Texas Ethics Commission

## JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT**

### FORM JC/OH COVER SHEET PG 1

(512) 463-5800

The JC/OH Instruction	Guide explains how to complete this form.	1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE /	MS/MRS/MR FIRST	MI	OFFICE USE ONLY
OFFICEHOLDER	MR Charles .	16.	-3
NAME	MR ( MARLES .	Trioma	Date Received
	NICKNAME LAST	SUFFIX	
	16m CORBIN		影響
4 CANDIDATE / OFFICEHOLDER	ADDRESS IDO BOV. ADT /SI IITE# CITY.	CTATE: 71D CODE	25 0 05
MAILING			Date Hand-delivered or Postmarked
ADDRESS			
change of address			Receipt # Amount
5 CANDIDATE/	AREA CODE PHONE NUMBER	EXTENSION	1 4 5
OFFICEHOLDER			Date Processed 50
PHONE			,
6 CAMPAIGN	MS/MRS/MR FIRST	MI	Date Imaged
TREASURER	Ma harles	Thomas	
NAME	NICKNAME LAST	SUFFIX	
	-		
	Tom CORRIN		
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;	CITY; STATE;	ZIP CODE
TREASURER	,		
ADDRESS			
(residence or business)			
8 CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION	
TREASURER			
PHONE			
9 REPORT TYPE	January 15 30th day before election	Runoff	15th day after campaign
	January 13 Sounday before election	L. Kanon	treasurer appointment (officeholder only)
			<b>—</b>
	July 15 Sth day before alection	Exceeded \$500	Final report (Attach C/OH - FR)
10 PERIOD	Month Day Year	Month Day	Year
COVERED	07/23/2013 THROUGH	12/31/	17013
	01/23/2013	, - , - , ,	2013
11 ELECTION	ELECTION DATE ELECTION TYPE		
	Month Day Year Primary	Runoff	General Special
	03/04/2014		<del></del>
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (If known)	
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GO TO PAGE 2			
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# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM JC/OH COVER SHEET PG 2

14 C/OH NAME (Ethics Commission Filers)				
Lh.	Anles 1	nomas (oRB:1	·	
16 NOTICE FROM POLITICAL	CANDIDATE / OFFICEH	E OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE OLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDID 8 AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF TH	ATE'S OR OFFICEHOLDER'S KNOWLEDGE OR	
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME	TARF	
	GENERAL	COMMITTEE ADDRESS	25 A 37 A 57 A 57 A 57 A 57 A 57 A 57 A 5	
	SPECIFIC			
additional pages		COMMITTEE CAMPAIGN TREASURER NAME	M 2:	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	(A)	
17 CONTRIBUTION TOTALS	I I IOIALI	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE		
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$4950.47	
EXPENDITURE TOTALS	3. TOTAL F	POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEM	\$ 45.40	
	4. TOTAL	POLITICAL EXPENDITURES	\$ 6,117 46	
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST I REPORTING PERIOD	\$ 1,790.13	
OUTSTANDING LOAN TOTALS	6. TOTAL LAST D	PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF AY OF THE REPORTING PERIOD	* — O—	
18 AFFIDAVIT				
		I swear, or affirm, under penalty of true and correct and includes all in under Title 15, Election Code.	perjury, that the accompanying report is formation required to be reported by me	
		Signature of Car	didate or Officeholder	
AFFIX NOTARY STAMP / SEAL ABOVE				
Sworn to and subscribed before me, by the said this the				
day of January, 20 14 , to certify which, witness my hand and seal of office.				
Jennifer Solis Notary Public !				
Signature of officer add	ninistering oath	Print name of officer administering oath  JENNIFER E. SOLIS	Title of officer administering oath	
7.00			· ·	

#### **POLITICAL CONTRIBUTIONS** OTHER THAN PLEDGES OR LOANS (JUDICIAL)

P.O. Box 12070

SCHEDULE A (J)

The instruction Guide explains how to complete this form.		1 Total pages Schedule A(J):		
2 FILER NAME		3 ACCOUNT # (E	thics Commission Filers)	
2 ALEXANDER	INRLES / hums, CORBIN			
4 Date	5 Full name of contributorout-of-state PAC (IDIR:	)	, , , , , , , , , , , , , , , , , , , ,	8 In-kind contribution
	<u> </u>		contribution (\$)	description(if applicable)
01.1	KENNETH L. Lee		#	
9/8/2013	6 Contributor address: City: State: Zip Code		500	
9/9/	Kenneth L. Lee  6 Contributor address; City; State; Zip Code  7.0. Box 271		500	
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	ARLINITOTIX. 76017			of Texas, complete Schedule T)
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11 Contributor's er		12 Law firm of contri	butor's spouse (if an	R = 7
	teu Bank			9 5
13 If contributor is	a child, law firm of parent(s) (if any)			
				1 012 ± 2
Date	Full name of contributor   Doul-of-state PAC (IDI):	1	Amount of	in-kind contribution
	Chair Marie	***************************************	contribution (\$)	description(if applicable)
11.1	CHARLES IFIOKALES			
7/25/2013	9/25/2013 Contributor address; City; State; ZID Code 5880 New + PATTENION Pd.		1.	Har No A
•			1,000	
	Mansfield, 1x. 7606;	3	(If traval audolds	of Texas, complete Schedule T)
Contributor's n	rincipal occupation	Contributor's job		or revee' combine acuerne 1)
	Estate	> w ~e		
	mployer/law firm		butor's spouse (if any)	
	VNCC.	Law In III OI COMM	outor a abouse (ii ait	71
	e child, law firm of parent(s) (if any)			
ii controdor ts	а ыны, юж ини от рагонца/ (к алу)			
Date	Full name of contributor   Dut-of-state PAC (ID#:	1	Amount of	In-kind contribution
	^ .		contribution (\$)	description(if applicable)
	1Vlynon Z. Kimball			1
11/1/2 12	Contributor address; City; State; Zip Code		フヘハ	
11/6/2013 Contributor address; City; State; Zip Code ZOO 200		200		
				1
ARLington, Tx 76017  Contributor's principal occupation Contributor's job		(If travel outside	of Texas, complete Schedule T)	
Contributor's principal occupation Contributor's job title			title	
Attorney Attorney				
Contributor's employer/law firm Law firm of contri		butor's spouse (if an	у)	
Myron Kinhall, Altornaghe LAW				
If contributor is	If contributor is a child, law firm of parent(s) (if any)			

Texas Ethics Commission

#### POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The	Instruction Guide explains how to complete this	form.	1 Total pages Scho	6	
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4 Date	5 Full name of contributor	)	7 Amount of	8 In-kind contribution	
	D + Jupith - 1/		contribution (\$)	description(if applicable)	
, ,	PATNICK F. VADER				
11/7/2013	6 Contributor address: City; State; Zip Code 801 Penns ylvania Ave.		100		
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	Kennedale, 1x. 76060		(If travel outside	of Texas, complete Schedule 1)	
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44 Contributors of	mnioverflow flom	12 Law firm of contri	butor's spouse (if an	» an 5 5 5	
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	Karlonhann		contribution (\$)	description(if applicable)	
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Contribution address; City; State; ZIp Code  2408 A. GARDEN PANK C+			100		
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	MANSFIELD IX 7606	7	/IS travel and I -	of Tours complete Cabadala To	
Contributor's o	rincipal occupation	Contributor's job		of Texas, complete Schedule T)	
	Ho War a		A Horac  Law firm of contributor's spouse (if any)		
		I aw firm of contact	nutor's spouse /H and	w	
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ii contributor is	a cialo, low little of parentile) (it any)				
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·	1065 16:25 stow Un.			1	
	MANU field, 1x. 76063		(If travel outside	of Texas, complete Schedule T)	
Contributor's p	rincipal occupation	Contributor's job			
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Contributor's e	mployer/law firm		butor's spouse (if an	у)	
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If contributor is a child, law firm of parent(s) (if any)					
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Texas Ethics Commission P.O. Box 12070

#### **POLITICAL CONTRIBUTIONS** OTHER THAN PLEDGES OR LOANS (JUDICIAL)

### SCHEDULE A (J)

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The	instruction Guide explains how to complete this	form.	1 Total pages Sch	edule A(J):
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			contribution (\$)	description(if applicable)
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11/14/20	6 Contributor address; City; State; Zip Code P.o. Box Z182		つこん	
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9 Contributor's p	dincipal occupation	10 Contributor's job		O . →
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11 Contributor's e	mployer/law firm	12 Law firm of contri	butor's spouse (if an	y) Z Z
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13 If contributor is	a child, law firm of parent(s) (if any)			
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Date	Full name of contributor	,	Amount of	In-kind contribution
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	Mansfield, TX. 76063		(If travel outside	of Texas, complete Schedule T)
Contributor's p	rincipal occupation	Contributor's job	title	
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If contributor is	a child, law firm of parent(s) (If any)	<u> </u>		
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		)	contribution (\$)	description(if applicable)
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	Adjuston, Tx. 7601	7	(If travel outside	of Texas, complete Schedule T)
Contributor's principal occupation Contributor's job		title		
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#### **POLITICAL CONTRIBUTIONS** OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

(512) 463-5800

The instruction Guide explains how to complete this form.	1 Total pages Schedule A(J):	
2 FILER NAME	3 ACCOUNT # (Etnics Commission Filers)	
hanle Thomas CORB: 1.		
4 Date 5 Full name of contributor Dout-of-state PAC (ID#:	7 Amount of 8 In-kind contribution	
M. +MRI WAYNE A. COBLE  11/20/2013 6 Contributor address; City; State; Zip Code  220/ Size OAL BIVO., S.W.	contribution (\$) description(if applicable)	
/// 2013 6 Contributor address; City; State; Zip Code	100 T ST AR	
ZZOI GREEN OAL BIVD., S.W.	I STEV RAY	
Antington TX 76017	(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation 10 Contributor	r's job title	
Retined Red 11 Contributor's employer/law firm 12 Law firm of	Fixe/ 1 25 2 29	
11 Contributor's employer/law firm 12 Law firm of		
13 If contributor is a child, law firm of parent(s) (if any)		
Date Full name of contributor	) Amount of In-kind contribution	
	contribution (\$) description(if applicable)	
///2 /2017 Contributor address; City; State; Zip Code  P. O. Bux 212-1	· · · · · ·	
///2 /2017 Contributor address; City; State; Zip Code	100	
F.O. Box 2121		
Contributor's principal occupation  Contributor's principal occupation  Contributor's employed from  Co	(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Contributor	r's job title	
Kapio Transmission Ow.	Nen	
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If contributor is a child, law firm of parent(s) (if any)		
Date Full name of contributor	) Amount of In-kind contribution	
Full name of contributor [out-of-state PAC (IDIR	contribution (\$) description(if applicable)	
/ / //, Contributor address; City; State; Zip Code	500	
318 (ANI: Rd	500	
Mansfield X. 74063  Contributor's principal occupation Contributor	(If travel outside of Texas, complete Schedule T)	
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Retined Retine,		
Contributor's employer/law firm	contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)		

#### Austin, Texas 78711-2070

#### **POLITICAL CONTRIBUTIONS** OTHER THAN PLEDGES OR LOANS (JUDICIAL)

#### SCHEDULE A (J)

(512) 463-5800

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J):		
2 FILER NAME	HARLES Thomas CORBIN	/ .	3 ACCOUNT # (E	thics Commission Filers)
			7 Amount of	8 In-kind contribution
4 Date	5 Full name of contributor   Dut-of-state PAC (10th	e ((	contribution (\$)	description(if applicable)
11/242013	6 Contributor address; City; State; Zlp Code		100	21 21 8: 8: 1
	Mansfield, 1x. 7606	3	(If travel outside	of Texas complete Schedule
9 Contributor's p	rincipal occupation	10 Contributor's job		70 - 3
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44 Contributors	mployer/law firm	12 Law firm of contri	butor's enouse (if an	
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13 If contributor is	a child, law firm of parent(s) (if any)			
Date	Full name of contributorout-of-state PAC (IDIt		Amount of	In-kind contribution
			contribution (\$)	description(if applicable)
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12/4/2012	Contributor address; City; State; Zip Code		250	į į
171/20	2213 toRest Cheek	<i>ک</i> ہ ِ		l
. ,	Contributor address: City; State; Zip Code  Z 213 FORENT CARELO  MANSfeld, 14. 76	063	(If travel outside	of Texas, complete Schedule T)
Contributor's p	rincipal occupation	Contributor's job	title	Marie - I digni i i v tranci i viveri i i i i i i i i i i i i i i i i i i
	( Estate	Broke		
	mployer/law firm	Law firm of contributor's spouse (if any)		
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	disconnection of the second se	<u> </u>		
if contributor is	a child, law firm of parent(s) (if any)			
Date	Full name of contributorout-of-state PAC (IDI):	)	Amount of	In-kind contribution
, ,	Pene & Georzy A. Oliv. Contributor eddress; City: State; Zip Code  1021 Kingston Da.	۴۸	contribution (\$)	description(if applicable)
12/12/2 12	Contributor address; City; State; Zip Code		100	
14142013			100	
	Manifield, TX.76063		(If travel outside	of Texas, complete Schedule T)
Contributor's principal occupation Contributor's job title			title	
Retiron		Detrou		
Contributor's employer/law firm		Law firm of contributor's spouse (If any)		
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If contributor is a child, law firm of parent(s) (if any)				

P.O. Box 12070

#### **POLITICAL CONTRIBUTIONS** OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

(512) 463-5800

The	Instruction Guide explains how to complete this	form.	1 Total pages Sch	,
2 FILER NAME	antes Thomas Corrigi		3 ACCOUNT # (E	hics Commission Filers)
4 Date	5 Full name of contributor Dut-of-state PAC (IDIK:  ARRY CATOLYN W. II. Ser  6 Contributor address; City: State; Zip Code	20	7 Amount of contribution (\$)	8 (n-kind contribution description(if applicable)
	6 Contributor address: City; State; Zip Code P. O. 73. × 2235  Mansfield 1 × 76663		300	2014 F
G Contributor's n	rincipal occupation	10 Contributor's job		of Texas, complete Schedule 1
	Builden	OWN		0.2 <b>-</b>
11 Contributor's e	mployer/law firm  f	12 Law firm of contri		y DNA P
13 If contributor is	a child, law firm of parent(s) (if any)			1 2:
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution —— description(if applicable)
Contributor address; City; State; Zip Code  7.6. Box 151717  Contributor's principal occupation  Contributor's job title			of Texas, complete Schedule T)	
Contributor's p	rincipal occupation	Contributor's job	title	or ronds, company contacts 17
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Date	Full name of contributor Dout-of-state PAC (TDIK	)	Amount of contribution (\$)	In-kind contribution description(if applicable)
12/20/2	Contributor address; City; State; Zip Code	<b>~</b>	/ ^ ×	•
174/2013	Contributor address; City; State; Zip Code  Po. Box 171503		108	
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Contributor's principal occupation  Contributor's principal occupation  Contributor's job  Ranleise  Presiden				
11 1 0/1	mployer/law firm ~leu Baylo	Law firm of contri	butor's spouse (if an	у)
If contributor is	a child, law firm of parent(s) (if any)			

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**

#### SCHEDULE F

	EXPENDITURE CATEGOR	IES FOR BOX 8(a)	
Advertising Expense		es/Contract Labor Loan Repayment/Relmbursement	
Accounting/Banking		· · · ·	
Consulting Expense	Food/Beverage Expense Travel In Dis		
Event Expense	Polling Expense Travel Out O	Contributions/Conations Made by	ol Committee
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4 Date	5 Payee name		1
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8 PURPOSE '	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Sche	odwo1)
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9 Complete ONLY if direct	Candidaté / Officeholder name	Office sought Office h	neld
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Date	Payee name		
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## **POLITICAL EXPENDITURES**

P.O. Box 12070

#### SCHEDULE F

•	EXPENDITURE CAT	FEGORIES FOR BOX 8(	a)	
Advertising Expense	Gift/Awards/Memorials Expense Sale	aries/Wages/Contract Labor	Loan Repayment/R	elmbursement
Accounting/Banking	Legal Services Soil	citation/Fundraising Expense		pment & Related Expense
Consulting Expense	Food/Beverage Expense Trav	el in District	Contributions/Dona	•
Event Expense	Polling Expense Trav	el Out Of District		holder/Political Committee
Fees	Printing Expense Offi	ce Overhead/Rental Expense	OTHER (enter a ca	tegory not listed above)
	The instruction Guide exp	ains how to complete this	form.	
1 Total pages Schedule F:	2 FILER NAME		3 ACCOUNT	# (Ethics Commission Filers)
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4 Date 8/29	5 Payee name		90	
- 12/24/2017 6 Amount (\$)	LIN-tes States 7	out Office	8Y:	TARRANT  OIL JAN 15  LECTIONS A
6 Amount (\$)	7 Payee address; City; State;	Zip Code	*****	ST AND TO
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8 PURPOSE OF	(a) Category (See categories listed at the top of thi	s schedule) (b) Descripti	On (If travel outside of Texa	s, complete Schedule 7)
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9 Complete ONLY if direct	Candidate / Officeholder name	Office sou	ight	Office held
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#### **POLITICAL EXPENDITURES** MADE FROM PERSONAL FUNDS

SCHEDULE G

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gift/Awards/Memorials Expense **Legal Services** 

P.O. Box 12070

Food/Beverage Expense Polling Expense **Printing Expense** 

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Travel Out Of District Office Overhead/Rental Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME Charles Thomas Cores	3 ACCOUNT # (Ethics Commission Filers)
10/	The state of the s	
11/13/7013	5 Payee name  ANWA / Inc.  7 Payee address; City; State; Zip Code	
6 Amount (\$) 294427		TAR 2014, ELECT RY:
Reimbursement from political contributions intended	12404 Huy 1555. Tylen, Tx.	TARRAN STEV STEV ECTIONS
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Séhétule T)
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PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	ATTACH ADDITIONAL COPIES OF THIS SO	CHEDULE AS NEEDED

www.ethics.state.tx.us

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Revised 09/28/2011