

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:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <u>MR</u>	FIRST <u>Mark</u>	MI <u>G</u>
	NICKNAME	LAST <u>Jones</u>	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <u>P.O. Box 982, Kyle, Tx. 78640</u>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <u>(512) 517-2925</u>		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <u>MR</u>	FIRST <u>James</u>	MI <u>D</u>
	NICKNAME	LAST <u>Anderson</u>	SUFFIX
	<u>Dwayne</u>		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <u>101 W. 6th St. Ste. #508, Austin, Tx. 78701</u>		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <u>(512) 481-9506</u>		
9 REPORT TYPE	<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)		
10 PERIOD COVERED	Month Day Year Month Day Year <u>7 / 1 / 17</u> THROUGH <u>12 / 31 / 17</u>		
11 ELECTION	ELECTION DATE Month Day Year <u> / / </u>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) <u>County Commissioner Pct. 2</u>		
13 OFFICE SOUGHT (if known)			

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Mark Jones 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.

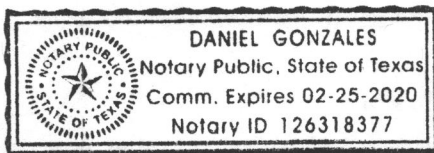
COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	
<input type="checkbox"/> SPECIFIC	
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ <u>2</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>18,100.00</u>
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ <u>50.00</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>4,150.00</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>15,636.89</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>2</u>

18 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Mark Jones, this the 17 day of January, 2018, 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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Mark Jones

3 Filer ID (Ethics Commission Filers)

4 Date

12/30/17

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

HDR Engineering, Inc

6 Contributor address;

City;

State;

Zip Code

Ste. 1230

1290 Wonder World Dr, San Marcos, TX. 78666

7 Amount of contribution (\$)

1,000.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

See Attachment

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)

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.

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:	2 FILER NAME <i>Mark Jones</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>6/1/17</i>	5 Payee name <i>Texas Football Federation</i>
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6 Amount (\$) <i>800.00</i>	7 Payee address; City; State; Zip Code <i>Austin, TX.</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Hays High Table sponsor</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>6/5/17</i>	Payee name <i>Hays Activity Fund</i>
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Amount (\$) <i>250.00</i>	Payee address; City; State; Zip Code <i>Buda, TX. 78610</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Ad, Program</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>8/12/17</i>	Payee name <i>Buda Vo Ag</i>
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Amount (\$) <i>50.00</i>	Payee address; City; State; Zip Code <i>Buda, TX. 78610</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Donation</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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:		2 FILER NAME <i>Mark Jones</i>		3 Filer ID (Ethics Commission Filers)	
4 Date <i>8/12/17</i>		5 Payee name <i>Gunner Thomas Memorial Rodeo</i>			
6 Amount (\$) <i>1,100.00</i>		7 Payee address; City; State; Zip Code <i>Buda, TX 78610</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <i>Rodeo chute sponsor</i>		(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 <i>8/12/17</i>		Payee name <i>Buda Vo Ag</i>			
Amount (\$) <i>450.00</i>		Payee address; City; State; Zip Code <i>Buda, TX. 78610</i>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <i>Silent Auction Donation</i>		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 <i>11/4/17</i>		Payee name <i>Hays County Republican Party</i>			
Amount (\$) <i>750.00</i>		Payee address; City; State; Zip Code <i>San Marcos, TX. 78666</i>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <i>Filing Fee</i>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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
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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:	2 FILER NAME <i>Mark Jones</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>11/15/17</i>	5 Payee name <i>Hays Education Foundation</i>	
6 Amount (\$) <i>750.00</i>	7 Payee address; City; State; Zip Code <i>Budo, TX. 78610</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Table sponsor</i>	(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	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		
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		
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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Donation Name	Mailing Address	City	State	Zip Code	Donation Amount
Mark Mosier	8216 Fern Bluff Ave	Round Rock	Tx	78681	200
Roman Grijalva	303 Mirafiel	Austin	Tx	78737	200
Seth Mearig	17200 Rush Pea Cir	Austin	Tx	78738	200
Jim Powers	1280 Drifting Wind Run	Dripping	Tx	78620	100
Robert Reyes	3937 Octavia Dr	Pflugerville	Tx	78660	100
J.Kent O'Brien	515 Explorer	Lakeway	Tx	78734	50
Robert Austin	14831 Forward Pass	San Antonio	Tx	78248	100
HBA Hom PAC	8140 Exchange Dr	Austin	Tx	78754	250
HNTB Holdings PAC	715 Kirk Dr	Kansas City	Mo	64105	1500
RS&H PAC Texas	8140 North Mopac Express Way	Austin	Tx	78759	1500
	Bldg 2 Ste 100				
Julie&Jonathan Nobles	143 Mercury Cv	Leander	Tx	78641	200
Erin&Arnold Gonzales	305 Payne Stewart Dr	Round Rock	Tx	78664	200
Rob&Kristine	220 Bowlin Cv	Dripping	Tx	78620	250
Wesley Jasek	1805 E Messick Loop	Round Rock	Tx	78681	250
John&Amy Doucet	2300 Gatlin Creek Rd	Dripping	Tx	78620	1000
Garver PAC	PO Box 1084	North Little Rock	Ar	72115	1000
Cobb Fendley PAC	13430 Northwest Freeway Ste 1100	Houston	Tx	77040	1000
Willis Conner	1717 West 6th Ste 375	Austin	Tx	78703	1000
M&S Engineering LLC PAC	PO Box 970	Spring Branch	Tx	78070	1000
Brian & Julie Rice	2905 Brian Wood Ct	Cedar Park	Tx	78613	750
David Hamilton	411 E 24th St	Houston	Tx	77008	750
Half Assoc. State PAC	1201 N Bowser Road	Richardson	Tx	75081	500
Laura&Daniel Rogers	1340 Lakeshore Dr	Spicewood	Tx	78669	500
Costello, Inc. PAC	9990 Richmond Ave Ste 450-N	Houston	Tx	77042	500
Kenneth&Jennifer Schrock	4229 Lost Oasis Hollow	Austin	Tx	78739	500
Henry&Georgia Smith	2801 Bear Springs Trail	Austin	Tx	78748	500
Klotz Associates PAC	1160 Dairy Ashford Ste 500	Houston	Tx	77079	500
Gilmer Gaston	21335 Oak Ridge Ct	San Antonio	Tx	78258	250
Pix&Catherine Howell	PO Box 663	Wimberley	Tx	78676	250
Karen Friese	6603 Cat Creek Trl	Austin	Tx	78731	250
Syed Jafar	5111 Forest Sage Ln	Katy	Tx	77494	250
Trey&Elizabeth	PO Box 268	Lampasas	Tx	76550	250
Brian&Sommer Boecker	2510 Durlston Ct	Cedar Park	Tx	78613	250
James&Gayle Heath	107 Settlers Valley Dr	Pflugerville	Tx	78660	250
Trine Devco LLC	1508 S Lamar Blvd	Austin	Tx	78704	250
LAN-PAC	2925 Briarpark Dr. 4th Floor	Houston	Tx	77042	500