P.O. Box 12070

	L CANDIDATE / OFFICEHOLDER SN FINANCE REPORT	FORM JC/OH COVER SHEET PG 1
The JC/OH Instruction	on Guide explains how to complete this form.  1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE /	MS)MRS/MR FIRST	
OFFICEHOLDER NAME	linda	OFFICE USE ONLY
	NICKNAME LAST SUFFIX	Date Received
	Bayless	20
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	
MAILING	1 _	- G
ADDRESS	P.O. Box 56 Llano TX	Date Hand delivered or Postmarked
change of address	78643	W
5 CANDIDATE/ OFFICEHOLDER	AREA CODE PHONE NUMBER EXTENSION	Receipt # Amount
PHONE	(5/2) 413 5403	Date Processed
6 CAMPAIGN	MS (MPS ) I I	🤌 ഗ
TREASURER	MI	Date Imaged
NAME	NICKNAME Troy	1
	SUFFIX	
	Gene Bayless	
CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY: STATE	
TREASURER ADDRESS	APT/SUITE#; CITY; STATE;	ZIP CODE
(residence or business)	1303 County Road 132.4 K	(inosland To
(residence or business)	1303 County Road 132A K	ingsland, Tx
(residence or business)	1503 County Road 132A K	Kingsland, TX 78639
TREACHDED	1503 County Road 132A K  AREA CODE PHONE NUMBER EXTENSION	Kingsland, TX 78639
TREACHDED	EXTENSION	Kingsland, TX 78639
TREACHDED	EXTENSION	Kingsland, TX 78639
PHONE (	EXTENSION	Kingsland, Tx 78639
PHONE (	(572) 431.7090  January 15 (20th doubt)	
PHONE (	(572) 431.7090  January 15 30th day before election Runoff	15th day after campaign treasurer appointment
PHONE (	(572) 431.7090  January 15 (20th doubt)	15th day after campaign treasurer appointment (officeholder only)
REPORT TYPE	(572) 431.7090  January 15  30th day before election Runoff	15th day after campaign treasurer appointment
REPORT TYPE  PERIOD COVERED	(572) 431.7090  January 15  30th day before election Runoff  July 15  8th day before election Exceeded \$500	15th day after campaign treasurer appointment (officeholder only)
REPORT TYPE  PERIOD COVERED	(572) 431.7090  January 15  30th day before election  Runoff  July 15  8th day before election  Exceeded \$500	15th day after campaign treasurer appointment (officeholder only)  Final report (Attach C/OH - FR)
REPORT TYPE  PERIOD COVERED	(572) 431.7090  January 15  30th day before election  Runoff  July 15  8th day before election  Exceeded \$500    limit  Day  Year  Month  Day  Year	15th day after campaign treasurer appointment (officeholder only)  Final report (Attach C/OH - FR)
REPORT TYPE  PERIOD COVERED	(572) 431.7090  January 15  30th day before election  Runoff  July 15  8th day before election  Exceeded \$500    limit  Day  Year  Month Day  1/23/	15th day after campaign treasurer appointment (officeholder only)  Final report (Attach C/OH - FR)
REPORT TYPE  PERIOD COVERED  More	(572) 431.7090  January 15  30th day before election Runoff  July 15  8th day before election Exceeded \$500 limit  Day Year  HROUGH  LECTION DATE Day Year  ELECTION DATE Day Year  ELECTION TYPE  ELECTION TYPE	15th day after campaign treasurer appointment (officeholder only)  Final report (Attach C/OH - FR)
PERIOD COVERED	(572) 431.7090  January 15  30th day before election Runoff  July 15  8th day before election Exceeded \$500   limit  THROUGH  1/23/  ELECTION DATE ELECTION DATE EXCENSION	15th day after campaign treasurer appointment (officeholder only)  Final report (Attach C/OH - FR)  Year
PERIOD COVERED	(572) 431.7090  January 15  30th day before election Runoff  July 15  8th day before election Exceeded \$500 limit  Day Year  HROUGH  LECTION DATE Day Year  ELECTION DATE Day Year  ELECTION TYPE  ELECTION TYPE	15th day after campaign treasurer appointment (officeholder only)  Final report (Attach C/OH - FR)  Year 2014
PERIOD MODELECTION	January 15  January 15  30th day before election  Runoff  Lexceeded \$500   Exceeded \$500   Emit    Conth Day Year   THROUGH   1/23/  ELECTION DATE   Conth Day Year   Primary   Runoff   General Conth Day Year   General Conth Day   General Conth Da	15th day after campaign treasurer appointment (officeholder only)  Final report (Attach C/OH - FR)  Year 2014
PERIOD MODELECTION	January 15  January 15  Sth day before election  Runoff  Exceeded \$500	15th day after campaign treasurer appointment (officeholder only)  Final report (Attach C/OH - FR)  Year 2014  Special
PERIOD MODELECTION	January 15  January 15  Sth day before election  Runoff  Exceeded \$500	15th day after campaign treasurer appointment (officeholder only)  Final report (Attach C/OH - FR)  Year 2014  Special
PERIOD MODELECTION	January 15  January 15  Sth day before election  Runoff  Exceeded \$500	15th day after campaign treasurer appointment (officeholder only)  Final report (Attach C/OH - FR)  Year 2014  Special
PERIOD MODELECTION	January 15  January 15  Sth day before election  Runoff  Exceeded \$500	15th day after campaign treasurer appointment (officeholder only)  Final report (Attach C/OH - FR)  Year 2014  Special
PERIOD MODELECTION	January 15  January 15  30th day before election  Runoff  Lexceeded \$500   Exceeded \$500   Emit    Conth Day Year   THROUGH   1/23/  ELECTION DATE   Conth Day Year   Primary   Runoff   General Conth Day Year   General Conth Day   General Conth Da	15th day after campaign treasurer appointment (officeholder only)  Final report (Attach C/OH - FR)  Year 2014  Special

## JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: **SUPPORT & TOTALS**

FORM JC/OH COVER SHEET PG 2

16 NOTICE	inda M	. Dauless	5 ACCOUNT # (Ethics Commission Filer
FROM POLITICAL COMMITTEE(S)	CANDIDATE / OFFICE CONSENT. CANDIDAT	ICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADI HOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIL ES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF TI	E BY POLITICAL COMMITTEES TO SUPPORT THE DATE'S OR OFFICEHOLDER'S KNOWLEDGE OR HEY RECEIVE NOTICE OF SUCH EXPENSIVE
	COMMITTEE TYPE	COMMITTEE NAME	Such Expenditures,
	GENERAL	COMMITTEE ADDRESS	
	SPECIFIC	COMMITTEE	
additional pages		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
7 CONTRIBUTION TOTALS	I POTAL P	OLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL (OTHER	POLITICAL CONTRIBUTIONS [HAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$2,200.00
EXPENDITURE TOTALS	3. TOTAL PO	DLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZE	
	4. TOTAL F	OLITICAL EXPENDITURES	\$ 7,514.70
CONTRIBUTION BALANCE	5. TOTAL PO OF THE R	LITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DA'	
OUTSTANDING LOAN TOTALS	6. TOTAL PR LAST DAY	INCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE OF THE REPORTING PERIOD	\$11,518.68
AFFIDAVIT			1.1010.00



under Title 15, Election Code.

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said LINDA BAYLESS, this the day of tebruary, 20 14 , to certify which, witness my hand and seal of office.

Signature of officer administering oath

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

SCHEDULE A (J)

8 Contributor address: City: State: Zip Code  281 E. Napa Son oma, Ca  95 Contributor's principal occupation  Pres Ceo Horvest Home  10 Contributor's ib title  Pres Ceo  11 Contributor's employer/law firm  Harvest Home  12 Law firm of contributor's spouse (if any)  Date  Full name of contributor  Contributor address: City: State: Zip Code  14024 Stevens Point Drive  Contributor's principal occupation  18 Specialist  Contributor's principal occupation  Trisco, Tx  If contributor is a child, law firm of parent(s) (if any)  Date  Full name of contributor  Don Adam S  Contributor is a child, law firm of parent(s) (if any)  Contributor is a child, law firm of parent(s) (if any)  Date  Full name of contributor  Don Adam S  Contributor is a child, law firm of parent(s) (if any)  Contributor's principal occupation  Amount of contribution (s)  Contributor is a child, law firm of parent(s) (if any)  Contributor's principal occupation  Amount of contribution (s)  Contributor's principal occupation				•	
A Date   S Full name of contributor   Date-state PAC(DR   Craig Miller   Contributor address: City: State: Zip Code   Contributor's principal occupation   Contributor's applicable of Texas, complete Schedule T   Contributor's applicable of Texas, complete Schedule T   Contributor's applicable of Texas, complete Schedule T   Contributor's principal occupation   Contributor's principal occupation   Contributor is a child, law firm of contributor   Contributor's pobsitic   Contributor's principal occupation   Contributor's pri			this form.	1 Total pages Sch	nedule A(J):
Self name of contributor   Dut-of-state PAC (Date   Date   Security of applicable   Date   Dat	2 FILER NAME				
Self name of contributor   Dut-of-state PAC (Date   Date   Security of applicable   Date   Dat		Linda M. Bayle	SS	3 ACCOUNT # (E	thics Commission Filers)
Craig Miller   Contribution (S)   Rescription (If applicable (If travel outside of Texas, complete Schedule Te		5 Full name of contributor Out-of-state PAC (ID#		<b>-</b>	
281 E. Napa Sonoma, Ca 95476 (If travel outside of Texas, complete Schedule T Pres/CEO Harvest Home 10 Contributor's job title Pres./CEO 11 Contributor's employer/law firm 12 Law firm of contributor south of the schedule T Pres./CEO 12 Law firm of contributor's principal occupation 13 If contributor is a child, law firm of parent(s) (If any)  Date Full name of contributor but-of-state PAC(ID# 250-00)  14024 Stevens Point Drive Contributor's principal occupation 15 Contributor's principal occupation 16 Contributor's principal occupation 17 C. Penney, Frisco, TX 17 Contributor is a child, law firm of parent(s) (If any)  Date Full name of contributor but-of-state PAC(ID# Law firm of contributor's spouse (If any)  Date Full name of contributor but-of-state PAC(ID# Contributor's spouse (If any)  Date Full name of contributor but-of-state PAC(ID# Contributor's spouse (If any)  Date Full name of contributor but-of-state PAC(ID# Contributor's spouse (If any)  Date Full name of contributor but-of-state PAC(ID# Contributor's spouse (If any)  Date Full name of contributor but-of-state PAC(ID# State)  Contributor's address; City, State; Zip Code Food address; City, State; Zip	1.3.14	Craig Miller		contribution (\$)	description(if applicable
281 E. Napa Sonoma, Ca 95476 (If travel outside of Texas, complete Schedule T Pres/CEO Harvest Home 10 Contributor's job title Pres./CEO Harvest Home 12 Law firm of contributor's spouse (If any)  Date Full name of contributor   Dut-of-state PAC (IDIE)    Contributor's principal occupation    Ashley Weaver    Contributor's principal occupation    Contributor's principal occupation    Ashley Weaver    Contributor's principal occupation    Co	7 100	6 Contributor address; City; State; Zip Co	ode	1000.00	
Contributor's principal occupation Pres / Ceo Harvest Home 10 Contributor's principal occupation Pres / Ceo 11 Contributor's employer/law firm Harvest Home 12 Law firm of contributor's spouse (if any)  Date Full name of contributor Contributor's principal occupation Pres / Ceo 12 Law firm of contributor (if applicable)  Amount of contribution (if applicable)  Amount of contributor (if applicable)  Amount of contribution (if applicable)  Amount of contribution (if applicable)  Amount of contribution (if applicable)  Contributor's principal occupation Pres / Ceo 14024 Stevens Point Drive Prisco, TX 75033 (if travel outside of Texas, complete Schedule T)  Contributor's principal occupation Pres / Ceo 14024 Stevens Point Drive Prisco, TX 75033 (if travel outside of Texas, complete Schedule T)  Contributor's employer/law firm Pres / Ceo 14024 Stevens Point Drive Prisco, TX 75033 (if travel outside of Texas, complete Schedule T)  Amount of contributor's pouse (if any)  Date Pull name of contributor   Dut-of-state PAC (IDM.   Don Adam S   Don Adam S   Don Adam S   Contributor address; City, State; Zip Code   Soo Do Don Adam S   Contributor address; City, State; Zip Code   Contributor (if applicable)  Contributor's principal occupation  After new   Centributor's principal occupation   Contributor's principal occupation   Contribu		281 E. Napa Sonomo	a, Ca		
10 Contributor's job title   Pres.   Ceo	9 Contributor's p		95476	(If travel outside	-6 T
12 Contributor's employer/law firm Harvest Home 13 If contributor is a child, law firm of parent(s) (if any)  Date Full name of contributor  Ashley Weaver Contributor address: City. State: Zip Code  14024 Stevens Point Drive Frisco, TX  Contributor's principal occupation  18 Specialist Contributor's employer/law firm Full name of contributor  19 Contributor's principal occupation  10 Contributor's principal occupation  11 Contributor's employer/law firm  12 Law firm of contributor (if any)  13 If contributor's principal occupation  14 Specialist Contributor's principal occupation  15 C. Peney, Frisco, TX  16 Contributor is a child, law firm of parent(s) (if any)  17 Contributor is a child, law firm of parent(s) (if any)  Date Full name of contributor  18 Specialist Full name of contributor  19 Contributor is a child, law firm of parent(s) (if any)  Date Full name of contributor  10 Contributor is a child, law firm of parent(s) (if any)  Date Full name of contributor  10 Contributor is a child, law firm of parent(s) (if any)  Date Full name of contributor  10 Contributor is a child, law firm of parent(s) (if any)  Date Full name of contributor  10 Contributor is a child, law firm of parent(s) (if any)  Contributor is a child, law firm of contribution (if applicable)  Contributor is a child, law firm of contributor  Contributor's principal occupation  Contributor's principal oc	Proc 106	nncipal occupation		title	or Texas, complete Schedule T
Harvest Home  It contributor is a child, law firm of parent(s) (if any)  Date  Full name of contributor  Contributor's principal occupation  Amount of contributor (if applicable)  Contributor is a child, law firm of parent(s) (if any)  Date  Full name of contributor  Contributor's principal occupation  Full name of contributor  Date  Full name of contributor  Contributor's principal occupation  Contributor's principal occupation  Contributor's principal occupation  After new  Contributor's spouse (if any)  Law firm of contributor's spouse (if any)	1 Contributors	Hurvest Home			
If contributor is a child, law firm of parent(s) (if any)  Date  Full name of contributor  Contributor's principal occupation  IR Specialist  Contributor's employer/law firm  Date  Full name of contributor  Contributor address; City, State; Zip Code  Contributor's principal occupation  Contributor's principal occupation  Contributor's employer/law firm  Full name of contributor  Contributor's principal occupation  Contributor's principal occupation  Contributor's employer/law firm  Contributor's principal occupation  Contributor		mployer/law nm	12 Law firm of contri	butor's enouse (if any	
Date Full name of contributor    Solid   Full name of contributor   Dut-of-state PAC (IDM:   Discription (\$)   Discription (\$)	3 If contribute	ST Home		o opodse (ii ariy	,
Ashley Weaver Contributor address: City: State: Zip Code    Ashley Weaver	- in Contributor is	a child, law firm of parent(s) (if any)			
Ashley Weaver Contributor address; City: State: Zip Code    Ashley Weaver					
Ashley Weaver Contributor address: City: State: Zip Code  Contributor's principal occupation  Contributor's principal occupation  R Specialist Contributor's employer/law firm  S.C. Penney Frisco, TX  If contributor is a child, law firm of parent(s) (if any)  Date  Full name of contributor  Contributor address: City: State: Zip Code  Contributor's principal occupation  Amount of contributor's spouse (if any)  Law firm of contributor's spouse (if any)  Date  Full name of contributor  Don Adam S  Contributor address: City: State: Zip Code  P.O. Box 4445  Horseshoe Bay TX 78657  (if travel outside of Texas, complete Schedule T)  Contributor's principal occupation  Afterney  Contributor's spouse (if any)  Law firm of contributor's spouse (if any)	Date	Full name of contributor			
Contributor's principal occupation  IR Specialist  Contributor's employer/law firm  Date  Full name of contributor  Contributor address; City; State; Zip Code  Pon Adam S  Contributor's principal occupation  Contributor's employer/law firm  Contributor's employ	.3.14	Ashley Weaver	)		In-kind contribution description(if applicable)
Contributor's principal occupation  R Specialist  Contributor's employer/law firm  T. C. Penney Frisco, TX  If contributor is a child, law firm/of parent(s) (if any)  Date  Full name of contributor  Don, Adam S  Contributor address; City, State; Zip Code  P.O. Box 4445  Horseshoe Bay TX 78657  Contributor's principal occupation  Afficial Contributor's point discontributor  Contributor's principal occupation  Contributor's principal occupation  Contributor's employer/law firm  Don Adam S  Law firm of contributor's spouse (if any)  Contributor's principal occupation  Contributor's principal occupation  Contributor's principal occupation  Contributor's employer/law firm  Law firm of contributor's spouse (if any)		Contributor address; City; State; Zip Cod	i	250.00	
Contributor's political states of the second			Drive	1	
Contributor's employer/law firm  T.C. Penney Frisco, TX  If contributor is a child, law firm of parent(s) (if any)  Date  Full name of contributor  Don, Adam 5  Contributor address; City, State; Zip Code  P.D. Box 44 45  Horseshoe Bay TX 78657  Contributor's principal occupation  Afforney  Contributor's employer/law firm  Contributor's spouse (if any)  Law firm of contributor's spouse (if any)  Amount of contribution (\$)  In-kind contribution description(if applicable)  Contributor (\$)  Contributor's principal occupation  Afforney  Contributor's principal occupation  Law firm of contributor's spouse (if any)	Contributor's pri	icipal occupation	Contributoria inh si	(if travel outside of	Texas, complete Schedule T)
If contributor is a child, law firm of contributor's spouse (If any)  Date  Full name of contributor  Don Adam S  Contributor address; City, State; Zip Code  P.O. Box 4445  Horseshoe Bay TX 78657  Contributor's principal occupation  Afterney  Contributor's employer/law firm  Contributor's employer/law firm  Contributor's pouse (If any)  Law firm of contributor's spouse (If any)  Law firm of contributor's spouse (If any)  Law firm of contributor's spouse (If any)	TK Spe	cialist	HR Soc	a in liet	
Date  Full name of contributor  Don, Adam S  Contributor address; City, State; Zip Code  P.O. Box 4445  Horseshoe Bay TX 78657  Contributor's principal occupation  Amount of contribution (\$)  In-kind contribution description(if applicable)  In-kind contribution description (if applicable)  In-kind contribution (if applicable)  In-kin	Contributore em	player/f	l aw firm of contribu	CIULIST	
Date  Full name of contributor  Don, Adam S  Contributor address; City, State; Zip Code  P.O. Box 4445  Horseshoe Bay TX 78657  Contributor's principal occupation  Amount of contribution (\$)  In-kind contribution description(if applicable)  In-kind contribution description (if applicable)  In-kind contribution (if applicable)  In-kind contributio	3.C. PE	enney Frisco. Tx	CON INTO CONUID	utors spouse (if any)	
Amount of contribution (\$)  Don Adam 5  Contributor address; City: State; Zip Code P.O. Box 4445  Horseshoe Bay TX 78657  Contributor's principal occupation  Afterney  Contributor's employer/law firm  Don Adam 5  Law firm of contributor's spouse (if any)	If contributor is a	child, law firm of parent(s) (if any)			
Amount of contribution (\$)  Don Adam 5  Contributor address; City: State; Zip Code P.O. Box 4445  Horseshoe Bay TX 78657  Contributor's principal occupation  Afterney  Contributor's employer/law firm  Don Adam 5  Law firm of contributor's spouse (if any)					
Amount of contribution (\$)  Don Adams  Contributor address; City; State; Zip Code  P.O. Box 4445  Horseshoe Bay TX 78657  Contributor's principal occupation  Afterney  Contributor's employer/law firm  Don Adams. Attack Law In Experiment Law firm of contributor's spouse (if any)  Amount of contribution description (In-kind contribution description(if applicable)  In-kind contribution description(if applicable)  Contributor's principal occupation  Contributor's principal occupation  Attack  Law firm of contributor's spouse (if any)	Date	Full name of contributor			
Contributor address; City; State; Zip Code  Contributor's principal occupation  Contributor's principal occupation  Contributor's employer/law firm  Contributor's em			)	Amount of	In-kind contribution
Contributor's principal occupation  Attorney  Contributor's employer/law firm  Contributor's spouse (if any)	3/11	Don Holams		contribution (\$)	description(if applicable)
Contributor's principal occupation  Attorney  Contributor's employer/law firm  Law firm of contributor's spouse (if any)	7 /	Contributor address; City, State; Zip Code	• • • • • • • • • •	500.00	
Contributor's principal occupation  Attorney  Contributor's employer/law firm  Contributor's spouse (if any)	1	.O. BOX 4445	1		
Attorney Contributor's job title Ret. Texas Senator Law firm of contributor's spouse (if any)		//		1	
Attorney Contributor's job title Ret. Texas Senator Law firm of contributor's spouse (if any)		torseshoe Bay Ix	78657	115	
Contributor's employer/law firm  Law firm of contributor's spouse (if any)	Contributor's princ	pipal occupation		(If travel outside of	exas, complete Schedule T)
Contributor's employer/law firm  Law firm of contributor's spouse (if any)	HTTOTHE	y	RAL TO	00 0	- 1 -
	Contributor's empl	loyer/law firm	Lawfire of	ys sen	ator
ir contributor is a child, law firm of parent(s) (if any)		ems, Attuat Law		ors spouse (if any)	
	if contributor is a c	hild, law firm of parent( (if any)	<u> </u>		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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

P.O. Box 12070

SCHEDULE A (J)

2 FILER NAME	ruction Guide explains how to co	omplete this form.	Total pages So	hedule A(J):
	Inda M. Bo	ryless	3 ACCOUNT # (	Ethics Commission Filers)
5 ,	ull name of contributorout-of-stat	te PAC (ID#:	) 7 Amount of	T
.22.14 6	inda Poe Contributor address; City; State;		contribution (\$)	8 In-kind contribution description(if applicable)
P.	O. Box 8 B/	Zip Code	50.00	
		78605		
		10007	(If travel outside	of Texas, complete Schedule
tomin. A	<del>?\$\$</del> ⊁.	10 Contributor's	Top rine	
Contributor's employe	er/law firm	Hamir	1 ASS+	
Jano Col	inty Attorney	12 Law firm of co	ontributor's spouse (if any	′)
If contributor is a child	, law firm of parent(s) (if any)			
	barends) (ii any)			
D.				
Date Fu	ill name of contributorout-of-state F	PAC (ID#	T	
			Amount of	In-kind contribution
V	V.I.H. Moursuy	$\sim$	contribution (\$)	description(if applicable
22.14	VIII Moursur intributor address; City: State;	Zin Code		
P	D. Box I	Zip Code	250.00	
1	J. BOX		1 1	
l Ro	und Mounta	1. 77 70	- I	
Contributor's principal of	Occupation	In 1x 18663	(If travel outside of	Texas, complete Schedule T)
Horney	1	Contributor's jo	b title	roxas, complete schedule 1)
Contributor's employer/	105	Attorn	211	
ALL DE CO.	law firm		tributor's spouse (if any)	
loursund	Law Offices	Tancia	)	
ir contributor is a child, I	aw firm of parent(s) (if any)	Ingrio	<u> </u>	
	<del></del>	•		
Date Full	name of contributor Dut-of-state PA			
1			Amount of	In kind and it
. M	Ke Pickeri Libutor address; City; State; Z		contribution (\$)	In-kind contribution description(if applicable)
8.14 Cont	tributor addresses	ns		(" abbildable)
Po	City; State; Z	ip Code	150.00	
r.0.	BOX 4146			
140	scool - D-			
1701	seshoe Bay, T	x 18657	05.4	
ontributor's principal oc	cupation		(ii davel outside of	Texas, complete Schedule T)
etired	HHorney	Re thre	TITIE	
Antributor's employer/la	wfirm			
etired		Law firm of contri	butor's spouse (if any)	
contributor is a child, lav	w firm of parent(s) (if any)			,
,,	s. paranta) (II any)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

The leaders of		T.	SCHEDULE E (
The Instruction Guide explains how to comp	lete this form.	1 Total pages	Schedule E(J):
Linda Bayless		3 ACCOUNT	# (Ethics Commission Filers)
TOTAL OF UNITEMIZED LOANS:	9 6 1		
Date of loan 7 Name of lander		⇔ ⇔	\$
	out-of-state PAC (ID#:	)	9 Loan Amount (\$)
Is lender a financial Institution?  Linda Bayles  8 Lender address; City; State; 1503 CR 132 A	Zip Code		/0/8.68 10 Interest rate
Y (6)	Kingsland,	TX	0
Lender's Principal Occupation	18	639	11 Maturity date
Attorney	13 Lender's Job Title  Action	e /	12.4.2014
Lender's Employer/Law Firm	HCHIOS 15 Law Firm of fend	er's spouse (if any	1 Attorney
If lender is child, law firm of parent(s) (if any)			
Description of Collateral	18 Check if personal	funda	
none		ionos were depos	sited into political account
GUARANTOR INFORMATION 20 Name of guarantor			22 Amount Guaranteed (\$)
21 Guarantor address; City;	State; Zip Code		(,
not applicable	Zip Code		
Suarantor's Principal Occupation			
	24 Guarantor's Job Ti	lle	
Suarantor's Employer/Law Firm	26 Law Firm of guarar	itor's spouse (if ar	ny)
guarantor is child, law firm of parent(s) (if any)			
ATTACH ADDITIONAL COPIES	OF THIS SCHEDULE AS	NEEDED	
If lender is out-of-state PAC, please see instru			

The Instruction Guide explains how to complete the property of the Instruction Guide explains how to complete the property of the Instruction Guide explains how to complete the property of the Instruction Guide explains how to complete the property of the Instruction Guide explains how to complete the property of the Instruction Guide explains how to complete the property of the Instruction Guide explains how to complete the property of the Instruction Guide explains how to complete the Ins		SCHEDULE E (  otal pages Schedule E(J):  CCOUNT # (Ethics Commission Filers)
2 FILER NAME Linda Bayless		
Linda Bayless	3 AC	CCOUNT # (Ethics Commission Filers)
		(Etnics Commission Filers)
	4 4 4	\$
5 Date of loan 7 Name of lender out-of	state PAC (ID#:	) 9 Loan Amount (\$)
1. 2/.14  Is lender a financial  8 Lender address; City; State; Zip of the control of the contro		500.00
	Code	10 Interest rate
Institution? 1503 CR 132A		-0-
Kingsland, Tx 7	8639	11 Maturity date
Lender's Principal Occupation		12.4.14
Attu	13 Lender's Job Title  Actine	1 1.
Lender's Employer/Law Firm	15 Law Firm of lender's spou	
If lender is child, law firm of parent(s) (if any)		oc (ii ariy)
is issued is diffic, law firm of parent(s) (if any)		
Description of Collateral	19.01	
none	Check if personal funds we	ere deposited into political account
GUARANTOR 20 Name of guarantor		
INFORMATION 20 Name of guarantor		22 Amount Guaranteed (
21 Guarantor address; City; State;	Zip Code	
Guarantor's Principal Occupation		
	4 Guarantor's Job Title	
Guarantor's Employer/Law Firm	6 Law Firm of guarantor's spo	ouse (if any)
f guarantor is child, law firm of parent(s) (if any)		

## POLITICAL EXPENDITURES

P.O. Box 12070

SCHEDULE F

- 1		EXPENDITURE OF THE	
	Advertising Expense	EXPENDITURE CATEGORIES FOR BOX 8(a)  e Gift/Awards/Memorials Expense Salaries/Wages/Contract Laborates	=
	Accounting/Banking	Legal Services Loan Repayment/Reimburganest	
- 1	Consulting Expense	Food/Beverage Expense Travel In District Control of the Control of	
- 1	Event Expense	Polling Expense Travel Out of St. Contributions/Donations Made By	
- 1	Fees	Printing Expense Office Overhead ID Candidate/Officeholder/Political Committee	
L		The Instruction Guide explains how to complete this form.	
П	1 Total pages Schedule I	F: 2 FILER NAME	
- 1	1		
	4 Date	Linda Bayless  3 ACCOUNT # (Ethics Commission Filers	)
	_	5 Fayee name	
	1.23.14	Victory Publishing	_
T	6 Amount (\$)		
- 1	•	37 July Special	
-1	1018.68	Box 10 Marble Falls Tx 78151	
-1	1010100	Box 10 Marble Falls, Tx 78654	
1.	2000		
18	B PURPOSE OF	(a) Category (See categories listed at the top of this schedule)  (b) Description (If travel quieds of T	- 1
1	EXPENDITURE	(if the bell dutside of Texas, complete Schedule T)	٦
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9	Complete ONLY if direct	Candidate / Officeholder name	1
1_	expenditure to benefit C	C/OH Office sought Office held	7
F	Data		1
1	Date	Payee name	4
L	1.15.14	Danual, Inc	7
1	Amount (\$)	Payee address; City: State: Zin Code	1
1		Payee address; City; State; Zip Code	4
1.4	1993.02	12404 Howy 155 South T)	ı
1	773.02	12404 Hwy 155 South Tyler, TX 75703	1
$\vdash$		15103	ı
1	PURPOSE OF	Category (See categories listed at the top of this schedule)	į.
1	EXPENDITURE	Advertisins  Description (If travel outside of Texas, complete Schedule T)	1
├		2/4ns	ı
	Complete ONLY if direct	Candidate / Officehold	L
`	expenditure to benefit C/0	OH Office sought Office held	L
	Date		
1 :	1.3.14	Payee name	ı
	13.74	365 Strategies Payee address; City; State; Zip Code	
1	Amount (\$)	Payee address:	
_			-
2	000.00	Suite 350 Ave Austin, Texas 78701	ì
		Suite \$50	
	DUDDOOD	+ <u></u> 19	
	PURPOSE OF	Category (See categories listed at the top of this schedule)  Description (If travel putside of Taxon and	
E	XPENDITURE	Description (If travel outside of Texas, complete Schedule T)	
		Consulting Expense Consultant Services	
C	omplete ONLY if direct	Candidate / Officeholder	
	penditure to benefit C/O	H Office sought Office held	
	ate		
_	20.14	Payee name	
<i>'</i>	20.17	Burnet Bulletin	
Ar	mount (\$)	Payee address:	
_	C	Payee address; City; State; Zip Code	
d	503.00	100/ Buchanan Doing 2	
		ournet by 70111	
	DUDDO	100   Buchanan Drive, Burnet, Tx 78611	
	PURPOSE OF	Category (See categories listed at the state of the state	
EX	(PENDITURE	Description (If travel outside of Texas, complete Schedule T)	
		TUTEL TISING NOW	
Cor	mplete ONLY if direct	Candidate / Officeholder name	
exb	enditure to benefit C/OH	Office sought Office held	
		ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED	
	AL:	- TOULD AS RECUEU	