

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		<b>1 ACCOUNT #</b> (Ethics Commission Filers)	<b>2 Total pages filed:</b>
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR: <i>Mr.</i> FIRST: <i>Clifford</i> MI: <i>M</i> NICKNAME: <i>Matt</i> LAST: <i>Hayes</i> SUFFIX:	<div style="border: 2px solid black; padding: 5px;"> <p style="text-align: center; margin: 0;"><b>OFFICE USE ONLY</b></p> <p style="font-size: small; margin: 0;">Date Received</p> <p style="font-size: x-small; margin: 0;">BY: <i>ALM</i>      <b>FRANK PHILLIPS</b>      <b>2015 JAN -6 PM 3:11</b>      <b>FILED</b></p> <p style="font-size: x-small; margin: 0;">Date Hand-delivered:      Postmarked</p> <p style="font-size: x-small; margin: 0;">Receipt #      Amount</p> <p style="font-size: x-small; margin: 0;">Date Processed</p> <p style="font-size: x-small; margin: 0;">Date Imaged</p> <p style="text-align: center; font-weight: bold; margin: 0;">TARRANT COUNTY</p> </div>	
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b> <input type="checkbox"/> change of address	ADDRESS / PO BOX:      APT / SUITE #:      CITY:      STATE:      ZIP CODE		
<b>5 CANDIDATE / OFFICEHOLDER PHONE</b>	ADDRESS / PO BOX:      APT / SUITE #:      CITY:      STATE:      ZIP CODE		
<b>6 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR: <i>Ms</i> FIRST: <i>Lac</i> MI: NICKNAME:      LAST: <i>Ha</i> SUFFIX:		
<b>7 CAMPAIGN TREASURER ADDRESS</b> (residence or business)	STREET ADDRESS (NO PO BOX PLEASE):      APT / SUITE #:      CITY:      STATE:      ZIP CODE		
<b>8 CAMPAIGN TREASURER PHONE</b>	N		
<b>9 REPORT TYPE</b>	<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)		
<b>10 PERIOD COVERED</b>	Month      Day      Year      THROUGH      Month      Day      Year <i>10/26/2014</i> <i>12/31/2014</i>		
<b>11 ELECTION</b>	ELECTION DATE Month      Day      Year <i>11/04/2014</i>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
<b>12 OFFICE</b>	OFFICE HELD (if any) <i>Justice of the Peace</i> <i>Precinct 7</i> <i>Tarrant County</i>	<b>13 OFFICE SOUGHT (if known)</b>	

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME

15 ACCOUNT # (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

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

FILED  
TARRANT COUNTY  
JAN -6 PM 3:11  
FRANK PHILLIPS  
ELECTIONS ADMINISTRATOR

17 CONTRIBUTION  
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 3750<sup>-</sup>

EXPENDITURE  
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$ 24<sup>12</sup>

4. TOTAL POLITICAL EXPENDITURES

\$ 3962<sup>12</sup>

CONTRIBUTION  
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ 1101<sup>86</sup>

OUTSTANDING  
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0

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.

*Maxx Hayes*

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Maxx Hayes, this the 5<sup>th</sup> day of Jan, 20 15, to certify which, witness my hand and seal of office.

*Zena Levine*

Signature of officer administering oath

Zena Levine

Printed name of officer administering oath

*Chief Administrator*

Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <u>1</u>	
2 FILER NAME <u>Matt Hayes</u>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <u>11/17/14</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Israel Susteo</u>	7 Amount of contribution (\$) <u>500<sup>00</sup></u>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <u>1316 Village Creek Dr Suite 500 Plano TX 75093</u>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <u>11/24/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Majy Haddad</u>	Amount of contribution (\$) <u>250<sup>00</sup></u>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <u>2500 N Green Oaks Blvd suite 200 Arlington TX 76010</u>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <u>12/3/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Matt Hayes</u>	Amount of contribution (\$) <u>3000<sup>00</sup></u>	In-kind contribution description (if applicable) <u>Convert Loan to Donation</u>
Contributor address; City; State; Zip Code <u>900 N Walnut Creek Ste 100 #125 Mansfield TX 76063</u>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

BY: \_\_\_\_\_  
 ELECTIONS ADMINISTRATOR  
 2015 JAN -6 PM 3:11  
 FILED  
 WARRANT COUNTY

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

# SCHEDULE F

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: 1	<b>2</b> FILER NAME Matt Hayes	<b>3</b> ACCOUNT # (Ethics Commission Filers)
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<b>4</b> Date 11/2/2014	<b>5</b> Payee name Texas Federation of College Republicans
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<b>6</b> Amount (\$) \$1,000.00	<b>7</b> Payee address; City; State; Zip Code hand delivered to UTA CR President
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<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contribution made by officeholder	(b) Description (If travel outside of Texas, complete Schedule T) CR event
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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 12/17/2014	Payee name Craig Ounby
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Amount (\$) \$7862.00	Payee address; City; State; Zip Code 7106 Lighthouse Arlington TX 76002
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Consulting Exp	Description (If travel outside of Texas, complete Schedule T) Campaign Consulting
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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 12/31/2014	Payee name Matt Hayes
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Amount (\$) 2000.00	Payee address; City; State; Zip Code 900 N Walnut Creek ste 100 #125 Mansfield TX 76063
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Loan Repayment	Description (If travel outside of Texas, complete Schedule T)
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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	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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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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FILED  
 TARRANT COUNTY  
 2015 JAN -6 PM 3: 11  
 FRANK PHILLIPS  
 ELECTIONS ADMINISTRATOR

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED