-of-state PAC (IDE: Out-of-state PAC (IDE:	\$ Amount of Solution of Contribution should be scription Solution
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Old 7 Contributor address: City: State; Zip Code 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) 11 Employer 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) 16 If contributor address: City: State; Zip Code Principal occupation / Job title (FOR NON-JUDICIAL) Employer 17 Code 18 Contributor 18 Contributor 19 Code 19 Co	Contribution \$. description Contribution \$. description Contribution \$. description Check if travel outside of Texas. Complete Schedule T. (FOR NON-JUDICIAL) (See Instructions)
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Date Full_name of contributor out-of-state PAC (ID#:) OWN	of contributor's spouse (if any) (FOR JUDICIAL)
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If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	:
	V.

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILERNAME On drew Cable	Piler ID (Ethics Con	mmission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$7400-
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 350 -
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$ —
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONT	RIBUTIONS	\$
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CO	ONTRIBUTIONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUND	s	\$3488.52
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A B	USINESS OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CON-	TRIBUTIONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTION RETURNED TO FILER	NS	\$

POLITICAL EXPENDITURES MADE 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/Reimbursiement 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)

	ine instruction Guide explains how	to complete this form.
1 Total pages Schedule G		The second secon
4 Date	5 Payee name	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sciedule)	(b) Description Check/fi tradel outside of Texas. Complete Schedule T. Check/fi Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/6	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$) Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$) Reimbursement from political contributions	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS S	SCHEDULE AS NEEDED

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 Mr. Morew Calole	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIB	BUTIONS \$
5 Date 6 Full name of contributor out-of-state PAC (ID#: Suri State; Zip Cod Wilbert XX 78	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 Full name of contributor out-of-state PAC (ID#:	Amount of Contribution \$ description Contribution \$ description Check if travel outside of Texas. Complete Schedule T.
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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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MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 4 Date 5 Full name of contributor 7 Amount of contribution (\$) out-of-state PAC (ID#:_ 6 Contributor address; City; State; Zip Code 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#:_ Amount of contribution (\$) Contributor address: City; State; Zip Code pstructions) Principal occupation / Job title (See Instructions) Employer (See Full name of contributor Date oul-of-state PAC (ID#: Amount of contribution (\$) Contributor address; City; State; Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) Contributor address; City; State; Zip Code 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.

July 2017 - December 2017

PAYEE	PAYEE ADDRESS	PURPOSE	CATEGORY	AMOUNT
Georgia Cable - Cable's Custom Catering	Wimberley	event catering	CATEGORI	\$150.00
Rebecca Cable - Cable's Custom Catering	Wimberley	event catering		\$200.00
Mad Rooster	Driftwood	event beverages		
Waters Point	Wimberley	event venue	-	\$150.00
Caleb Cable - Bartender	Wimberley	event bartender		\$300.00
B&J Tees	San Marcos	event hats		\$50.00
MUN Donation	Wimberley	WISD MUN		\$222.69
Tractor Supply	San Marcos			\$100.00
Scott Field	Sall Ivial COS	event supplies		\$179.31
Rebecca Cable - Hays County Highstepper	\A/:	political donation		\$25.00
Cindi Carter		Pointsettia Fundra	ser	\$200.00
Chubbys Firesworks	Wimberley	staff lunch		\$90.00
	Wimberley	event party		\$207.00
Andrew Cable	Wimberley	Loan repay		\$500.00
HEB	Wimberley	event food		\$44.33
VFW Rodeo	Wimberley	sponsorship		\$650.00
B&J Tees	San Marcos	cups		\$177.09
Eagle Mountain Flags	Wimberley	flags		\$34.90
Wimberley Valley GOP	Wimberley	sponsorship		\$30.00
B&J Tees	San Marcos	t-shirts		\$178.20
			7074	
			TOTAL	\$3,488.52

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