### CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

The C/OH Instruction G	uide explains how	to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 7	
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR Mrs.	first Britney	мі В.	OFFICE USE ONLY	
7 07 000 km	NICKNAME	LAST Richey	SUFFIX	Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; P.O. Box 1533		n Marcos, Tx 78667	OCT. 3 1 2022 Elections Office	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (512)	PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs. Nickname	FIRST Britney LAST	MI B. SUFFIX	Receipt # Amount \$ Date Processed Date Imaged	
		Richey			
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS ( P.O. BOX 1533	NO PO BOX PLEASE); APT / SI 3	UITE #; CITY; San Marcos	STATE; ZIP CODE TX 78667	
(Residence or Business)					
8 CAMPAIGN TREASURER PHONE	( 512 )	PHONE NUMBER	EXTENSION		
9 REPORT TYPE	January 15	30th day before e		15th day after campaign treasurer appointment (Officeholder Only)	
	July 15	X 8th day before ele	ction Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month 10	Day Year / 01 / 2022	Month THROUGH 10	Dey Yeer / 30 / 2022	
11 ELECTION	ELECTION DA Month Day 11 08	Year Primary	ELECTION TYPE		
12 OFFICE	OFFICE HELD (If any) Hays County		13 OFFICE SOUGHT (If Innown Hays County Treas		
14 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFIC	EHOLDER. THESE EXPENDITURES	S MAY HAVE BEEN MADE WITHOUT THE CAN	ADE BY POLITICAL COMMITTEES TO SUPPORT DIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR THEY RECEIVE NOTICE OF SUCH EXPENDITURES.	
	COMMITTEE TYPE	COMMITTEE NAME Hays County Republican Pa	utv		
Additional Pages	GENERAL	COMMITTEE ADDRESS 6000 W. FM 150, Kyle, Tx			
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME Many Paul				
		COMMITTEE CAMPAIGN TR 310 Springwood Rd., Dripp			
		GO TO	PAGE 2		

### CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM C/OH COVER SHEET PG 2

15 C/OH NAME	16 6	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)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 550.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 2,217.42
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DA OF REPORTING PERIOD	<sup>Y</sup> \$ 1,131.30
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 9,273.78
	wear, or affirm, under penalty of perjury, that the accompanying report is true and ulired to be reported by me under Title 15, Election Code.	correct and includes all information
	Signature of Candida	the or Officeholder
	Please complete either option below:	
ANN PURC	LAURA NAVA	
(1) AutoBytes . S	IOTARY PUBLIC TATE OF TEXAS OMM. EXP. 09/25/24	
NOTARY STAMP/SEA	ARY ID 12633164-6	
Sworn to and subscribed	before me by Brithey Richey this the 31	Dt day of October,
20 22 , to certify	which, witness my hand and seal of office.	day of <u>UCTOPUL</u> ,
Raura na	va Laura Nava	Notary
Signature of officer administe		Title of officer administering oath
	OR	
(2) Unsworn Declaration	on	
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(month)	
	(month)	()/)
	Signature of Candidate/0	Officeholder (Declarant)

# SUBTOTALS - C/OH

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

	9 FILER NAME 20 Filer ID (Ethics Com			nmission Filers)
	Britne	y B Richey		· · · · · · · · · · · · · · · · · · ·
		LE SUBTOTALS = SCHEDULE		SUBTOTAL AMOUNT
1.	X	\$ 550.00		
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.		SCHEDULE E: LOANS		\$
5.		SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	CONTRIBUTIONS	\$
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9.	×	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FU	NDS	\$ 2,217.42
10.		SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A	BUSINESS OF C/OH	\$
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	ONTRIBUTIONS	\$
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTO FILER	TIONS RETURNED	\$

# MONETARY POLITICAL CONTRIBUTIONS

### SCHEDULE A1

2.24

23 61

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

FILER NAME			3 Filer ID (Ethics Commission Filers)	
	ney B. Richey			
Date 10/16/2022	Full name of contributor [] out-of-state PAC (10#:) Martha C Barchfeld		7 Amount of contribution (\$) \$100.00	
10/10/2022	6 Contributor address; City; 550 Flite Acres Rd Wimberley	State; Zip Code		
Principal occu	pation / Job title (See Instructions) Retired	9 Employer (See Instructi	ions)	
Date	Full name of contributor     out-of-state     PAC (ID#:)       Lon A Shell		Amount of contribution (\$)	
10/19/22	Contributor address; City; 1908 McCarty Lane San Marcos	State; Zip Code Tx 78666	\$200.00	
Principal occup County Com	pation / Job title (See Instructions) missioner	Employer (See Instructi Hays County	ons)	
Date	Full name of contributor		Amount of contribution (\$)	
10/19/2022	Contributor address; City; 125 William Moon Way San Marcos	State; Zip Code Tx 78666	\$100.00	
Principal occu Realtor	pation / Job title (See Instructions)	Employer (See Instructi Self	ons)	
Date	Full name of contributor Dout-of-state PAC Charles Blankenship	: ((D#;)	Amount of contribution (\$)	
10/19/2022	Contributor address; City; 2710 Dees St San Marcos	State; Zip Code Tx 78666	\$100.00	
Principal occur	 pation / Job title (See Instructions) red	Employer (See Instruct	ons)	

MONETARY	POLITICAL	CONTRIBUTIONS
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SCHEDULE A1

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

Th	e Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 2
FILER NAM Britney	E B Richey	3 Filer ID (Ethics Commission Filers)
Date 10/22/22	5 Full name of contributor 🗍 out-of-state PAC (D#: Mary Pat Paul	) 7 Amount of contribution (\$) \$50.00
	6 Contributor address;     City;     State;     Zip Code       310 Springwood Rd     Dripping Springs     Tx     78620	
Principal oc	cupation / Job title (See Instructions) 9 Employer (See Retired	Instructions)
Date	Full name of contributor   out-of-state PAC (ID#:	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Principal occ	upation / Job title (See Instructions) Employer (See	Instructions)
Date	Full name of contributor	) Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Principal occ	supation / Job title (See Instructions) Employer (See	Instructions)
Date	Full name of contributor	) Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Principal occ	supation / Job title (See Instructions) Employer (See	Instructions)
	ATTACH ADDITIONAL COPIES OF THIS SCHEDUL If contributor is out-of-state PAC, please see Instruction guide for add	
	y Texas Ethics Commission www.ethics.state.bx.us	Revised 8/17/

## POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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

	EXPENDITURE CATEGO	ORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Polit Credit Card Payment	Fees C Food/Beverage Expense F By Gift/Awards/Memorials Expense F	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor <b>how to complete this form.</b>	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule G:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
2	Britney B Richey			
4 Date 10/11/2022-10/19/2022	5 Payee name FaceBook			
6 Amount (\$) \$35.00 Reimbursement from political contributions intended	7 Payee address; 1601 Willow Rd	City; Menio Park	State; Zip Code , CA 74025-1452	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche Event Expense	San Marcos Tea w	vith Treasurer Promotion	
	(c) Check if travel outside of Texas, Complete Sched	ule I. Check if Austin	, TX, officeholder living expense	
9 Complete <u>QNLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Britney B Richey	Office sought Hays County Treasu	Office held Irer Hays County Treasurer	
Date	Payee name			
10/12/2021	HEB			
Amount (\$) \$65.21 Reimbursement from political contributions intended	Payee address; 200 W Hopkins	City; San Marcos	State; Zip Code Tx, 78666	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sche Event Expense	edule) Description Buda Tea with T	reasurer	
	Check if travel outside of Texas. Complete Sched	dule T. Check if Austin	n, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C		Office sought Hays County Trease	Office held urer Hays County Treasurer	
Date 10/15/22-10/29/22	Payee name FaceBook			
Amount (\$)	Payee address;	City;	State; Zip Code	
\$289.24 Reimbursement from political contributions intended	1601 Willow Rd	Menio Park,	CA 74025-1452	
	Category (See Categories listed at the top of this sche	edule) Description		
PURPOSE OF EXPENDITURE	Advertising Expense		Vote For Britney Photo Ad	
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, offloeholder living expense			
	Candidate / Officeholder name	Office sought	Office held	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI-		Hays County Treasurer	Hays County Treasurer	
	ATTACH ADDITIONAL COPIES OF		)FD	

Forms provided by Texas Ethics Commission

## POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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

		EXPENDITURE CATE	SORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment		Event Expense     Loan Repayment/Reimbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gitt/Awards/Memorials Expense     Printing Expense       Legal Services     Salaries/Wages/Contract Labor		Transportation Equipme Travel In District Travel Out Of District		
Total pages Schedule G: 2		ME B Richey		3 Filer ID (Ethics C	commission Filers)	
4 Date 10/19/2022	5 Payee na Sam's Cl					
Amount (\$) \$192.28 Reimbursement from political contributions intended	7 Payee ad 1350 Le		City; San Mar	State; cos TX	Zip Code 78666	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)       (b) Description         Event Expense       San Marcos Tea with Treasure         (c)       Check if travel outside of Texas, Complete Schedule T.			os Tea with Treasurer stin, TX, officeholder living exp	ense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candio	tate / Officeholder name ney Bolton Richey	Office sought Hays County Treas		Office held	
Date 10/19 2022	Payee na Texas	me Rock House				
Amount (\$) \$1,435.69 Reimbursement from political contributions intended	Payee ad 3207 H	dress; unter Road	City; San Marco	State; cs , Tx	Zip Code 78666	
PURPOSE OF EXPENDITURE		<ul> <li>(See Categories listed at the top of this s</li> <li>Expense</li> </ul>		a with Treasurer		
Complete <u>ONLY</u> if direct expenditure to benefit C/		Check i travel outside of Texas. Complete Sc date / Officeholder name itney Bolton Richey	hedule T. Check if Aur Office sough Hays County Treasure		held	
Date 10/26/2022	Payee na VFW Pos					
Amount (\$) \$200.00 Reimbursement from political contributions intended	Payee ad 401 Jaco	ldress; obs Well Road	City; Wimberley	State; Tx	Zip Code 78676	
PURPOSE OF EXPENDITURE	Category Event E	/ (See Categories listed at the top of this s xpense Check if travel outside of Texas, Complete Sci	Wimberley Tea	with Treasurer stin, 1X, officeholder living exp		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		date / Officeholder name	Office sought	C	office held Treasurer	