(512) 463-5800 (TDD 1-800-735-2989)

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	TE / OFFICEH N FINANCE R			FORM C/OH Cover Sheet pg 1
The C/OH Instruction	Guide explains how to com	nplete this form.	1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR Mr.	FIRST Kussell	ß	OFFICE USE ONLY
NAME		Casey	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX: APT / SU	ITE#: CITY:	STATE: ZIP CODE	Date Hand delivered or Postmarked
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE	NUMBER	EXTENSION	Date Processed
6 CAMPAIGN TREASURER NAME		LAST ascy	SUFFIX	Date Imaged
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO BOROX PLE		CITY; STATE;	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE	NUMBER	EXTENSION	
9 REPORT TYPE		Oth day before election th day before election	Runoff	15th day after campaign treasurer appointment (officeholder only)     Final report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year 2/24/14	THROUGH	5 /19	Year 14
11 ELECTION	Month Day Year	ELECTION TYPE Primary	Runoff	General Special
12 OFFICE	OFFICE HELD (if any) Justice of the	Peqce Pct#3	13 OFFICE SOUGHT (if know	n)
		GO TO PAG	ЭЕ 2	

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**Texas Ethics Commission** 

Austin, Texas 78711-2070

(TDD 1-800-735-2989)

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CANDIDAT SUPPORT		CEHOLDER REPORT: S	FORM C/OH COVER SHEET PG 2
14 C/OH NAME R	155 Gasey		5 ACCOUNT # (Ethics Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOT	CE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MAD HOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDI ES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF T	DATE'S OR OFFICEHOLDER'S KNOWLEDGE OR
	COMMITTEE TYPE	OFW Conservative Voter	TART 2014 M
	SPECIFIC	COMMITTEE ADDRESS P.O. Box 173065 Arlington, Tx 76003	FILED MY 19 M
additional pages		COMMITTEE CAMPAIGN TREASURER NAME Stuart Lane	H 9: 10
		COMMITTEE CAMPAIGN TREASURER ADDRESS P.O. Box 173065 Arlington, Tx 76003	3
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE	
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$4822
EXPENDITURE TOTALS	3. TOTAL P	OLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMI	ZED \$ 212.65
	4. TOTAL	POLITICAL EXPENDITURES	\$ 5772.31
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DA	* \$ 172.41
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THY OF THE REPORTING PERIOD	<sup>HE</sup> \$ 9000 <sup>00</sup>
AFFIX NOTARY STAM		me, by the said	
Signature of officer admi	or	, 20 ZZ, to certify which, witness m MUMD AAMMA Printed name of officer administering oath	y hand and seal of office. MOHALL PWH'C Title of officer administering oath

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(512) 463-5800 (TDD 1-80

	CAL CONTRIBUTIONS THAN PLEDGES OR LOAN	NS		SCHEDULE A	
The Instruction Guide explains how to complete this form.			1 Total pages Sch	1 Total pages Schedule A:	
2 FILER NAME	Russ Casey	. <u> </u>	3 ACCOUNT # (Ef	thics Commission Filers)	
4 Date 2/28/14	<ul> <li>5 Full name of contributor □ out-of-state PAC(ID#_ Alpha Centann' Mgml.</li> <li>6 Contributor address; City; State; Zip Code p.O. Box 954 Keller, T× 76244</li> </ul>	) 	7 Amount of contribution (\$) 2500	8 (In-kinst contribution description (if applicable)	
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See		<u>≓</u> <del></del> <del></del> <del></del> <del></del> <del></del> <del></del> <del></del> <del></del>	
Date 3/6/14	Full name of contributor out-of-state PAC (ID#_ KEN Supp. Contributor address! City; State; Zip Code 8312 Thurn Way CH.		Amount of contribution (\$)	In-kind contribution description (if applicable)	
Principal occu	Fort Worth , TX 70 pation / Job title (See Instructions) efired.	6/80 Employer (See		f Texas, complete Schedule T)	
Date 2/28/14	Full name of contributor out-of-state PAC (ID#_ June Petter Contributor address; City; State; Zip Code 912 Overhill ST Bedford, Tx 76022		Amount of contribution (\$)	In-kind contribution description (if applicable)	
Principal occu	pation / Jobytitle (See Instructions)	Employer (See		f Texas, complete Schedule T)	
Date 2/28/14	Full name of contributor out-of-state PAC (ID#	405 76/02	Amount of contribution (\$) 500	In-kind contribution description (if applicable) of Texas, complete Schedule T)	
Principal occu	pation / Job title (See Instructions)	Employer (See			
Date 3/28/14	Full name of contributor out-or-state PAC (ID#_ Heather Case Contributor address: City: State: Zip Code 83/2 Thom Crest Ct.	) 	Amount of contribution (\$) 1500	In-kind contribution description (if applicable)	
Principal occu	Hurot JX 76183 pation / Jgb title (See Instructions) Home maker	Employer (See		f Texas, complete Schedule T)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide foradditional reporting requirements.					

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS				SCHEDULE A
The	Instruction Guide explains how to complete thi	1 Total pages Sch	1 Total pages Schedule A:	
			3 ACCOUNT # (E	thics Commission Filers)
L K	uss Caser		13	F 28 -
4 Date	5 Full name of contributor out-of-state PAC (ID#	)	7 Amount of contribution (\$)	8 (In-kind contribution description (# applicable)
3-11-14	Charles Noteboom 6 Contributor address: City: State: Zip Code 669 Airport Frwy Sulfer Hurst, T× 76053	00	222	AY 19 AM
9 Principal occur	pation / Job title (See Instructions)	10 Employer (See		of Texas, complete Schedule T
	Aftorney	10 Employer (See Self		1
Date	Full name of contributor 🔲 out-of-state PAC (ID#:		Amount of contribution (\$)	In-kind contribution description (if applicable)
3-25-14	ANN Meier Contributor address: City; State; Zip Code 2233 Farring ton Land	••••	200-	
	HursT, TX 7605	4	(If travel outside o	of Texas, complete Schedule T)
Principal occur	bation / Jeptitle (See Instructions)	Employer (See I	nstructions)	
Date	Full name of contributor Dout-of-state PAC (ID#:		Amount of contribution (\$)	In-kind contribution
4/1/#4	Metrotex Assoc of Realt Contributor address; City; State; Zip Code 8201 N. STEMMONS Frw	kirs PAC	2000°	description (if applicable)
	Dallas, TX 75247		(If travel outside	l of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See I	nstructions)	
Date	Full name of contributor 🔲 out-of-state PAC (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
4-17-14	Contributor address; City; State; Zip Code 1600 Forest Vista Ct.		35000	
	Southlake, Tx 76092		(If travel outside o	of Texas, complete Schedule T)
Principal occup	Keal Estate + NVestur	Employer (See I		resentation
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of	In-kind contribution
4/1/14	C. Mike Kennedy Contributor address; city; State; Zip Code 4/29 Alicante Are Furt Worth TX 7	c /3 \	50 <sup>eg</sup>	description (if applicable)
		V100	(If travel outside o	of Texas, complete Schedule T)
Principal occur	ation / Jop title (See Instructions)	Employer (See I		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide foradditional reporting requirements.				

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PLEDG				SCHEDULE B		
The	Instruction Guide explains how to complete this	form.	1 Total pages Sche	edule B:		
2 FILER NAME			3 ACCOUNT # (EI	thics Commission Filers)		
	Kuss Casey		2 C	LECT		
4 TOT	AL OF UNITEMIZED PLEDGES: ⇒					
5 Date	6 Full name of pledgor out-of-state PAC (ID#:	)	8 Amount of pledge (\$)	9 In-kind description		
12-1	Keller Boiling Point P	AC	Pro-8- (+/			
5/15/4	Keller Boiling Point P		5000	9: 14 STRATO		
	Keller TX			50		
		11 Employer (See I	· · · · · · · · · · · · · · · · · · ·	of Texas, complete Schedule T)		
10 Principal occu	pation / Job title (See Instructions)					
Date	Full name of pledgor out-of-state PAC (ID#:	)	Amount of pledge (\$)	In-kind description (if applicable)		
			piedge (#)			
	Pledgor address; City; State; Zip Code					
				f Towns complete Schodule T		
Principal occu	pation / Job title (See Instructions)	Employer (See I		of Texas, complete Schedule T)		
			netraetterie)			
Date	Full name of pledgor out-of-state PAC (ID#	)	Amount of	In-kind description		
			pledge (\$)	(if applicable)		
	Pledgor address; City; State; Zip Code					
			(If travel outside o	of Texas, complete Schedule T)		
Principal occu	pation / Job title (See Instructions)	Employer (See In	nstructions)			
			r			
Date	Full name of pledgor out-of-state PAC (ID#:	)	Amount of pledge (\$)	In-kind description (if applicable)		
			piedge (#)			
	Pledgor address; City; State; Zip Code					
	r.					
Principal occu	pation / Job title (See Instructions)	Employer (See I		of Texas, complete Schedule T)		
			,			
Date	Full name of pledgor out-of-state PAC (ID#:	)	Amount of	In-kind description		
			pledge (\$)	(if applicable)		
	Pledgor address; City; State; Zip Code					
			(If travel outside o	of Texas, complete Schedule T)		
Principal occu	pation / Job title (See Instructions)	Employer (See I	nstructions)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED						
	If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.					

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POLITICAL	EXPENDITURES		SCHE	DULE F
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	EXPENDITURE CATEGORIES Gift/Awards/Memorials Expense Salaries/Wages// Legal Services Solicitation/Fund Food/Beverage Expense Travel In District Polling Expense Travel Out Of D Printing Expense Office Overhead The Instruction Guide explains how to	Contract Labor raising Expense strict /Rental Expense	Loan Repayment/Reimbursem Transportation Equipment & Re Contributions/Donations Made Candidate/Officeholder/Poli OTHER (enter a category not m.	elated Expense By itical Committee
1 Total pages Schedule F:	2 FILER NAME KUSS Casey		3 ACCOUNT #(Ethics C	
4 Date 5-15-14	5 Payee name Bob's Printing			
6 Amount (\$) 1965.34	7 Payee address: City: State: Zip Code 75 Buena Vistu Dr Hurst TX 76053		ACHARIS	IS WAR
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description	(If travel outside of Texas, complete S	chequile T)
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought	Offic	e heid
Date 5-15-14	Payee name Freedmon Co.			
Amount (\$) 31.89 700000	Payee address; City; State; Zip Code Wanda Way Hurst, TX 76053	- -		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		(If travel outside of Texas, complete S Ma. /cr	chedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought	t Offic	e held
3-12-14	Bobs Printing			-
Amount (\$) 191.78	Payee address; City: State; Zip Code 751 Buena Vista Or Hurst ITX 760	<del>.</del> 53		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description	(If travel outside of Texas, complete S	chedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sough	t Offic	æ 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	(If travel outside of Texas, complete S	chedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sough	t Offic	æ held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

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