CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

P.O. Box 12070

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complete this form.	1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRST	M	OFFICE USE ONLY
NAME	NICKNAME LAST STINA	SUFFIX	Date Received E 2011
	FOX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; / CITY;	STATE; ZIP CODE	Date Hand-delivered or Postmedsed
change of address	_	<u>a03</u>	Receipt # Amount
5 CANDIDATE/ OFFICEHOLDER PHONE		-	Date Processed 5
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST CYUSTO	al	Date Imaged
	Gayde	$ \wedge$	
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO POROX PI FASE). APPISI IITE#	CITY STATE:	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER	EXTENSION	
9 REPORT TYPE	January 15 30th day before election	Runoff	15th day after campaign treasurer appointment (officeholder only)
	July 15 8th day before election	Exceeded \$500 limit	Final report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year $2/23/3014$ THROUGH	Month Day 07/15/	Year 2014
11 ELECTION	Month ELECTION DATE Year Year Primary	Runoff	General Special
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) Tarrant	County
		Justice of	County of the Peace, Rt3
	GO TO PAC	SE 2	·

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

P.O. Box 12070

FORM C/OH COVER SHEET PG 2

14 C/OH NAME	\		15 ACCOUNT # (Ethics Commission Filers)
14 C/OTT NAME	MUST	na tox	10 //0000HT // (2
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		□ 7 22 1
	SPECIFIC	COMMITTEE ADDRESS	
•	= =		
		COMMITTEE CAMPAIGN TREASURER NAME	
additional pages			
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
			χωτ. Θ4
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THATES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ	
·		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$
EXPENDITURE TOTALS	3. TOTAL F	OLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITE	MIZED \$
	4. TOTAL	POLITICAL EXPENDITURES	\$ 4.78
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DRTING PERIOD	DAY \$ 44.34
OUTSTANDING LOAN TOTALS	l .	PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF MY OF THE REPORTING PERIOD	\$ 4.78 DAY \$ 44.34 THE \$ 3207.10
18 AFFIDAVIT			
KRISTY M FLUD My Commission Expires September 29, 2017 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			
AFFIX NOTARY STAN	IP / SEAL ABOVE	A	
Sworn to and sub	scribed before	me, by the said Chistina Fo	, this the
14th day	1	1 / /	my hand and seal of office.
Kriotin	Flud	Krista M Flud	Notary
Signature of officer adm	inistering oath	Printed name of officer administering oath	Title of officer administering oath

EXPENDITURE CATEGORIES FOR BOX 8(a)

POLITICAL EXPENDITURES

P.O. Box 12070

SCHEDULE F

Accounting/Banking Consulting Expense Event Expense Fees	Legal Services Food/Beverage Expense Polling Expense Printing Expense	Salaries/Wages/C Solicitation/Fundra Travel In District Travel Out Of Dis Office Overhead/F	aising Expense 7 C	Contributions/Donat Candidate/Office	ipment & Related Ex	nmittee
	The Instruction Guid				negory not instead ab	ove)
1 Total pages Schedule F:	2 FILER NAME Facelor	×		3 ACCOUNT	# (Ethics Commission	n Filers)
3/14/2014	5 Payee name			. Y	211	
6 Amount (\$) 4, 78	7 Payee address; City; St	tate; Zip Code		Mental and the second of the s	SEN JUL S	7
8 PURPOSE OF	(a) Category (See categories listed at the to	p of this schedule)	(b) Description (If	travel outside of Texas	s, complete Schedule T)	50
EXPENDITURE	advertising e	KPEISE_		<u> </u>	(1) 2	, 47.5 Same
9 Complete ONLY if direct expenditure to benefit C/O	Candidate / Öfficeholde name	; '	Office sought	t til 2 manshire	Office held	and the second
Date	Payee name			and the second s		
Amount (\$)	Payee address; City; St	tate; Zip Code				
PURPOSE OF EXPENDITURE	Category (See categories listed at the to	p of this schedule)	Description (If	travel outside of Texas	s, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	3	Office sought		Office held	
Date	Payee name					
Amount (\$)	Payee address; City; St	ate; Zip Code				
PURPOSE OF EXPENDITURE	Category (See categories listed at the to	p of this schedule)	Description (If	travel outside of Texas	s, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H		Office sought		Office held	
Date	Payee name					
Amount (\$)	Payee address; City; St	ate; Zip Code				
PURPOSE OF EXPENDITURE	Category (See categories listed at the to	p of this schedule)	Description (If	travel outside of Texas	s, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name DH	•	Office sought		Office held	
	ATTACH ADDITIONAL C	COPIES OF THIS	SCHEDULE AS N	EEDED		

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

		The Instruction Guide explains how to complete this form Complete only if "Report Type" on page 1 is marked "Final Report"					
1	C/OH N	AAME ACCOUNT # (Ethics Commission Filers)					
3	SIGNA	ATURE					
	I do not	expect any further political contributions or political expenditures in connection with my condidacy. Lunderstand that decimating a					
	report a	expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a s a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions any campaign expenditures without a campaign treasurer appointment on file. Signature of Candidate / Officeholder					
4		FILER WHO IS NOT AN OFFICEHOLDER Complete A & B below o <i>nly</i> if you are not an officeholder					
	A.	CAMPAIGN FUNDS					
	Chec	k only one:					
		I do not have unexpended contributions or unexpended interest or income earned from political contributions.					
	×	I have unexpended contributions or unexpended interest or income earned from political contributions. I understant that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204					
	В.	ASSETS					
	Chec	k only one:					
	\bowtie	I do not retain assets purchased with political contributions or interest or other income from political contributions.					
		I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.					
5		CEHOLDER plete this section o <i>nly</i> if you are an officeholder ••					
		I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.					
		Signature of Officeholder					