CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	2 Total pages filed:						
3 CANDIDATE /	MS / MRS / MR FIRST	MI	OFFICE USE ONLY				
OFFICEHOLDER NAME	Mr GARRY	L	Date Received				
NAME	NICKNAME LAST	SUFFIX					
	ADAMS		2012				
4 CANDIDATE /	ADDRESS / PO BOX: APT / SUITE #: CITY:	STATE: ZIP CODE					
OFFICEHOLDER	407 E. Johnston Burne	2 2					
MAILING ADDRESS	101 E. 301113141 300113	Date Hand-delivered or Postmarked					
1	P.O. BOX 534 BURNET	TX. 78611					
change of address		17. 1001.	Receipt # Amount				
5 CANDIDATE/	AREA CODE PHONE NUMBER	EXTENSION	Date Processed				
OFFICEHOLDER PHONE	(512) 755- 080L	P	<u> </u>				
6 CAMPAIGN	MS/MRS/MR FIRST	MI	Date Imaged				
TREASURER NAME	Mrs Stephanie	\boldsymbol{A}					
NAME	NICKNAME LAST	SUFFIX					
'	Frazier						
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT/SUITE#;	CITY; STATE;	ZIP CODE				
TREASURER	320 Highland Dr. B	Burnet TY.					
ADDRESS	Sab Alghier C Di	77.					
(residence or business)							
8 CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION	, w				
TREASURER	(52) 755-5219						
PHONE							
A DEDODE TYPE							
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	Final report (Attach C/OH - FR)				
10 PERIOD	Month Day Year	Month Day	Year				
COVERED	5/1/12 THROUGH	7/21/	12				
	3/ 1 / 12	,,	•				
44 ELECTION	ELECTION DATE ELECTION TYPE						
11 ELECTION	ELECTION DATE ELECTION 17PE Month Day Year Primary						
	7/31/12	Runoff	General Special				
	1/ 51/ 16						
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)					
		12	atable				
	Burnet Constable Precent #12						
		Precent #3					
GO TO PAGE 2							

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

P.O. Box 12070

FORM C/OH COVER SHEET PG 2

14 C/OH NAME	4 L. P	DAMS	15 ACCOUNT # (Ethics Commission Filers)				
16 NOTICE FROM POLITICAL COMMITTEE(S)	POLITICAL CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OF						
	COMMITTEE TYPE	COMMITTEE NAME					
	GENERAL						
	SPECIFIC	COMMITTEE ADDRESS					
		COMMITTEE CAMPAIGN TREASURER NAME					
ad ditional pages							
		COMMITTEE CAMPAIGN TREASURER ADDRESS					
17 CONTRIBUTION TOTALS	N S						
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$				
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		MIZED \$				
	4. TOTAL	\$ 2,315.74					
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST I	DAY \$ 0				
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T AY OF THE REPORTING PERIOD	THE \$				
18 AFFIDAVIT							
		is true and correct and includes all	f perjury, that the accompanying report information required to be reported by				
		me under Title 15, Election Code					
		Signature of Can	didate or Officeholder				
AFFIX NOTARY STAM	IP / SEAL ABOVE						
Sworn to and sub-	scribed before	me, by the said GACRY L AD	AMS, this the				
Bud day	1 1	, 20 17 , to certify which, witness r	ny hand and seal of office.				
Faul.	Jeme	KATHY GRIMES	Depuis Clus				
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath							

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

P.O. Box 12070

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Gift/Awards/Memorials Expense Advertising Expense Salaries/Wages/Contract Labor Loan Repayment/Reimbursement Legal Services Solicitation/Fundraising Expense Accounting/Banking Transportation Equipment & Related Expense Consulting Expense Food/Beverage Expense Travel In District Contributions/Donations Made By Candidate/Officeholder/Political Committee Polling Expense **Event Expense** Travel Out Of District **Printing Expense** Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (Ethics Commission Filers) 1 Total pages Schedule G: 4 Date City; State; Zip Code 6 Amount (\$) PO.BOX 1205 marble Falls TX. 78654 140.00 Reimbursement from political contributions (a) Category (See categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) PURPOSE EXPENDITURE DUEPHSING Date Payee name Reimbursement from political contributions intended Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE OF EXPENDITURE Date Amount (\$) Dr. Burnet, TX. 78611 Reimbursement from political contributions intended Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE OF EXPENDITURE Date 📂 Amount (\$) 315.00 E. JAUSON Burnet, TX. 78611 Reimbursement from political contributions Intended Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** OF EXPENDITURE

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURE CATEGORIES FOR BOX 8(a)

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

P.O. Box 12070

SCHEDULE G

(512) 463-5800

Loan Repayment/Relmbursement

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Legal Services Solid Food/Beverage Expense Trav Polling Expense Trav	ries/Wages/Con citation/Fundrais sel In District sel Out Of Distri se Overhead/Re ains how to ca	ing Expense Tra Cor ct ntal Expense OT	n Repayment/Relmbursement nsportation Equipment & Related Expense ntributions/Donations Made By Candidate/Officeholder/Political Committee HER (enter a category not listed above)	
1 Total pages Schedule G:	2 FILER NAME 3 ACCOUNT # (Ethics Commission Filers)				
4 Date 7 18 12	5 Payee name Burnet Bullatin				
6 Amount (\$) 310.00 Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 220 S. Main Burnt, TX. 78611				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)		(b) Description (I travel outside of Texas, complete Schedule T)		
	MINERTISING		14000	paper	
Date 7/20/12	Payee name D+W Printi	ng			
Amount (\$)		Zip Code	::=::		
Reimbursement from political contributions intended	228. 9. main Burnet, TV. 78611				
PURPOSE	Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)				
OF EXPENDITURE	Printing Expenses Mail outs		ilouts		
7/20/12	Campasas Dispatch Record				
Amount (\$)	Payee address; City; State; Zip Code				
Reimbursement from political contributions intended	Me 5. Lim Oak lampasas, TX. 76550				
PURPOSE	Category (See categories listed at the top of this	schedule)	Description (if to	ravel outside of Texas, complete Schedule T)	
OF EXPENDITURE	Advertising		Neu	uspaper	
72112	Payee name HEB				
Amount (\$)	Payee address; City; State; Zip Code				
Reimbursement from political contributions intended	105 S. Boundary, Burnet, TX, 78611				
PURPOSE	Category (See categories listed at the top of this	schedule)	Description (If to	avel outside of Texas, complete Schedule T)	
OF EXPENDITURE	Advertising		P05	tage	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					