CANDIDATE / OFFICEHOLDER FORM C/OH **COVER SHEET PG 1** CAMPAIGN FINANCE REPORT 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. MS / MRS / MR FIRST 3 CANDIDATE/ MI OFFICE USE ONLY **OFFICEHOLDER** David NAME Date Received LAST SUFFIX NICKNAME Hays Co. Elections Puryear 4 CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; STATE: ZIP CODE JUL 17 2023 **OFFICEHOLDER** PO Box 227 MAILING Driftwood, Tx 78619 **ADDRESS** RECEIVED Change of Address AREA CODE PHONE NUMBER EXTENSION 5 CANDIDATE/ Date Hand-delivered or Date Postmerked **OFFICEHOLDER** (512)496-3560 PHONE Receipt # Amount \$ MS / MRS / MR FIRST МІ 6 CAMPAIGN TREASURER Thomas Date Processed NAME LAST NICKNAME SUFFIX Schneider STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; ZIP CODE 7 CAMPAIGN **TREASURER** 10640 FM 967 **ADDRESS** Buda, Tx 78610 (Residence or Business) AREA CODE PHONE NUMBER 8 CAMPAIGN EXTENSION TREASURER PHONE (512)657-9669 9 REPORT TYPE 15th day after campaign 30th day before election Runoff January 15 treasurer appointment (Officeholder Only) Exceeded Modified Final Report (Attach C/OH - FR) July 15 8th day before election Reporting Limit 10 PERIOD Year COVERED 30 / 23 1 23 / 1 THROUGH ELECTION DATE **ELECTION TYPE** 11 ELECTION Primary Runoff Month General Special OFFICE HELD (If any) 12 OFFICE 13 OFFICE SOUGHT (If known) 14 NOTICE FROM 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 OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDER'S ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. POLITICAL COMMITTEE(S) COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS **GO TO PAGE 2**

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME David Puryear			16 Filer ID (E	thics Commission Filers)
17 CONTRIBUTION TOTALS	PLEDGES, LOANS, OR GU	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS; OR CONTRIBUTIONS MADE ELECTRONICALLY)		0.00
	2. TOTAL POLITICAL CONT (OTHER THAN PLEDGES, L	RIBUTIONS OANS, OR GUARANTEES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLIT	TOTAL UNITEMIZED POLITICAL EXPENDITURE.		0.00
	4. TOTAL POLITICAL EXPE	TOTAL POLITICAL EXPENDITURES		31,407.02
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRI OF REPORTING PERIOD	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD		13,014.99
OUTSTANDING LOAN TOTALS		TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		0.00
	swear, or affirm, under penalty of perjur quired to be reported by me under Title 1		and correct	and includes all information
		6	Day	us
		Signature of Ca	ndidate or Of	ficeholder
	Please cor	nplete either option below	r:	
	1 10000 001	inprote district option boton		
(1) Affidavit				
NOTARY STAMP/SEA	L			
Sworn to and subscribed	before me by	this the	da	y of,
20, to certify	which, witness my hand and seal of office	θ.		
Signature of officer administr	ering oath Printed name o	f officer administering oath	Title	of officer administering oath
		OR		
(2) Unsworn Declarat	ion			
My name is David Pu	ıryear	and my date of birth is	12/05/19	55
My address is PO Box		Driftwood T	x , 786	19 Hays .
	(street)			code) (country)
Executed in Hays	County, State of Tx	on the 15th day of July (month		0 <mark>23</mark> (year)
		4	Elyn	1
		Signature of Candi	date/Officehold	der (Declarant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

	19 FILER NAME David Puryear		mmission Filers)	
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT	
1.	1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS			
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS			
3.	3. SCHEDULE B: PLEDGED CONTRIBUTIONS			
4.	SCHEDULE E: LOANS			
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.	8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD			
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS			
10.	0. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH			
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS			
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER			

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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 Git/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Travel Outer (entitle)

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
1	David Puryear					
Date	5 Payee name					
01/10/2023	Roger Borgelt, attorney					
3,087.50	614 S Capital of Tx Hwy, Austin, Tx 7	City; 78746	State;	Zip Code		
	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
PURPOSE OF EXPENDITURE	legal services	rendering of legal advice				
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/Oi	Candidate / Officeholder name	Office sought		Office held		
Date	Payee name					
04/12/2023	Texas Secretary of State					
Amount (\$)	Payee address;	City;	State;	Zip Code		
28,319.52	1019 Brazos St, Austin, Tx 78701					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) other Description cost of conducting recount					
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/O	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				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name	Office sought		Office held		

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

If the requested information is not applicable, DO NOT include this page in the report. **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense **Event Expense** Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Polling Expense Travel In District Contributions/Donations Made By Travel Out Of District Other (enter a category not listed above) Printing Expense Salaries/Wages/Contract Labor Legal Services Candidate/Officeholder/Political Committee The Instruction Guide explains how to complete this form. 1 Total pages Schedule F2: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) David Puryear 4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS 594.18 6 Payee name 5 Date 02/16/2023 Dex Imaging, LLC 7 Amount (\$) 8 Payee address; City; Zip Code State: PO Box 17299 Clearwater, FL 33762 594.18 9 TYPE OF Political EXPENDITURE Non-Political (a) Category (See Categories listed at the top of this achedule) (b) Description 10 cost of copier rental and related copies printing expense PURPOSE OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 11 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held Date Pavee name Amount (\$) Payee address; City; State: Zip Code TYPE OF Political Non-Political EXPENDITURE Category (See Categories listed at the top of this schedule) Description PURPOSE OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED