

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: 32																		
3 CANDIDATE / OFFICEHOLDER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; border-bottom: 1px solid black;">MS / MRS / MR</td> <td style="width:20%; border-bottom: 1px solid black;">FIRST</td> <td style="width:20%; border-bottom: 1px solid black;">MI</td> </tr> <tr> <td style="border-bottom: 1px solid black;">Mr.</td> <td style="border-bottom: 1px solid black;">Gary</td> <td style="border-bottom: 1px solid black;">M.</td> </tr> <tr> <td style="border-bottom: 1px solid black;">NICKNAME</td> <td style="border-bottom: 1px solid black;">LAST</td> <td style="border-bottom: 1px solid black;">SUFFIX</td> </tr> <tr> <td colspan="3" style="border-bottom: 1px solid black; text-align: center;">Cutler</td> </tr> </table>				MS / MRS / MR	FIRST	MI	Mr.	Gary	M.	NICKNAME	LAST	SUFFIX	Cutler			OFFICE USE ONLY Date Received <div style="font-size: 1.2em; font-weight: bold;">Received</div> <div style="font-size: 1.2em; font-weight: bold;">JAN 14 2019</div> <div style="font-size: 1.2em; font-weight: bold;">Elections Office</div> 					
	MS / MRS / MR	FIRST	MI																			
Mr.	Gary	M.																				
NICKNAME	LAST	SUFFIX																				
Cutler																						
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<input type="checkbox"/> Change of Address																						
5 CANDIDATE / OFFICEHOLDER PHONE	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; border-bottom: 1px solid black;">AREA CODE</td> <td style="width:30%; border-bottom: 1px solid black;">PHONE NUMBER</td> <td style="width:50%; border-bottom: 1px solid black;">EXTENSION</td> </tr> <tr> <td style="border-bottom: 1px solid black;">(512)</td> <td style="border-bottom: 1px solid black;">858-7282</td> <td style="border-bottom: 1px solid black;"></td> </tr> </table>				AREA CODE	PHONE NUMBER	EXTENSION	(512)	858-7282													
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	MS / MRS / MR	FIRST	MI																			
	Mr.	Samuel	R.																			
NICKNAME	LAST	SUFFIX																				
Sam Paul																						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; border-bottom: 1px solid black;">Receipt #</td> <td style="width:80%; border-bottom: 1px solid black;">Amount \$</td> </tr> <tr> <td colspan="2" style="border-bottom: 1px solid black;">Date Processed</td> </tr> <tr> <td colspan="2" style="border-bottom: 1px solid black;">Date Imaged</td> </tr> </table>				Receipt #	Amount \$	Date Processed		Date Imaged														
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7 CAMPAIGN TREASURER ADDRESS (Residence or Business)																						
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9 REPORT TYPE	<table style="width:100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded \$500 limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table>				<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)										
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10 PERIOD COVERED	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; text-align: center;">Month</td> <td style="width:10%; text-align: center;">Day</td> <td style="width:20%; text-align: center;">Year</td> <td style="width:20%; text-align: center;">Month</td> <td style="width:10%; text-align: center;">Day</td> <td style="width:20%; text-align: center;">Year</td> </tr> <tr> <td style="text-align: center;">07</td> <td style="text-align: center;">01</td> <td style="text-align: center;">2018</td> <td style="text-align: center;">12</td> <td style="text-align: center;">31</td> <td style="text-align: center;">2018</td> </tr> <tr> <td colspan="6" style="text-align: center;">THROUGH</td> </tr> </table>				Month	Day	Year	Month	Day	Year	07	01	2018	12	31	2018	THROUGH					
Month	Day	Year	Month	Day	Year																	
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11 ELECTION	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%; border-bottom: 1px solid black;">ELECTION DATE</td> <td style="width:70%; border-bottom: 1px solid black;">ELECTION TYPE</td> </tr> <tr> <td style="border-bottom: 1px solid black;">Month Day Year</td> <td style="border-bottom: 1px solid black;"> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special </td> </tr> <tr> <td style="border-bottom: 1px solid black;">03 / 03 / 2020</td> <td style="border-bottom: 1px solid black;"></td> </tr> </table>				ELECTION DATE	ELECTION TYPE	Month Day Year	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	03 / 03 / 2020													
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12 OFFICE	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; border-bottom: 1px solid black;">OFFICE HELD (if any)</td> <td style="width:50%; border-bottom: 1px solid black;">OFFICE SOUGHT (if known)</td> </tr> <tr> <td style="border-bottom: 1px solid black;">Hays County Sheriff</td> <td style="border-bottom: 1px solid black;">Hays County Sheriff</td> </tr> </table>				OFFICE HELD (if any)	OFFICE SOUGHT (if known)	Hays County Sheriff	Hays County Sheriff														
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GO TO PAGE 2

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 \$ 50.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 26,130.00

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 400.00

4. TOTAL POLITICAL EXPENDITURES \$ 3,596.96

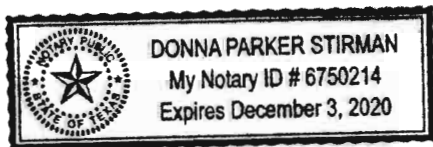
CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 27,595.53

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00

18 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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

Sworn to and subscribed before me, by the said Gary Cutler, this the 14 day of January, 2019, 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

SUBTOTALS - C/OH**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	\$ 26,180.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 3,500.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 3,996.96
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 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	\$

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **18****2** FILER NAME**Gary M. Cutler****3** Filer ID (Ethics Commission Filers)**4** Date

07/20/2018

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

Jack Kay

6 Contributor address;

City; State; Zip Code

1082 Hidden Hills

Dripping Springs, TX 78620

7 Amount of contribution (\$)

\$ 100.00

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

Date

07/20/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Nathon Sloan

Contributor address;

City; State; Zip Code

P.O. Box 572

Wimberley, TX 78676

Amount of contribution (\$)

\$ 200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/20/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bud & Amy Wymore

Contributor address;

City; State; Zip Code

340 Island Oaks Lane

Driftwood, TX 78619

Amount of contribution (\$)

\$ 250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/20/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Mary Pat Paul

Contributor address;

City; State; Zip Code

310 Springwood Road

Dripping Springs, TX 78620

Amount of contribution (\$)

\$ 50.00

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**

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1 Total pages Schedule A1: **18****2** FILER NAME**Gary M. Cutler****3** Filer ID (Ethics Commission Filers)**4** Date

07/20/2018

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

Linda Kinney

Contributor address;
1034 Hidden Hill Drive

City; State; Zip Code

Dripping Springs, TX 78620

7 Amount of contribution (\$)

\$ 50.00

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

Date

07/20/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Mary Pat Paul

Contributor address;
310 Springwood Road

City; State; Zip Code

Dripping Springs, TX 78620

Amount of contribution (\$)

\$ 100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/20/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bill & Emily Pruitt

Contributor address;
301 Oak Forest Drive
Buda, TX 78610

City; State; Zip Code

Amount of contribution (\$)

\$ 100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/25/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Mike Jones

Contributor address;
915 Thousand Oaks Loop
San Marcos, TX 78666

City; State; Zip Code

Amount of contribution (\$)

\$ 50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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07/25/2018

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

David Brandon

6 Contributor address;

City; State; Zip Code

13320 Paisano Trail

Austin, TX 78737

7 Amount of contribution (\$)

\$ 1,000.00

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

Date

07/25/2018

Full name of contributor

☐ out-of-state PAC (ID# _____)

Daniel O'Brien

Contributor address;

City; State; Zip Code

580 Aspen Drive

Austin, TX 78737

Amount of contribution (\$)

\$ 150.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/25/2018

Full name of contributor

☐ out-of-state PAC (ID# _____)

Melody Burns

Contributor address;

City; State; Zip Code

1704 Grassy Field Road

Austin, TX 78737

Amount of contribution (\$)

\$ 50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/25/2018

Full name of contributor

☐ out-of-state PAC (ID# _____)

Gordy Jones

Contributor address;

City; State; Zip Code

8100 Ozark Drive

San Marcos, TX 78666

Amount of contribution (\$)

\$ 50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

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1 Total pages Schedule A1: **18****2** FILER NAME

Gary M. Cutler

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

07/25/2018

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

Roger Keats

6 Contributor address;

City; State; Zip Code

1001 Oak Meadow Drive

Dripping Springs, TX 78620

7 Amount of contribution (\$)

\$ 100.00

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

Date

07/25/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Russell Hayter

Contributor address;

City; State; Zip Code

321 Live Oak Drive

Mountain City, TX 78610

Amount of contribution (\$)

\$ 50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/25/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kenneth Roberts

Contributor address;

City; State; Zip Code

4000 FM 2325

Wimberley, TX 78676

Amount of contribution (\$)

\$ 50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/25/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Joyce Jack

Contributor address;

City; State; Zip Code

P.O. Box 1450

Wimberley, TX 78676

Amount of contribution (\$)

\$ 20.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

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1 Total pages Schedule A1: **18****2** FILER NAME**Gary M. Cutler****3** Filer ID (Ethics Commission Filers)**4** Date

07/25/2018

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

Loyal & Anna White

6 Contributor address;

City; State; Zip Code

1501 Windmill Run

Wimberley, TX 78676

7 Amount of contribution (\$)

\$ 50.00

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

Date

07/25/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Tacie Zelhart

Contributor address;

City; State; Zip Code

8201C West FM 150

Kyle, TX 78640

Amount of contribution (\$)

\$ 100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/25/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Curt Parde

Contributor address;

City; State; Zip Code

1210 Emerald Glen Trail

Richardson, TX 75080

Amount of contribution (\$)

\$ 300.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/25/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Tim Cooper

Contributor address;

City; State; Zip Code

460 Roy Reed Road

Dripping Springs, TX 78620

Amount of contribution (\$)

\$ 500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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07/25/2018

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

Charles Catoe

Contributor address;
1655 Grassy Field Road

City; State; Zip Code

Austin, TX 78737

7 Amount of contribution (\$)

\$ 100.00

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

Date

07/25/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ann Guilford

Contributor address;
1500 Spoke Hollow Road
Wimberley, TX 78676

City; State; Zip Code

Amount of contribution (\$)

\$ 50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/25/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Pauline Tom

Contributor address;
332 Live Oak Drive
Mountain City, TX

City; State; Zip Code

Amount of contribution (\$)

\$ 100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/25/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Teresa Spears

Contributor address;
4710 Eck Lane
Austin, TX 78734

City; State; Zip Code

Amount of contribution (\$)

\$ 100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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07/25/2018

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

Ron Zingaro

6 Contributor address;

City; State; Zip Code

183 Southern Sunset Cove

Driftwood, TX 78619

7 Amount of contribution (\$)

\$ 500.00

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

Date

07/25/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Karen Marshall

Contributor address;

City; State; Zip Code

281 Ware

Buda, TX 78610

Amount of contribution (\$)

\$ 50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/25/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bryan Blanks

Contributor address;

City; State; Zip Code

1006 Magnolia Cove

Buda, TX 78610

Amount of contribution (\$)

\$ 50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/25/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Marlene Myers

Contributor address;

City; State; Zip Code

P.O. Box 364

Dripping Springs, TX 78620

Amount of contribution (\$)

\$ 100.00

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**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **18****2** FILER NAME**Gary M. Cutler****3** Filer ID (Ethics Commission Filers)**4** Date

07/26/2018

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

Charles D. Nash, Jr.

6 Contributor address;

City; State; Zip Code

P.O. Box 1007

San Marcos, TX 78667-1007

7 Amount of contribution (\$)

\$ 500.00

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

Date

07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Red River Waste Solutions LP, James Arrington

Contributor address;

City; State; Zip Code

4004 E. US HWY 290

Dripping Springs, TX 78620

Amount of contribution (\$)

\$ 2,500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

J. R. Page

Contributor address;

City; State; Zip Code

14404 Sandy Side Drive

Austin, TX 78728

Amount of contribution (\$)

\$ 1,000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

James E. Bradley

Contributor address;

City; State; Zip Code

P.O. Box 1301

Austin, TX 78767

Amount of contribution (\$)

\$ 5,000.00

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**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **18****2** FILER NAME**Gary M. Cutler****3** Filer ID (Ethics Commission Filers)**4** Date

07/26/2018

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

JG Comfort Control LLC, DBA Comfort Control, Nick Albini

6 Contributor address;

City; State; Zip Code

P.O. Box 1482

Dripping Springs, TX 78620

7 Amount of contribution (\$)

\$ 500.00

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date
07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Berg & Florio OD PA Dripping Springs

Dr. Kyle Florio & Dr. Sarah E. Berg

Contributor address;

City; State; Zip Code

433 Sportsplex Drive, Suite 100

Dripping Springs, TX 78620

Amount of contribution (\$)

\$ 1,000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Samir Momin

Contributor address;

City; State; Zip Code

601 W. Hwy 290

Dripping Springs, TX 78620

Amount of contribution (\$)

\$ 50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lori Kepler Cofano

Contributor address;

City; State; Zip Code

P.O. Box 113

Driftwood, TX 78619

Amount of contribution (\$)

\$ 50.00

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**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 18

2 FILER NAME

Gary M. Cutler

3 Filer ID (Ethics Commission Filers)

4 Date

07/26/2018

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Sirena Cumberland

6 Contributor address;

City; State; Zip Code

136 Knoll Cove

Austin, TX 78737-4655

7 Amount of contribution (\$)

\$ 50.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Russell Molenaar, Jr.

Contributor address;

City; State; Zip Code

12701 Pauls Valley Road

Austin, TX 78737-9511

Amount of contribution (\$)

\$ 50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Stephen A. Meyer, Sr.

Contributor address;

City; State; Zip Code

143 Yucca Cove

Austin, TX 78737

Amount of contribution (\$)

\$ 50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lori A. Gray

Contributor address;

City; State; Zip Code

1351 Windmill Run

Wimberley, TX 78676-5873

Amount of contribution (\$)

\$ 50.00

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**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 18

2 FILER NAME

Gary M. Cutler

3 Filer ID (Ethics Commission Filers)

4 Date

07/26/2018

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Andrew Cable Campaign Fund

6 Contributor address;

City; State; Zip Code

P.O. Box 496

Wimberley, TX 78676

7 Amount of contribution (\$)

\$ 50.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Christopher P. Johnson

Contributor address;

City; State; Zip Code

1681 Hawthorne Loop

Driftwood, TX 78619

Amount of contribution (\$)

\$ 50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John Epley

Contributor address;

City; State; Zip Code

49 Woodcreek Drive

Wimberley, TX 78676

Amount of contribution (\$)

\$ 50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Nancye K. Britner

Contributor address;

City; State; Zip Code

49 Woodcreek Drive

Wimberley, TX 78676

Amount of contribution (\$)

\$ 50.00

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**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **18****2** FILER NAME**Gary M. Cutler****3** Filer ID (Ethics Commission Filers)**4** Date

07/26/2018

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

Suzanne Pacheco

6 Contributor address;

City; State; Zip Code

185 Barton Creek Circle

Dripping Springs, TX 78620

7 Amount of contribution (\$)

\$ 100.00

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

Date

07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Juan L. Saenz

Contributor address;

City; State; Zip Code

206 Field Corn Lane

San Marcos, TX 78666-7784

Amount of contribution (\$)

\$ 100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Luanne Berlin

Contributor address;

City; State; Zip Code

211 Clark Cove

Buda, TX 78610

Amount of contribution (\$)

\$ 100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

William P. Conley

Contributor address;

City; State; Zip Code

701 Mountain Crest Drive

Wimberley, TX 78676

Amount of contribution (\$)

\$ 100.00

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**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **18****2** FILER NAME**Gary M. Cutler****3** Filer ID (Ethics Commission Filers)**4** Date

07/26/2018

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

Brian Olson, Premier Cuts Operating Account

6 Contributor address;

City; State; Zip Code

109 E. Hopkins Street

San Marcos, TX 78666

7 Amount of contribution (\$)

\$ 100.00

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

Date

07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Virginia Kathi Hood

Contributor address;

City; State; Zip Code

750 Dawn View

Dripping Springs, TX 78620-2494

Amount of contribution (\$)

\$ 100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chris Smith

Contributor address;

City; State; Zip Code

111C Deer Crossing Lane

Wimberley, TX 78676

Amount of contribution (\$)

\$ 150.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ken C. Nicolas

Contributor address;

City; State; Zip Code

611 Roy Creek Trail

Dripping Springs, TX 78620-5531

Amount of contribution (\$)

\$ 200.00

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**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **18****2** FILER NAME**Gary M. Cutler****3** Filer ID (Ethics Commission Filers)**4** Date

07/26/2018

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

Ray Whisenant, Jr.

6 Contributor address;

City; State; Zip Code

22501 RR 12

Dripping Springs, TX 78620

7 Amount of contribution (\$)

\$ 250.00

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

Date

07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

James Nicholas Edwards

Contributor address;

City; State; Zip Code

3820 River Road

Wimberley, TX 78676-5141

Amount of contribution (\$)

\$ 250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Tamra Tindol

Contributor address;

City; State; Zip Code

552 Canna Lily Circle

Driftwood, TX 78619

Amount of contribution (\$)

\$ 500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jim & Maripat Powers

Contributor address;

City; State; Zip Code

1280 Drifting Wind Run

Dripping Springs, TX 78620

Amount of contribution (\$)

\$ 500.00

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**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **18****2** FILER NAME**Gary M. Cutler****3** Filer ID (Ethics Commission Filers)**4** Date

07/26/2018

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

Lanette Lowden

6 Contributor address; City; State; Zip Code4995 Lone Man Mountain Road
Wimberley, TX 78676**7** Amount of contribution (\$)

\$ 1,000.00

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

Date

07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Victoria Cox

Contributor address; City; State; Zip Code

8940 FM 150
Driftwood, TX 78619

Amount of contribution (\$)

\$ 1,000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

0726/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Walter Smith Campaign Account

Contributor address; City; State; Zip Code

167 Vincas Shadow CT
Driftwood, TX 78619-8094

Amount of contribution (\$)

\$ 1,500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Richard R. Scott 1991 Trust

Contributor address; City; State; Zip Code

11030 MT Sharp Road
Wimberley, TX 78676

Amount of contribution (\$)

\$ 2,500.00

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**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 18

2 FILER NAME

Gary M. Cutler

3 Filer ID (Ethics Commission Filers)

4 Date

07/26/2018

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Michael J. Kaiman, Turner Construction Company

6 Contributor address;

City; State; Zip Code

727 Sentry HL

San Antonio, TX 78260-2977

7 Amount of contribution (\$)

\$ 1,000.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jeff Pittman

Contributor address;

City; State; Zip Code

237 Kellog

Fischer, TX 78623-2048

Amount of contribution (\$)

\$ 100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dale Wright

Contributor address;

City; State; Zip Code

1008 Lookout Hill Cove

Dripping Springs, TX 78620

Amount of contribution (\$)

\$ 10.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bob Parks

Contributor address;

City; State; Zip Code

890 Moss Rose Lane

Driftwood, TX 78619

Amount of contribution (\$)

\$ 100.00

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**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **18****2** FILER NAME**Gary M. Cutler****3** Filer ID (Ethics Commission Filers)**4** Date

07/26/2018

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

Cassie Dyson

6 Contributor address;

City; State; Zip Code

890 Moss Rose Lane

Driftwood, TX 78619

7 Amount of contribution (\$)

\$ 100.00

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

Date

07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Russ Molenaar

Contributor address;

City; State; Zip Code

P.O. Box 852

Dripping Springs, TX 78620

Amount of contribution (\$)

\$ 100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jay & Judy Messer

Contributor address;

City; State; Zip Code

1616 Chesterwood Cove

Austin, TX 78746

Amount of contribution (\$)

\$ 100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Col Charles E. Boney

Contributor address;

City; State; Zip Code

700 Barton Creek Drive

Dripping Springs, TX 78620-3713

Amount of contribution (\$)

\$ 200.00

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**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **18****2** FILER NAME**Gary M. Cutler****3** Filer ID (Ethics Commission Filers)**4** Date

07/26/2018

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

George Manassian

Contributor address;

City; State; Zip Code

6700 Hwy 290 West

Dripping Springs, TX 78620

7 Amount of contribution (\$)

\$ 300.00

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

Date

07/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Erica Bradley

Contributor address;

City; State; Zip Code

8200 Sunburst Parkway

Round Rock, TX 78681

Amount of contribution (\$)

\$ 300.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ 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

☐ 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.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: 01

2 FILER NAME
Gary M. Cutler

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date
07/26/2018

6 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Scott Roberts, Salt Lick BBQ

7 Contributor address; City; State; Zip Code
P.O. Box 311
Driftwood, TX 78619

8 Amount of Contribution \$
\$ 3,500.00

9 In-kind contribution description
Facilities, Set up & clean up of facilities, food & drinks for fund raiser.

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)
Restaurant Owner

11 Employer (FOR NON-JUDICIAL) (See Instructions)
Salt Lick BBQ Restaurant

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 ☐ out-of-state PAC (ID#: _____)

Amount of Contribution \$

In-kind contribution description

Contributor address; City; State; Zip Code

☐ 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.

POLITICAL EXPENDITURES MADE 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
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 F1: 09	2 FILER NAME Gary M. Cutler	3 Filer ID (Ethics Commission Filers)								
4 Date 07/13/2018	5 Payee name Hobby Lobby									
6 Amount (\$) \$ 36.69	7 Payee address; City; State; Zip Code 4040 S. Lamar Blvd Austin, TX 78704									
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense - Floral Decorations for Fund Raiser									
	(b) Description <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										
<table style="width: 100%; border: none;"> <tr> <td style="width: 20%; border: none;">Date</td> <td style="width: 40%; border: none;">Candidate / Officeholder name</td> <td style="width: 20%; border: none;">Office sought</td> <td style="width: 20%; border: none;">Office held</td> </tr> <tr> <td style="border: none;">07/15/2018</td> <td style="border: none;">WIX.com Inc.</td> <td style="border: none;"></td> <td style="border: none;"></td> </tr> </table>			Date	Candidate / Officeholder name	Office sought	Office held	07/15/2018	WIX.com Inc.		
Date	Candidate / Officeholder name	Office sought	Office held							
07/15/2018	WIX.com Inc.									
<table style="width: 100%; border: none;"> <tr> <td style="width: 20%; border: none;">Amount (\$)</td> <td style="width: 40%; border: none;">Payee address; City; State; Zip Code</td> <td style="width: 20%; border: none;"></td> <td style="width: 20%; border: none;"></td> </tr> <tr> <td style="border: none;">\$ 9.90</td> <td style="border: none;">New York, NY</td> <td style="border: none;"></td> <td style="border: none;"></td> </tr> </table>			Amount (\$)	Payee address; City; State; Zip Code			\$ 9.90	New York, NY		
Amount (\$)	Payee address; City; State; Zip Code									
\$ 9.90	New York, NY									
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees - Monthly Web Site Fee									
	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense									
<table style="width: 100%; border: none;"> <tr> <td style="width: 20%; border: none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width: 40%; border: none;">Candidate / Officeholder name</td> <td style="width: 20%; border: none;">Office sought</td> <td style="width: 20%; border: none;">Office held</td> </tr> <tr> <td style="border: none;"></td> <td style="border: none;"></td> <td style="border: none;"></td> <td style="border: none;"></td> </tr> </table>			Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held							
<table style="width: 100%; border: none;"> <tr> <td style="width: 20%; border: none;">Date</td> <td style="width: 40%; border: none;">Payee name</td> <td style="width: 20%; border: none;"></td> <td style="width: 20%; border: none;"></td> </tr> <tr> <td style="border: none;">07/17/2018</td> <td style="border: none;">Sam's Club</td> <td style="border: none;"></td> <td style="border: none;"></td> </tr> </table>			Date	Payee name			07/17/2018	Sam's Club		
Date	Payee name									
07/17/2018	Sam's Club									
<table style="width: 100%; border: none;"> <tr> <td style="width: 20%; border: none;">Amount (\$)</td> <td style="width: 40%; border: none;">Payee address; City; State; Zip Code</td> <td style="width: 20%; border: none;"></td> <td style="width: 20%; border: none;"></td> </tr> <tr> <td style="border: none;">\$ 31.94</td> <td style="border: none;">4970 West Highway 290 Austin, TX 78735</td> <td style="border: none;"></td> <td style="border: none;"></td> </tr> </table>			Amount (\$)	Payee address; City; State; Zip Code			\$ 31.94	4970 West Highway 290 Austin, TX 78735		
Amount (\$)	Payee address; City; State; Zip Code									
\$ 31.94	4970 West Highway 290 Austin, TX 78735									
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense - Fund Raiser Event Supplies									
	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense									
<table style="width: 100%; border: none;"> <tr> <td style="width: 20%; border: none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width: 40%; border: none;">Candidate / Officeholder name</td> <td style="width: 20%; border: none;">Office sought</td> <td style="width: 20%; border: none;">Office held</td> </tr> <tr> <td style="border: none;"></td> <td style="border: none;"></td> <td style="border: none;"></td> <td style="border: none;"></td> </tr> </table>			Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held							

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POLITICAL EXPENDITURES MADE 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
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 F1: 09		2 FILER NAME Gary M. Cutler		3 Filer ID (Ethics Commission Filers)	
4 Date 07/17/2018		5 Payee name Minuteman Press			
6 Amount (\$) \$ 67.84		7 Payee address; City; State; Zip Code 1221 W 6th Street, Suite B Austin, TX 78703			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense - Event Poster Board		(b) Description <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		Candidate / Officeholder name		Office sought Office held	
Date 07/19/2018		Payee name Samuel Paul			
Amount (\$) \$ 1,000.00		Payee address; City; State; Zip Code 310 Springwood Road Dripping Springs, TX 78620			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense - Fund Raiser Event Petty Cash		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	
Date 07/20/2018		Payee name 2014 Square, Inc.			
Amount (\$) \$ 20.64		Payee address; City; State; Zip Code 1455 Market Street, Suite 600 San Francisco, CA 94103			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees - Square Transaction Fees		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	

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POLITICAL EXPENDITURES MADE 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
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 F1: 09	2 FILER NAME Gary M. Cutler	3 Filer ID (Ethics Commission Filers)
4 Date 07/25/2018	5 Payee name Eventbrite	
6 Amount (\$) \$ 256.76	7 Payee address; City; State; Zip Code 155 5th Street San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees - Web Site Transaction 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	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>		
Date 07/26/2018	Payee name Mary Pat Paul	
Amount (\$) \$ 69.19	Payee address; City; State; Zip Code 310 Springwood Road Dripping Springs, TX 78620	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement - Payment for Fund Raiser Event Supplies/ Decorations 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 <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>		
Date 07/27/2018	Payee name Republican Party of Texas - Grassroots Club	
Amount (\$) \$ 8.25	Payee address; City; State; Zip Code 211 E 7th Street #915 Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees - Monthly Membership Fee 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 <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>		
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POLITICAL EXPENDITURES MADE 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
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 F1: 09		2 FILER NAME Gary M. Cutler		3 Filer ID (Ethics Commission Filers)	
4 Date 08/14/2018		5 Payee name The Friends Foundation			
6 Amount (\$) \$ 250.00		7 Payee address; City; State; Zip Code P.O. Box 8 Dripping Springs, TX 78620			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations - Fund Raiser Sponsor BBQ		(b) Description <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		Candidate / Officeholder name		Office sought Office held	
Date 08/15/2018		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 - Monthly Web Site Fee		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	
Date 08/16/2018		Payee name Hays County Republican Party			
Amount (\$) \$ 30.00		Payee address; City; State; Zip Code P.O. Box 1655 San Marcos, TX 78667			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contributions/Donations - Annual HCRP Picnic Fund Raiser		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	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
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Candidate/Officeholder/Political Committee
Credit Card Payment

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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: 09		2 FILER NAME Gary M. Cutler		3 Filer ID (Ethics Commission Filers)	
4 Date 08/20/2018		5 Payee name Lon Shell County Commissioner Precinct 3 Campaign			
6 Amount (\$) \$ 200.00		7 Payee address; City; State; Zip Code P.O. Box 2085 / 200 Stillwater Wimberley, TX 78676			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations - Campaign Donations		(b) Description <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		Candidate / Officeholder name		Office sought Office held	
Date 08/27/2018		Payee name Republican Party of Texas - Grassroots Club			
Amount (\$) \$ 8.25		Payee address; City; State; Zip Code 211 E 7th Street #915 Austin, TX 78701			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees - Monthly Membership Fee		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	
Date 08/28/2018		Payee name Ken Strange Campaign for State Rep District 45			
Amount (\$) \$ 200.00		Payee address; City; State; Zip Code 46 Peace Pipe Wimberley, TX 78676			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contributions/Donations - Campaign Donation		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	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
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Candidate/Officeholder/Political Committee
Credit Card Payment

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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: 09	2 FILER NAME Gary M. Cutler	3 Filer ID (Ethics Commission Filers)
4 Date 09/11/2018	5 Payee name Mark Jones Campaign	
6 Amount (\$) \$ 125.00	7 Payee address; City; State; Zip Code P.O. Box 982 Kyle, TX 78640	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations - Campaign Contribution	(b) Description <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 09/15/2018	Candidate / Officeholder name Payee name WIX.com Inc.	
Amount (\$) \$ 9.90	City; State; Zip Code New York, NY	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees - Monthly Web Site Fee	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 09/24/2018	Candidate / Officeholder name Payee name Together For A Cause, Inc. (Roland Saucedo)	
Amount (\$) \$ 200.00	City; State; Zip Code P.O. Box 565 San Marcos, TX 78667	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations - Diez y Seis Celebration Donation	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		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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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: 09		2 FILER NAME Gary M. Cutler		3 Filer ID (Ethics Commission Filers)	
4 Date 09/27/2018		5 Payee name Republican Party of Texas - Grassroots Club			
6 Amount (\$) \$ 8.25		7 Payee address; City; State; Zip Code 211 E 7th Street #915 Austin, Texas 78701			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees - Monthly Membership Fee		(b) Description <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		Candidate / Officeholder name		Office sought Office held	
Date 10/15/2018		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 - Monthly Web Site Fee		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	
Date 10/16/2018		Payee name Will Conley Campaign			
Amount (\$) \$ 1,000.00		Payee address; City; State; Zip Code 701 Mountain Crest Wiimberley, TX 78676			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contributions/Donations - Campaign Donation		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	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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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: 09		2 FILER NAME Gary M. Cutler		3 Filer ID (Ethics Commission Filers)	
4 Date 10/27/2018		5 Payee name Republican Party of Texas - Grassroots Club			
6 Amount (\$) \$ 8.25		7 Payee address; City; State; Zip Code 211 E 7th Street #915 Austin, TX 78701			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees - Monthly Membership Fee		(b) Description <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		Candidate / Officeholder name		Office sought Office held	
Date 11/15/2018		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 - Monthly Web Site Fee		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	
Date 11/26/2018		Payee name Republican Party of Texas - Grassroots Club			
Amount (\$) \$ 8.25		Payee address; City; State; Zip Code 211 E 7th Street #915 Austin, TX 78701			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees - Monthly Membership Fee		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	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
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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: 09		2 FILER NAME Gary M. Cutler		3 Filer ID (Ethics Commission Filers)	
4 Date 12/15/2018		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 - Monthly Web Site Fee		(b) Description <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		Candidate / Officeholder name		Office sought Office held	
Date 12/26/2018		Payee name Republican Party of Texas - Grassroots Club			
Amount (\$) \$ 8.25		Payee address; City; State; Zip Code 211 E 7th Street #915 Austin, TX 78701			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees - Monthly Membership Fee		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	
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	

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IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.

1 Total pages Schedule T: 01

2 FILER NAME
Gary M. Cutler

3 Filer ID (Ethics Commission Filers)

4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee
Scott Roberts, Owner Salt Lick BBQ

5 Contribution / Expenditure reported on:

- ☒ Schedule A2 ☐ Schedule B ☐ Schedule B(J) ☐ Schedule C2 ☐ Schedule D ☐ Schedule F1
☐ Schedule F2 ☐ Schedule F4 ☐ Schedule G ☐ Schedule H ☐ Schedule COH-UC ☐ Schedule B-SS

6 Dates of travel

7 Name of person(s) traveling

8 Departure city or name of departure location

9 Destination city or name of destination location

10 Means of transportation

11 Purpose of travel (including name of conference, seminar, or other event)

Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:

- ☐ Schedule A2 ☐ Schedule B ☐ Schedule B(J) ☐ Schedule C2 ☐ Schedule D ☐ Schedule F1
☐ Schedule F2 ☐ Schedule F4 ☐ Schedule G ☐ Schedule H ☐ Schedule COH-UC ☐ Schedule B-SS

Dates of travel

Name of person(s) traveling

Departure city or name of departure location

Destination city or name of destination location

Means of transportation

Purpose of travel (including name of conference, seminar, or other event)

Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:

- ☐ Schedule A2 ☐ Schedule B ☐ Schedule B(J) ☐ Schedule C2 ☐ Schedule D ☐ Schedule F1
☐ Schedule F2 ☐ Schedule F4 ☐ Schedule G ☐ Schedule H ☐ Schedule COH-UC ☐ Schedule B-SS

Dates of travel

Name of person(s) traveling

Departure city or name of departure location

Destination city or name of destination location

Means of transportation

Purpose of travel (including name of conference, seminar, or other event)

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