CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	duide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 12	
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST Mr. Gary NICKNAME LAST Cutler	MI M.	OFFICE USE ONLY Date Received RECEIVED	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address 5 CANDIDATE /	ADDRESS / PO BOX; APT / SUITE #; CO 1035 Ranchers Club Lo Driftwood, TX 78619 AREA CODE PHONE NUMBER	extension	FEB 2 2 2016 ELECTION OFFICE	
OFFICEHOLDER PHONE 6 CAMPAIGN TREASURER NAME	(512) 858-7282 MS/MRS/MR FIRST Mr. Samuel NICKNAME LAST Sam Paul	MI R. SUFFIX	Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	street ADDRESS (NO PO BOX PLEASE); APT / St. 310 Springwood Road Dripping Springs, TX	78620	ZIP CODE	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 894-4552	EXTENSION		
9 REPORT TYPE	January 15 30th day before e		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month Day Year 01 / 30 / 2016	THROUGH 02 /	Day Year 22 / 2016	
11 ELECTION	Month Day Year Meneral Month Day Year General	Runoff Cher Description Special		
12 OFFICE	OFFICE HELD (if any) Hays County Sheriff	13 OFFICE SOUGHT (if known Hays Count		
GO TO PAGE 2				

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME Gary M. Cu	tler	15 F	iler ID (Ethics Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S)	SUPPORT THE CANE	OTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURE INDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT INDEED. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFURES.	IT THE CANDIDATE'S OR OFFICEHOLDER'S
	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL		
	SPECIFIC	COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
Additional Pages		COMMITTEE CAMMITTEE COMMITTEE COMMIT	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,950.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 0.00
	4. TOTAL	POLITICAL EXPENDITURES	\$ 9,179.47
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD		\$ 34,240.98
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.0		\$ 0.00
18 AFFIDAVIT			<u>'</u>
WARD FOR THE PARTY		I swear, or affirm, under penalty of perju true and correct and includes all informa under Title 15, Election Code.	
	MARY PAT PAUL OMMISSION EXPIRE July 27, 2017	Signature of Candida	te or Officeholder
AFFIX NOTARY STAM	P/SEALABOVE		
		by the said GARY COTTLER	, this the 2/5/
		to certify which, witness my hand and seal of office.	
Mary Pa	et Paul	MARY PAT PAUL	NOTAN
Signature of officer a	administering oath	Printed name of officer administering oath	Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	FILER NAME 20 Filer ID (Ethics Con				ion Filers)
	Gary	y M. Cutler			
21		LE SUBTOTALS = SCHEDULE			SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	2,950.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
4.		SCHEDULE E: LOANS			0.00
5.	X	X SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS			9,179.47
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$			0.00
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS \$ 0.00			0.00
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD			0.00
9.		SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS \$ 0.			0.00
10.		SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ 0.0			0.00
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS \$ 0.00			0.00
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS \$ 0.00			0.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:	04
2 FILER NAME			3 Filer ID (Ethics Commissio	n Filers)
Gary M.	Cutler			
4 Date 02/08/2016	5 Full name of contributor		7 Amount of contribution (\$)
	6 Contributor address; City; State; 502 W 17th Street, Apt K	Zip Code		
	Austin, TX 78701-1248		\$	150.00
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)	
Date	Full name of contributor	(ID#:)	Amount of contribution	(\$)
02/08/2016	James Levi Powers		Amount of continuous.	(4)
	Contributor address; City; States 1280 Drifting Wind Run	Zip Code		
	Dripping Springs, TX 78620-4180		\$	100.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)	
Date	Full name of contributor	(ID#:)	Amount of contribution	(\$)
02/08/2016	Peggy L Kucera Schiflett			
	Contributor address; City; State; 253 Covered Bridge Dr.	Zip Code		
	Driftwood, TX 78619-4427		\$	50.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)	
Date 02/08/2016	Full name of contributor	(ID#:)	Amount of contribution	(\$)
	Contributor address; City; State 500 Deer Lake Road	; Zip Code		
	Wimberley, TX 78676		\$	200.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: 04 The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Gary M. Cutler 4 Date 7 Amount of contribution (\$) 5 Full name of contributor out-of-state PAC (ID#:___ 02/09/2016 Fred W. Hoskins 6 Contributor address; City; State; Zip Code 542 FM 713 350.00 Lockhart, TX 78644 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Date Amount of contribution (\$) 02/10/2016 Susan McElwain Contributor address; City; State; Zip Code 1605 The High Road 250.00 Austin, TX 78746 \$ Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#:_ Amount of contribution (\$) 02/11/2016 James M. Farr City; State; Zip Code Contributor address; 1011 Westland Ridge Road 500.00 Dripping Springs, TX 78620 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:____ Amount of contribution (\$) 02/11/2016 Kennon Calvert Beasley Contributor address: City; State; Zip Code 829 Ranchers Club Lane \$ 100.00 Driftwood, TX 78619 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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

A 2					
The	Instruction Guide explains how to	complete this	form.	1 Total pages Schedule A1:	04
2 FILER NAME				3 Filer ID (Ethics Commission	on Filers)
Gary M.	Cutler				
4 Date 02/19/2016	5 Full name of contributor Jennifer S. Rodriguez	out-of-state PAC	(ID#:)	7 Amount of contribution	(\$)
	6 Contributor address; 485 Nicholas Lane	City; State	; Zip Code		
	Driftwood, TX 78619-4307			\$	250.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	ctions)	<u> </u>
Date	Full name of contributor	out-of-state PAC	: (ID#:)	Amount of contribution	(\$)
02/19/2016	Mary M. Dement				
	Contributor address; 14201 FM 150 West	City; State	e; Zip Code		
	Driftwood, TX 78619		2.1	\$	250.00
Principal occup	eation / Job title (See Instructions)		Employer (See Instruc	etions)	
41					
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution	(\$)
02/19/2016	Colleen S. Bonney				
	Contributor address; 1061 Ranchers Club Ln	City; State	; Zip Code		
	Driftwood, TX 78619			\$	200.00
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	otions)	
Date	Full name of contributor	□ out-of-state PAC	C (ID#:)	Amount of contribution	(\$)
02/19/2016	Lionel B. Aguirre				
	Contributor address;	City; State	e; Zip Code		
	824 Ranchers Club Ln				
	Driftwood, TX 78619			\$	250.00
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	ctions)	
-					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

1 -					
The	Instruction Guide explains how to	complete this	form.	1 Total pages Schedule A1: 04	
2 FILER NAME				3 Filer ID (Ethics Commission File	ers)
Gary M.	Cutler				
4 Date 02/19/2016	5 Full name of contributor [P. R. Ergo	out-of-state PAC	(ID#:)	7 Amount of contribution (\$)	esi
*	6 Contributor address; 2560 La Ventana PKWY	City; State	; Zip Code		
	Driftwood, TX 78619			\$	50.00
8 Principal occup	pation / Job title (See Instructions)		9 Employer (See Instruct	tions)	
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)	
02/19/2016	David R. Christian				
	Contributor address; 2375 La Ventana PKWY	City; State	; Zip Code		
	Driftwood, TX 78619			\$	100.00
Principal occup	eation / Job title (See Instructions)		Employer (See Instruct	tions)	2
Date 02/19/2016	Full name of contributor [out-of-state PAC	(ID#:)	Amount of contribution (\$)	
	Contributor address; 252 Nicholas Lane	City; State	; Zip Code		
η	Driftwood, TX 78619			\$	150.00
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)	
Date	Full name of contributor	out-of-state PAC	f (ID#:)	Amount of contribution (\$)	
	Contributor address;	City; State	; Zip Code		
Principal occup	nation / Job title (See Instructions)		Employer (See Instruc	tions)	
	ATTACH ADDITION	NAL COPIES O	F THIS SCHEDULE AS NI	EEDED	

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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)

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/W The Instruction Guide explains how to c	ages/Contract Labor Other (enter a category not listed above) omplete this form.			
1 Total pages Schedule F1:	2 FILER NAME Gary M. Cutler	3 Filer ID (Ethics Commission Filers)			
4 Date	5 Payee name				
01/30/2016	A&E Signs and Graphics				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$ 460.06	1030 W. Goforth Road				
•	Buda, TX 78910 (a) Category (See Categories listed at the top of this schedule)	(b) Description			
8 PURPOSE OF EXPENDITURE	Printing Expense - Campaign Yard Signs	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held			
Date	Payee name				
02/01/2016	Act 3 Screen Printing				
Amount (\$)	Payee address; City; State; Zip Code				
\$ 449.24	2400 W. Hwy 290 #6B				
	Dripping Springs, TX 78620				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense - Printing Campaign Tee Shirts	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/OH	Candidate / Officeholder name	Office sought Office held			
Date	Payee name				
02/06/2016	FedEx Office Print & Ship Center				
Amount (\$)	Payee address; City; State; Zip Code				
\$ 184.90	5601 Brodie Lane				
	Sunset Valley, TX 78745				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense - Campaign Handout	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/OH	Candidate / Officeholder name	Office sought Office held			
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED			

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)

Candidate/Officeholder/Politica Credit Card Payment	Al Committee Legal Services Salaries/With The Instruction Guide explains how to committee	ages/Contract Labor omplete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1:	² FILER NAME Gary M. Cutler		3 Filer ID (Ethics Commission Filers)
4 Date 02/06/2016	5 Payee name Pay Pal, Inc.		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$ 6.10	7700 W. Parmer Lane		
	Austin, TX 78729	1	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Fees - Campaign Donation Process Fee		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/11/2016	DC Fundraising Group, c/o Codye Sides		
Amount (\$)	Payee address; City; State; Zip Code		
\$ 150.00	208 Dewberry Cove		
	Buda, TX 78610		
	Category (See Categories listed at the top of this schedule)	Description	wide (Taras Carada) Calada T
PURPOSE OF	Contributions/Donations - Donation For		rtside of Texas. Complete Schedule T.
EXPENDITURE	Dahlstrom Middle School Fund Raiser Golf		,,
	Tournament Hole Sponsor		
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/11/2016	Patterson and Company, Jarod Patterson		
Amount (\$)	Payee address; City; State; Zip Code		
\$ 6,369.82	423 Smarty Jones Ave.		
	Austin, TX 78737-3107		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Printing Expense - Campaign Mail Out		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEI	EDED

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)

Credit Card Payment	The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1:	² FILER NAME Gary M. Cutler	3 Filer ID (Ethics Commission Filers)	
4 Date 02/12/2016	5 Payee name Barton Publications, Inc.		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$ 514.12	113 W. Center Street		
	Kyle, TX 78640-9450		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T.	
PURPOSE OF	Advertising Expense - Campaign Ads	Check if Austin, TX, officeholder living expense	
EXPENDITURE	in Newspaper		
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held	
Date	Payee name		
02/12/2016	Barton Publications, Inc.		
Amount (\$)	Payee address; City; State; Zip Code		
\$ 447.20	113 W. Center Street		
	Kyle, TX 78640-9450		
	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T.	
PURPOSE OF	Advertising Expense - Campaign Ads	Check if Austin, TX, officeholder living expense	
EXPENDITURE	In Newspaper		
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held	
Date	Payee name		
02/12/2016	The Heme Denet		
02/13/2016	The Home Depot		
Amount (\$) \$ 72.14	Payee address; City; State; Zip Code		
φ /2.14	260 East Hwy 290		
	Dripping Springs, TX 78620 Category (See Categories listed at the top of this schedule)	Description	
PURPOSE		Check if travel outside of Texas. Complete Schedule T.	
OF EXPENDITURE	Office Overhead/Rental Expense -	Check if Austin, TX, officeholder living expense	
	Campaign Office Supplies		
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

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)

Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Gary M. Cutler 4 Date 5 Payee name 02/13/2016 Wimberley Ace Hardware 7 Payee address; 6 Amount (\$) City; State; Zip Code 10.05 14307 Ranch Road 12 \$ Wimberley, TX 78676 (a) Category (See Categories listed at the top of this schedule) (b) Description 8 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Office Overhead/Rental Expense -Check if Austin, TX, officeholder living expense OF **EXPENDITURE** Campaign Office Supplies Candidate / Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH Payee name Date 02/14/2016 WIX.com Inc. Amount (\$) Payee address; City; State; Zip Code \$ 9.90 New York, NY Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Fees - Monthly WEB Site Fee Check if Austin, TX, officeholder living expense **EXPENDITURE** Office held Candidate / Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Payee name Date 02/17/2016 A&E Signs and Graphics Amount (\$) Payee address; City; State; Zip Code 405.94 1030 W. Goforth Road Buda, TX 78910 Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Printing Expense - Campaign Yard Signs Check if Austin, TX, officeholder living expense **EXPENDITURE** Candidate / Officeholder name Office held Office sought Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE F1

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 (poters a extension pot listed above)

Candidate/Officeholder/Political Committee Credit Card Payment 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:	2 FILER NAME Gary M. Cutler	3 Filer ID (Ethics Commission Filers)	
4 Date 02/18/2016	5 Payee name Hays County Young Republicans		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$ 100.00	900 Bugg Lane San Marcos, TX 78666		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF	Contributions/Donations - Event Donation	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
EXPENDITURE	Hays County Young Republicans Club		
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name H	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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name H	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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			