

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

<p>The C/OH Instruction Guide explains how to complete this form.</p>		<p>1 Filer ID (Ethics Commission Filers)</p>		<p>2 Total pages filed: 4</p>	
<p>3 CANDIDATE / OFFICEHOLDER NAME</p>	<p>MS / MRS / MR <input checked="" type="radio"/> FIRST MI LAST NICKNAME SUFFIX</p> <p style="text-align: center;">DAVID L. PETERSON</p>				<p>OFFICE USE ONLY</p> <p>Date Received</p> <p style="text-align: center; font-size: 1.5em;">RECEIVED JUL 17 2017 ELECTION OFFICE</p> <p>Date Hand-delivered or Date Postmarked</p>
	<p>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</p> <p>Change of Address <input type="checkbox"/></p> <p>ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE</p> <p style="text-align: center;">505 CANDLELIGHT LANE SAN MARCOS, TX 78666</p>				
<p>5 CANDIDATE / OFFICEHOLDER PHONE</p>	<p>AREA CODE PHONE NUMBER EXTENSION</p> <p style="text-align: center;">(512) 738-2583</p>				<p>Receipt #</p> <p>Amount \$</p>
<p>6 CAMPAIGN TREASURER NAME</p>	<p>MS / MRS / MR <input checked="" type="radio"/> FIRST MI LAST NICKNAME SUFFIX</p> <p style="text-align: center;">JOSE A. LUCIO</p>				<p>Date Processed</p> <p>Date Imaged</p>
<p>7 CAMPAIGN TREASURER ADDRESS (Residence or Business)</p>	<p>STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE</p> <p style="text-align: center;">2706 DEES ST. SAN MARCOS, TX 78666</p>				
<p>8 CAMPAIGN TREASURER PHONE</p>	<p>AREA CODE PHONE NUMBER EXTENSION</p> <p style="text-align: center;">(512) 396-8451</p>				
<p>9 REPORT TYPE</p> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff </div> <div> <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) </div> </div> <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit </div> <div> <input type="checkbox"/> Final Report (Attach C/OH - FR) </div> </div>					
<p>10 PERIOD COVERED</p> <p style="text-align: center;"> Month Day Year Month Day Year 01 / 01 / 2017 THROUGH 06 / 30 / 2017 </p>					
<p>11 ELECTION</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <p>ELECTION DATE</p> <p>Month Day Year</p> <p style="text-align: center;">/ /</p> </div> <div style="width: 60%;"> <p>ELECTION TYPE</p> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Primary <input type="checkbox"/> General </div> <div> <input type="checkbox"/> Runoff <input type="checkbox"/> Special </div> <div> <input type="checkbox"/> Other Description </div> </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 50%;"> <p>12 OFFICE</p> <p>OFFICE HELD (if any)</p> <p style="text-align: center;">CONSTABLE PCT 1 HAYS COUNTY</p> </div> <div style="width: 50%;"> <p>13 OFFICE SOUGHT (if known)</p> </div> </div>					
<p>GO TO PAGE 2</p>					

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

DAVID L. PETERSON

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM
POLITICAL
COMMITTEE(S)

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

☐ GENERAL

☐ SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

17 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0 -

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 0 -

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS,
UNLESS ITEMIZED

\$ 0 -

4. TOTAL POLITICAL EXPENDITURES

\$ 0 -

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY
OF REPORTING PERIOD

\$ 1774.51

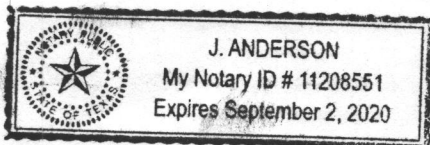
OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$ 500.00

18 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.



AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said David Peterson, this the 17
day of July, 20 17, to certify which, witness my hand and seal of office.

J. Anderson
Signature of officer administering oath

J. Anderson
Printed name of officer administering oath

Notary Public
Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

19 FILER NAME <i>DAVID L PETERSON</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
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 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 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	\$
11.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>530.⁰⁰</i>
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: <i>2</i>		2 FILER NAME <i>DAVID L. PETERSON</i>		3 Filer ID (Ethics Commission Filers)	
4 Date <i>2/14/17</i>		5 Payee name <i>JUNETEETH FOUNDATION</i>			
6 Amount (\$) <i>100.00</i>		7 Payee address; City; State; Zip Code <i>P.O. BOX 1109 SAN MARCOS, TX 78666</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories.) <i>CONTRIBUTION/DONATION</i>		(b) Description (See instructions regarding type of information required.) <i>SPONSOR FOR JUNETEETH 2017</i>	
Date <i>2/21/17</i>		Payee name <i>BOY SCOUTS OF AMERICA CAPITOL AREA COUNCIL</i>			
Amount (\$) <i>250.00</i>		Payee address; City; State; Zip Code <i>12500 NORTH IH 35 AUSTIN, TX 78753-1312</i>			
PURPOSE OF EXPENDITURE		Category (See instructions for examples of acceptable categories.) <i>CONTRIBUTION</i>		Description (See instructions regarding type of information required.) <i>NONPROFIT ORGANIZATION SPONSOR</i>	
Date <i>4/25/17</i>		Payee name <i>THE FLORAL STUDIO</i>			
Amount (\$) <i>80.00</i>		Payee address; City; State; Zip Code <i>331 W. HOPKINS STE 100 SAN MARCOS, TX 78666</i>			
PURPOSE OF EXPENDITURE		Category (See instructions for examples of acceptable categories.) <i>MEMORIALS EXPENSE</i>		Description (See instructions regarding type of information required.) <i>FLORAL ARRANGEMENT FOR CONSTITUENT</i>	
Date <i>5/3/17</i>		Payee name <i>EL CENTRO CULTURAL HISPANO</i>			
Amount (\$) <i>100.00</i>		Payee address; City; State; Zip Code <i>211 LEE ST. SAN MARCOS, TX 78666</i>			
PURPOSE OF EXPENDITURE		Category (See instructions for examples of acceptable categories.) <i>CONTRIBUTION</i>		Description (See instructions regarding type of information required.) <i>TABLE SPONSOR FOR CINCO de Mayo LUNCHEON</i>	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED