

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	<div style="display: flex; justify-content: space-between;"> <div>MS / MRS / MR NICKNAME</div> <div>FIRST Andrew</div> <div>MI W</div> </div> <hr/> <div style="display: flex; justify-content: space-between;"> <div>LAST Cable</div> <div>SUFFIX</div> </div>	OFFICE USE ONLY <div style="font-size: 1.2em; font-weight: bold;">Received</div> <div style="font-size: 1.2em; font-weight: bold;">JAN 13 2022</div> <div style="font-size: 1.2em; font-weight: bold;">Elections Office</div>									
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	<div style="display: flex; justify-content: space-between;"> <div>ADDRESS / PO BOX;</div> <div>APT / SUITE #;</div> <div>CITY;</div> <div>STATE;</div> <div>ZIP CODE</div> </div> <p>PO Box 446 Wimberley TX 78676</p>										
5 CANDIDATE / OFFICEHOLDER PHONE	<div style="display: flex; justify-content: space-between;"> <div>AREA CODE</div> <div>PHONE NUMBER</div> <div>EXTENSION</div> </div> <p>512 847-2000</p>										
6 CAMPAIGN TREASURER NAME	<div style="display: flex; justify-content: space-between;"> <div>MS / MRS / MR NICKNAME</div> <div>FIRST Rubeen</div> <div>MI R</div> </div> <hr/> <div style="display: flex; justify-content: space-between;"> <div>LAST Cable</div> <div>SUFFIX</div> </div>										
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	<div style="display: flex; justify-content: space-between;"> <div>STREET ADDRESS (NO PO BOX PLEASE);</div> <div>APT / SUITE #;</div> <div>CITY;</div> <div>STATE;</div> <div>ZIP CODE</div> </div> <p>PO Box 446, Wimberley TX 78676</p>										
8 CAMPAIGN TREASURER PHONE	<div style="display: flex; justify-content: space-between;"> <div>AREA CODE</div> <div>PHONE NUMBER</div> <div>EXTENSION</div> </div> <p>512 738 1004</p>										
9 REPORT TYPE	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input checked="" type="checkbox"/> January 15</div> <div style="width: 50%;"><input type="checkbox"/> 30th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Runoff</div> <div style="width: 50%;"><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</div> <div style="width: 50%;"><input type="checkbox"/> July 15</div> <div style="width: 50%;"><input type="checkbox"/> 8th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Exceeded Modified Reporting Limit</div> <div style="width: 50%;"><input type="checkbox"/> Final Report (Attach C/OH - FR)</div> </div>										
10 PERIOD COVERED	<div style="display: flex; justify-content: space-between;"> <div> Month Day Year 7 / 1 / 21 </div> <div>THROUGH</div> <div> Month Day Year 12 / 31 / 21 </div> </div>										
11 ELECTION	<div style="display: flex; justify-content: space-between;"> <div> ELECTION DATE Month Day Year / / </div> <div> ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special </div> </div>										
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)									
14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages		<p>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.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; padding: 5px;">COMMITTEE TYPE</td> <td style="padding: 5px;">COMMITTEE NAME</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> GENERAL</td> <td style="padding: 5px;">COMMITTEE ADDRESS</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> SPECIFIC</td> <td style="padding: 5px;">COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td style="padding: 5px;"></td> <td style="padding: 5px;">COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>		COMMITTEE TYPE	COMMITTEE NAME	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS
COMMITTEE TYPE	COMMITTEE NAME										
<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS										
<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME										
	COMMITTEE CAMPAIGN TREASURER ADDRESS										

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME

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)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$15090 -
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$6497 -
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$8195 ²²
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$1397 78

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 or 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 _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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 A1: <u>1</u>
2 FILER NAME <i>Andrew W. Cable</i>		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 6 Contributor address; City; State; Zip Code	7 Amount of contribution (\$)
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)
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.

RALLY TO SUPPORT JUDGE ANDREW CABLE

NAME	11-4-21	EMAIL	Scott Howe	
✓ Dick & Dodie Scott		House in Kud	500-	
✓ Ms. Johnson Kathy KATE		Cookies in Kud	500-	
✓ Vickie Alford		Food + CARDS in Kud	300-	
✓ Kelly Whigham 130 PARK DR SM 78666		DOOR + TABLE in Kud		
✓ Steve Whigham		MUSIC in Kud	500-	
✓ Walt Smith			\$100-	✓
✓ Judge DAVID Puryear		PO BOX 227 Driftwood 78619	\$100-	✓
✓ Jimmie + Barbara Steidinger		PO BOX 449 D.S. TX 78620	250-	✓
Norma Sherman		Driftwood Texas	50-	✓
Tom + Leslie Maxwell		11 Rock Hollow Circle Wmb.	100-	
✓ Anita Rios OSCAR P		6605 Mustang Valley Trl Wmb	250-	✓
✓ Dan + Rebecca Pruitt		328 Camelia Pkwy Kyle 78640	100-	✓
✓ Pat Combs		61 WAK Bonnet Wmb. 78676	100-	✓
✓ Shane Backoe		PO BOX 2737 Wmb.	100-	✓
✓ Ken Roberts		4000 FM 2325 Wmb.	100-	✓
✓ DAVID + CAULISA Kochmanski		1400 Longhorn Trl Wmb.	100-	✓
✓ Lon Shell "Jumper"		1908 W. McCarty Ln S.M 78666	100-	✓
✓ Jerry + Donna CAZARES		4300 FM 2325 Wmb.	100-	✓
✓ Mr + Mrs Eddie Gumbert		306 E. Summit dr. Wmb.	50-	✓
✓ Wendy Gumbert		14900 KRIZ Wmb. TX	40-	✓
✓ Christ + Kayla Anderson		4301 Lone Man Mountain Wmb	100-	✓
✓ ANN Mc Dorman		2 Lakewood Circle Wmb.	50-	✓
✓ BRIAN Olson		432 Stagecoach Tr. S.M. 78666	150-	✓
✓ SARALDINE Rodriguez ? DINA ?		2005 Hilltop Wmb. Michael ?	250-	✓
✓ JOHN URBAN		115 RIVER Bend Wmb.	300-	✓
✓ Phil + Alice LebKuecher		2000 BACKBONE Ridge S.M. 78666	200-	✓
✓ CHARLIE + Jessica Reinhart		419 Nicholas Ln Driftwood 78619	1000-	✓
✓ CRAIG + Candace Fore		PO BOX 1130 Wmb.	200-	✓
✓ Dale + Lorette Lowden		4995 Coanman Mountain Wmb	1000-	✓
✓ JOHN + Elia ANDERSON		305 RIVER OAK Dr. Wmb.	200-	✓
✓ Cindy Espinosa + ALAN		1101 Green Acres Wmb.	500-	✓
✓ TOM Keyser		341 Thomas OAKS Wmb	200-	✓

RALLY TO SUPPORT JUDGE ANDREW CABLE

NAME	EMAIL	
✓ MICAH BOWEN "Molly"	1650 Red Sky Rd Wimb.	200- ✓
✓ Glen Edgerly + Marianne	201 Green Acres Wimb.	200- ✓
✓ MATT + Natalie Meeks	PO BOX 1344 Wimb.	200- ✓
✓ PATRICK BURKE	219 Iron Rail D.S. 78620	150- ✓
✓ LIZ + Chris Danna	200 Shadow Valley Wimb.	100- ✓
✓ Z GRAMM	4710 W. US 290 D.S. 78620	50- ✓
JASON JONES	PO BOX 1502 Wimb TX 78676	50- ✓
✓ MARC + Deborah Salinas	1281 Haley's Way Buda 78610	100- ✓
✓ VICKI ALVORD	8 Canyon Creek Dr. Wimb.	500- ✓
✓ RON + Kathleen TANZMAN	1151 River Mountain Ranch Wimb	500- ✓
✓ Sherrie + Preston PARKS	200 E. Creek dr. D.S. 78620	500- ✓
✓ Scott Johnson (Jeniffer) ^{SABINO Ranch}	606 Sabino R.R. Wimb.	500- ✓
✓ Bob + Cassie PARKS	890 Moss Rose Ln. Driftwood 78619	500- ✓
✓ Richard + Rachel Cox	400 Clear Lake dr. Wimb.	250- ✓
✓ Pierce, DAVID	820 Sachtleban Wimb.	500- ✓
✓ Dr. Todd + Talie Henry	500 Old Oaks Ranch Wimb.	500- ✓
✓ Becky McCullough	821 South River Wimb	500- ✓
✓ Molly + Bruce Wundt	108 Cascade Trl S.M. 78666	250- ✓
✓ Gus + Cindy Lumina	100 Valley View Rd. Wimb.	250- ✓
✓ Britney Richey	PO BOX 1533 SM TX 78667	250- ✓
✓ Joet Patricia Malone	1186 Toro Pass Wimb.	250- ✓
✓ Bill + Jeanne Euler	430 Hays Co Acres D.S. 78620	250- ✓
✓ Chris + Camissa Smith	111 C Deer Crossing Ln Wimb.	250- ✓
monad ✓ Edward + Jennifer Moreland	104 Winn Wood Rd Wimb	400- ✓
✓ Mayor Lucy Johnson	1940 Gibraltar Dr. SM 78666	250- ✓
✓ JOHN + Amy Doucet	2300 Gatlin Creek dr. D.S. 78620	250- ✓
✓ Tim + Denise Cooper	460 Roy Baled Rd. D.S. 78620	200- ✓
✓ Victoria + Travis Cox	Alcohol in Kid	500- ✓
✓ Alyssa Blanks / ^{BRYAN Kelly}	Driver in Kid	100- ✓
✓ Russell Guynes	13501 RR12 #203 Wimb.	250- ✓
✓ Charles Soechting	3331 RR12 Suite 107A SM 78666	500- ✓
✓ Kaley GASSMANN	PO BOX 2623 Wimb.	50- ✓

11/20

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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 A2: 1/3	
2 FILER NAME Andrew W. Cable		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 1800 -	
5 Date 11/4/21	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Dick & Doree Scott	8 Amount of Contribution \$ 500 -	9 In-kind contribution description House
7 Contributor address; City; State; Zip Code Wimberley TX 78176		<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 11/4/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Kate Johnson	Amount of Contribution \$ 500	In-kind contribution description cookies
Contributor address; City; State; Zip Code Wimberley TX 78176		<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

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 A2: <u>2/3</u>	
2 FILER NAME <u>Andrew W. Cable</u>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ <u>1000 -</u>	
5 Date <u>11/4/21</u>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Vickie Alford</u>	8 Amount of Contribution \$ <u>300 -</u>	9 In-kind contribution description <u>food & cards</u>
7 Contributor address; City; State; Zip Code <u>Wintersville TX 79676</u>		<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 <u>11/4/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Kelly Whigham</u>	Amount of Contribution \$ <u>-</u>	In-kind contribution description <u>Door & table</u>
Contributor address; City; State; Zip Code <u>San Marcos TX 78666</u>		<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 <i>3/3</i> Schedule A2	
2 FILER NAME <i>Andrew W. Cutore</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ <i>1800 -</i>	
5 Date <i>11/4/12</i>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Steve Whigham</i>	8 Amount of Contribution \$	9 In-kind contribution description
7 Contributor address; City; State; Zip Code <i>San Marcos TX 78881</i>		<i>500 -</i>	<i>music</i>
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 <input type="checkbox"/> out-of-state PAC (ID#:	Amount of Contribution \$	In-kind contribution description
	Contributor address; City; State; Zip Code		
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 PERSONAL FUNDS

SCHEDULE G

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 G:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
4 Date	5 Payee name			
6 Amount (\$)	7 Payee address;		City;	State; Zip Code
<input type="checkbox"/> Reimbursement from political contributions intended				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		(b) Description	
	(c) <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				
Date	Candidate / Officeholder name			
	Office sought			
	Office held			
Date	Payee name			
Amount (\$)	Payee address;		City;	State; Zip Code
<input type="checkbox"/> Reimbursement from political contributions intended				
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				
Date	Candidate / Officeholder name			
	Office sought			
	Office held			
Date	Payee name			
Amount (\$)	Payee address;		City;	State; Zip Code
<input type="checkbox"/> Reimbursement from political contributions intended				
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				
Date	Candidate / Officeholder name			
	Office sought			
	Office held			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

CAMPAIGN EXPENSES
JANUARY 2021-JUNE 2021

PAYEE	PAYEE ADDRESS	PURPOSE	CATEGORY	AMOUNT
hays county republican party	wimberley	filing fee	EXPENSE	\$375.00
Andrew W. Cable	WIMBERLEY	repayment of expenses	EXPENSE	\$5,000.00
hays county republican party	wimberley	SPONSORSHIP	EXPENSE	\$322.00
hays county republican party	WIMBERLEY	SPONSORSHIP	EXPENSE	\$375.00
friends of bluehole	po box 1601, wimberley	donation	EXPENSE	\$25.00
kaley gassman	wimberley	event security	EXPENSE	\$200.00
keith tomlin	wimberley	event security	EXPENSE	\$200.00
TOTAL:				\$6,497.00

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	\$15090-
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$1800-
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS <i>Carryover</i>	\$39778
5.	<input 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	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$497-
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	\$