

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: 09

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

MR.

FIRST

Gary

MI

M.

NICKNAME

LAST

Cutler

SUFFIX

OFFICE USE ONLY

Date Received

RECEIVED
JUL 15 2015
ELECTION OFFICE

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

1035 Ranchers Club Lane
Driftwood, TX 78619

☐ Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

(512)

PHONE NUMBER

858-7282

EXTENSION

Date Hand-delivered or Date Postmarked

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

MR.

FIRST

Samuel

MI

R.

NICKNAME

LAST

Sam

Paul

SUFFIX

Receipt #

Amount \$

Date Processed

Date Imaged

7 CAMPAIGN
TREASURER
ADDRESS
(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

310 Springwood Road
Dripping Springs, TX 78620

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

(512)

PHONE NUMBER

894-4552

EXTENSION

9 REPORT TYPE

☐ January 15

☐ 30th day before election

☐ Runoff

☐ 15th day after campaign
treasurer appointment
(Officeholder Only)

☒ July 15

☐ 8th day before election

☐ Exceeded \$500 limit

☐ Final Report (Attach C/OH - FR)

10 PERIOD
COVERED

Month Day Year
01 / 01 / 2015

Month Day Year
06 / 30 / 2015
THROUGH

11 ELECTION

ELECTION DATE

Month Day Year
03 / 01 / 2016

ELECTION TYPE

☒ Primary

☐ Runoff

☐ Other
Description

☐ General

☐ Special

12 OFFICE

OFFICE HELD (if any)

Hays County Sheriff

13 OFFICE SOUGHT (if known)

Hays County Sheriff

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME
Gary M. Cutler

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

\$ 0.00

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

\$ 433.34

EXPENDITURE
TOTALS

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

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

\$ 4,099.50

CONTRIBUTION
BALANCE

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

\$ 36,281.91

OUTSTANDING
LOAN TOTALS

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

\$ 0.00

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

Gary Cutler
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said GARY CUTLER, this the 14th day of July, 2015, to certify which, witness my hand and seal of office.

Mary Pat Paul
Signature of officer administering oath

MARY PAT PAUL
Printed name of officer administering oath

NOTARY
Title of officer administering oath

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

19 FILER NAME Gary M. Cutler		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 433.34
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 FROM POLITICAL CONTRIBUTIONS	\$ 4,099.50
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
9.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
10.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 01**2** FILER NAME

Gary M. Cutler

3 Filer ID (Ethics Commission Filers)**4** Date

05/12/2015

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Raymond O. Whisenant Jr. Campaign Account

7 Amount of contribution (\$)**6** Contributor address;

City; State; Zip Code

P.O. Box 1007

Dripping Springs, 78620

\$ 216.67

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

05/12/2015

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kathi Hood

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

750 Dawn View

Dripping Springs, 78620-2494

\$ 216.67

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)

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.

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	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)
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The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 05		2 FILER NAME Gary M. Cutler		3 Filer ID (Ethics Commission Filers)	
4 Date 02/04/2015		5 Payee name Hays County Republican Party			
6 Amount (\$) 1,250.00		7 Payee address; City; State; Zip Code P.O. Box 1655 San Marcos, TX 78667			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Contribution/Donation Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Licolon/Reagan Dinner for Hays County Fund Raiser	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 02/14/2014		Payee name WIX.com Inc.			
Amount (\$) 9.90		Payee address; City; State; Zip Code New York, NY			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Fees		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly WEB Site Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 03/11/2015		Payee name Roger Williams for US Congress Committee			
Amount (\$) 100.00		Payee address; City; State; Zip Code P.O. Box 1655 Austin, TX 78767			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contribution/Donation Made By Candidate/Officeholder/Political Committee		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Fund Raiser	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Roger Williams		Office sought US Congress 25th District Office held US Congress 25th District	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

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: 05		2 FILER NAME Gary M. Cutler		3 Filer ID (Ethics Commission Filers)	
4 Date 03/14/2015		5 Payee name WIX.com Inc.			
6 Amount (\$) 9.90		7 Payee address; City; State; Zip Code New York, NY			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly WEB Site Fee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 04/14/2015		Payee name WIX.com Inc.			
Amount (\$) 9.90		Payee address; City; State; Zip Code New York, NY			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Fees		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly WEB Site Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 04/14/2015		Payee name Dripping Springs High School Project Graduation 2015			
Amount (\$) 200.00		Payee address; City; State; Zip Code P.O. Box 1473 Dripping Springs 78620			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contributions/Donations Made by Candidate/Officeholder/Political Committee		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense 2015 Project Graduation DSHS	
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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 05		2 FILER NAME Gary M. Cutler		3 Filer ID (Ethics Commission Filers)		
4 Date 04/14/2015		5 Payee name Wimberley High School Project Graduation 2015				
6 Amount (\$) 200.00		7 Payee address; City; State; Zip Code 100 Carney Lane Wimberley, TX 78676				
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Project Graduation 2015 Donation		
		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width: 100%;"> <tr> <td style="width: 50%;">Candidate / Officeholder name</td> <td style="width: 25%;">Office sought</td> <td style="width: 25%;">Office held</td> </tr> </table>				Candidate / Officeholder name
Candidate / Officeholder name	Office sought	Office held				
Date 04/14/2015		Payee name Hays High School Project Graduation 2015				
Amount (\$) 200.00		Payee address; City; State; Zip Code P.O. Box 634 Buda, TX 78610				
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Project Graduation 2015 Donation		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width: 100%;"> <tr> <td style="width: 50%;">Candidate / Officeholder name</td> <td style="width: 25%;">Office sought</td> <td style="width: 25%;">Office held</td> </tr> </table>				Candidate / Officeholder name
Candidate / Officeholder name	Office sought	Office held				
Date 04/14/2014		Payee name Lehman High School Project Graduation 2015				
Amount (\$) 200.00		Payee address; City; State; Zip Code P.O. Box 1892 Kyle, TX 78640				
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Project Graduation 2015 Donation		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width: 100%;"> <tr> <td style="width: 50%;">Candidate / Officeholder name</td> <td style="width: 25%;">Office sought</td> <td style="width: 25%;">Office held</td> </tr> </table>				Candidate / Officeholder name
Candidate / Officeholder name	Office sought	Office held				

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 05	2 FILER NAME Gary M. Cutler	3 Filer ID (Ethics Commission Filers)
4 Date 04/20/2015	5 Payee name VFW Post #6441	
6 Amount (\$) 650.00	7 Payee address; City; State; Zip Code P.O. Box 535 Wimberley, TX 78676	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wimberley VFW Rodeo Box Seats
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 04/20/2015	Payee name US Postmaster	
Amount (\$) 50.00	Payee address; City; State; Zip Code P.O. Box 9998 Driftwood, TX 78619-9998	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Post Office Box #204 Annual Fee
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 04/23/2015	Payee name San Marcos High School Project Graduation 2015	
Amount (\$) 200.00	Payee address; City; State; Zip Code 2601 Rattler Road San Marcos, TX 78666	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense 2015 Project Graduation SMHS Donation
	9 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		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	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)
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The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 05	2 FILER NAME Gary M. Cutler	3 Filer ID (Ethics Commission Filers)
4 Date 05/14/2015	5 Payee name WIX.com Inc.	
6 Amount (\$) 9.90	7 Payee address; City; State; Zip Code New York, NY	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly WEB Site Fee
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	

Date 06/14/2015	Payee name WIX.com Inc.
Amount (\$) 9.90	Payee address; City; State; Zip Code New York, NY
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees
	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly WEB Site Fee
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