## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed	i:		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST  MT. JIMMY  NICKNAME LAST	Alan	OFFICE U	ISE ONLY		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address  5 CANDIDATE / OFFICEHOLDER PHONE	1 1001	CITY; STATE; ZIP CODE  X. WIMBERY TX  EXTENSION 186714	JAN 1 07 Elections (	2020 Office		
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST HEATH NICKNAME TAGT KICHARDS	MI  SUFFIX	Receipt #  Date Processed  Date Imaged	Amount \$		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business) 8 CAMPAIGN TREASURER PHONE	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  505 Mosuon Fail Wimberley TX 18474  AREA CODE PHONE NUMBER EXTENSION  (847) 312 - 0594					
9 REPORT TYPE	January 15 30th day before e		15th day after treasurer approximately (Officeholder of Final Report (a	ointment		
10 PERIOD COVERED	Month Day Year   Month Day Year   12/31/2019					
11 ELECTION	ELECTION DATE  Month Day Year Primary  General	ELECTION TYPE  Runoff Other Description Special				
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (IT KNOWN) HOUS COUN PRECIN		NISSIONET		

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME	Alan	Hall	Filer ID (Ethics Commission Filers)		
16 NOTICE FROM POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEE SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLD KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NO OF SUCH EXPENDITURES.					
	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL SPECIFIC	COMMITTEE ADDRESS			
Additional Pages		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 CONTRIBUTION TOTALS	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED		\$ \$		
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ \$		
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 148.82		
	4. TOTAL POLITICAL EXPENDITURES		\$ 148.82		
CONTRIBUTION BALANCE	5. TOTAL I	s 53. lde			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$8,434.31				
18 AFFIDAVIT					
Notar Com	ATHER J. RICHARD y Public, State of Te m. Expires 11-14-20 otary ID 131391071	vas 121	nation required to be reported by me		
Signature of Cändidate or Officeholder  AFFIX NOTARY STAMP / SEALABOVE					
Sworn to and subscribed before me, by the said					
day of, 20_20, to certify which, witness my hand and seal of office.					
H. Richards Houther Kichards Notary Vublic					
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  20 Filer ID (Ethics C	commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. SCHEDULE E: LOANS	\$ 125.00
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OF	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

## LOANS

### SCHEDULE E

The I	1 Total pages Schedule E:					
2 FILER NAME	3 Filer ID (Ethics Commission Filers)					
4 TOTAL OF UNITEMIZED LOANS			\$			
5 Date of loan 8 15 19 6 Is lender a financial Institution? Y N	7 Name of lender out-of-state F  SIMMY Alan  8 Lender address; City;  401 Green Acres D	State; Zip Code	9 Loan Amount (\$) 125.00 10 Interest rate 11 Maturity date			
12 Principal occupation	n / Job title (See Instructions)	13 Employer (See Instructions)	1 000			
AHome	y at Law	Jimmy Alan H	ul PCC			
14 Description of Colla	leral	Check if personal fundaccount (See Instruct	ds were deposited into political ions)			
16 GUARANTOR INFORMATION	17 Name of guarantor		19 Amount Guaranteed (\$)			
18 Guarantor address; City; State; Zip Code  in not applicable  20 Principal Occupation (See Instructions)  21 Employer (See Instructions)						
Timopai Cocapati	on (occ mendency	21 Employer (See Instructions)				
Date of loan	Name of lender	PAC (ID#:)	Loan Amount (\$)			
ls lender a financial	Lender address; City;	State; Zip Code	Interest rate			
Institution?			Maturity date			
Principal occupation / Job title (See Instructions) Emp		Employer (See Instructions)				
Description of Colla	teral	Check if personal fundaccount (See Instruct	ds were deposited into political ions)			
GUARANTOR INFORMATION	Name of guarantor		Amount Guaranteed (\$)			
not applicable	Guarantor address; City; State; Zip Code					
Principal Occupation	on (See Instructions)	Employer (See Instructions)				

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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