

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: <div style="text-align: center; font-size: 1.5em;">10</div>																					
3 CANDIDATE / OFFICEHOLDER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%; border-bottom: 1px solid black;">MS / MRS / MR</td> <td style="width:40%; border-bottom: 1px solid black;">FIRST</td> <td style="width:30%; border-bottom: 1px solid black;">MI</td> </tr> <tr> <td style="border-bottom: 1px solid black;">NICKNAME</td> <td style="border-bottom: 1px solid black;">LAST</td> <td style="border-bottom: 1px solid black;">SUFFIX</td> </tr> <tr> <td style="text-align: center;">MR.</td> <td style="text-align: center;">Damon</td> <td style="text-align: center;">C.</td> </tr> <tr> <td colspan="3" style="text-align: center; font-size: 1.2em;">Beierle</td> </tr> </table>	MS / MRS / MR	FIRST	MI	NICKNAME	LAST	SUFFIX	MR.	Damon	C.	Beierle			<div style="text-align: center; font-weight: bold; font-size: 1.2em;">OFFICE USE ONLY</div> <p>Date Received</p> <div style="text-align: center; font-size: 1.5em; font-weight: bold;">RECEIVED</div> <div style="text-align: center; font-size: 1.2em; font-weight: bold;">MAY 10 2018</div> <div style="text-align: center; font-weight: bold;">Burnet Co Elections</div> <div style="text-align: right; font-size: 0.8em;">WR</div> <hr/> <p>Date Hand-delivered or Date Postmarked</p> <hr/> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; border-bottom: 1px solid black;">Receipt #</td> <td style="width:50%; border-bottom: 1px solid black;">Amount \$</td> </tr> <tr> <td colspan="2" style="border-bottom: 1px solid black;">Date Processed</td> </tr> <tr> <td colspan="2" style="border-bottom: 1px solid black;">Date Imaged</td> </tr> </table>		Receipt #	Amount \$	Date Processed		Date Imaged				
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Beierle																								
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Date Processed																								
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4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">ADDRESS / PO BOX;</td> <td style="width:25%;">APT / SUITE #;</td> <td style="width:25%;">CITY;</td> <td style="width:25%;">STATE;</td> <td style="width:20%;">ZIP CODE</td> </tr> <tr> <td colspan="5" style="text-align: center; font-size: 1.2em;">509 Turkey Trot Burnet, TX 78611</td> </tr> </table>			ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	509 Turkey Trot Burnet, TX 78611															
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	Monica	J.																						
Beierle																								
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%;">STREET ADDRESS (NO PO BOX PLEASE);</td> <td style="width:10%;">APT / SUITE #;</td> <td style="width:10%;">CITY;</td> <td style="width:10%;">STATE;</td> <td style="width:30%;">ZIP CODE</td> </tr> <tr> <td colspan="5" style="text-align: center; font-size: 1.2em;">509 Turkey Trot Burnet, TX 78611</td> </tr> </table>			STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE;	ZIP CODE	509 Turkey Trot Burnet, TX 78611															
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(830)	798-4578																							
9 REPORT TYPE	<table style="width:100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input checked="" type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded \$500 limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table>			<input 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 checked="" type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)													
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10 PERIOD COVERED	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">Month</td> <td style="width:10%;">Day</td> <td style="width:15%;">Year</td> <td style="width:20%;"></td> <td style="width:20%;">Month</td> <td style="width:10%;">Day</td> <td style="width:10%;">Year</td> </tr> <tr> <td style="text-align: center;">2</td> <td style="text-align: center;">/</td> <td style="text-align: center;">25</td> <td style="text-align: center;">/</td> <td style="text-align: center;">5</td> <td style="text-align: center;">/</td> <td style="text-align: center;">12</td> </tr> <tr> <td colspan="3" style="text-align: center; font-size: 1.2em;">18</td> <td style="text-align: center; font-size: 1.2em;">THROUGH</td> <td colspan="3" style="text-align: center; font-size: 1.2em;">18</td> </tr> </table>			Month	Day	Year		Month	Day	Year	2	/	25	/	5	/	12	18			THROUGH	18		
Month	Day	Year		Month	Day	Year																		
2	/	25	/	5	/	12																		
18			THROUGH	18																				
11 ELECTION	<table style="width:100%; border-collapse: collapse;"> <tr> <td colspan="3" style="text-align: center;">ELECTION DATE</td> </tr> <tr> <td style="width:30%; border-bottom: 1px solid black;">Month</td> <td style="width:30%; border-bottom: 1px solid black;">Day</td> <td style="width:40%; border-bottom: 1px solid black;">Year</td> </tr> <tr> <td style="text-align: center;">5</td> <td style="text-align: center;">/</td> <td style="text-align: center;">22</td> </tr> <tr> <td colspan="3" style="text-align: center; font-size: 1.2em;">18</td> </tr> </table>	ELECTION DATE			Month	Day	Year	5	/	22	18			<table style="width:100%; border-collapse: collapse;"> <tr> <td colspan="3" style="text-align: center;">ELECTION TYPE</td> </tr> <tr> <td><input type="checkbox"/> Primary</td> <td><input checked="" type="checkbox"/> Runoff</td> <td><input type="checkbox"/> Other Description</td> </tr> <tr> <td><input type="checkbox"/> General</td> <td><input type="checkbox"/> Special</td> <td></td> </tr> </table>		ELECTION TYPE			<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> Runoff	<input type="checkbox"/> Other Description	<input type="checkbox"/> General	<input type="checkbox"/> Special	
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12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)																						
		Burnet Co. Commissioner Ret 2																						

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Damon C. Beierle 15 Filer ID (Ethics Commission Filers)

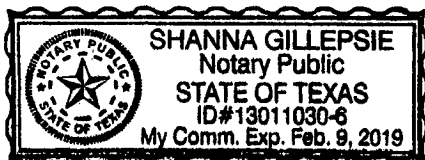
16 NOTICE FROM POLITICAL COMMITTEE(S)
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	
<input type="checkbox"/> SPECIFIC	
COMMITTEE ADDRESS	
COMMITTEE CAMPAIGN TREASURER NAME	
COMMITTEE CAMPAIGN TREASURER ADDRESS	

Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 250.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4400.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 455.54
	4. TOTAL POLITICAL EXPENDITURES	\$ 3,769.18
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 888.95
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.

[Signature]

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Damon C. Beierle, this the 11th day of May, 20 18, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

Shanna Gillespie
Printed name of officer administering oath

Notary
Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME

Damon C. Beierle

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4150. ⁰⁰
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 3,313.64
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <p style="text-align:center">4</p>	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 Date 2/27/18	5 Payee name Burnet Bulletin	
6 Amount (\$) \$248. ⁰⁰	7 Payee address; City; State; Zip Code 220. S. main Burnet, TX 78611	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <p style="text-align:center">Advertising</p>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <p style="text-align:center">Newspaper Ad</p>
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Danon Beierle Office sought: Burnet Co. Comm. Pct. 2 Office held:	
Date 2/27/18	Payee name Victory Publishing	
Amount (\$) \$390. ⁰⁰	Payee address; City; State; Zip Code 1007 Ave. K Marble Falls TX 78654	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <p style="text-align:center">Advertising</p>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <p style="text-align:center">Newspaper Ad</p>
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Danon Beierle Office sought: Burnet Co Comm Pct. 2 Office held:	
Date 4/4/18	Payee name XCR8	
Amount (\$) \$184.03	Payee address; City; State; Zip Code 1002 n. water Burnet, TX 78611	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <p style="text-align:center">Advertising</p>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <p style="text-align:center">T-shirts</p>
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Danon Beierle Office sought: Burnet Co. Comm Pct. 2 Office held:	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 4	2 FILER NAME Damon C. Beierle	3 Filer ID (Ethics Commission Filers)
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4 Date 4/18/18	5 Payee name D.W. Printing
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6 Amount (\$) \$184.13	7 Payee address; City; State; Zip Code 228 S. Water Burnett, TX 78611
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Push cards
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5/2/18	Payee name OMT Signs: More
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Amount (\$) \$474.11	Payee address; City; State; Zip Code 1904 West Hwy 29 Burnett, TX 78611
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Signs
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Damon Beierle	Office sought Burnet Co Comm Pct. 2	Office held
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Date 5/4/18	Payee name USPS
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Amount (\$) \$200.00	Payee address; City; State; Zip Code 500 E. Jackson Burnett, TX 78611
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Damon Beierle	Office sought Burnet Co. Comm. Pct. 2	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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1 Total pages, Schedule F1: 4	2 FILER NAME Damon C. Beierle	3 Filer ID (Ethics Commission Filers)
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4 Date 5/4/18	5 Payee name Lake Victor Community Center
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6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 201 Lake Ave. Lampasas, TX 76550
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Venue Rental
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Damon Beierle	Office sought Burnet Co. Comm. Pct. 2	Office held
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Date 5/7/18	Payee name USPS
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Amount (\$) \$247.25	Payee address; City; State; Zip Code 508 E. Jackson Burnet, TX 78611
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Damon Beierle	Office sought Burnet Co. Comm. Pct. 2	Office held
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Date 5/11/18	Payee name Thomas Graphics
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Amount (\$) \$663.57	Payee address; City; State; Zip Code PO Box 142226 Austin, TX 78714
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense mail
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Damon Beierle	Office sought Burnet Co Comm. Pct. 2	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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1 Total pages Schedule F1: 4	2 FILER NAME DANON C. BEIERLE	3 Filer ID (Ethics Commission Filers)
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4 Date 5-11-18	5 Payee name Burnet Bulletin
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6 Amount (\$) \$380.⁰⁰	7 Payee address; City; State; Zip Code 220 S. main Burnet, TX 78611
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Danon C. Beierle	Office sought Burnet Co. Comm. Dist. 2	Office held
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Date 5-11-18	Payee name Lampasas Dispatch Record
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Amount (\$) \$242.55	Payee address; City; State; Zip Code 416 S. Live Oak Lampasas, TX 76550
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name DANON BEIERLE	Office sought Burnet Co. Comm. Dist. 2	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 3
2 FILER NAME DANON C. BEIERLE		3 Filer ID (Ethics Commission Filers)
4 Date 2/26/18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Beierle 6 Contributor address; City; State; Zip Code PO Box 829 Burnet, TX 78611	7 Amount of contribution (\$) \$ 300.⁰⁰
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 2/27/18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenneth Graham Contributor address; City; State; Zip Code 112 Wallace Riddell Burnet TX 78611	Amount of contribution (\$) \$ 100.⁰⁰
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 2/27/18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brenda Atkison Contributor address; City; State; Zip Code 2300 CR 250 Burnet, TX 78611	Amount of contribution (\$) \$ 150.⁰⁰
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 4-11-18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kara Chasteen Contributor address; City; State; Zip Code 104 CR 213 Belton, TX 78605	Amount of contribution (\$) \$ 200.⁰⁰
Principal occupation / Job title (See Instructions) Rancher		Employer (See Instructions) Self
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **3**

2 FILER NAME

Damon C. Beierle

3 Filer ID (Ethics Commission Filers)

4 Date

4-18-18

5 Full name of contributor

out-of-state PAC (ID#: _____)

Stephanie McCormick

6 Contributor address; City; State; Zip Code

1306 Adam Burrell, TX 78611

7 Amount of contribution (\$)

\$ 400.⁰⁰

8 Principal occupation / Job title (See Instructions)

Admin. Assistant

9 Employer (See Instructions)

Burrell County

Date

4/27/18

Full name of contributor

out-of-state PAC (ID#: _____)

Evan Floyd

Contributor address; City; State; Zip Code

2329 CR252 Bertram, TX 78605

Amount of contribution (\$)

\$ 500.⁰⁰

Principal occupation / Job title (See Instructions)

Vice-President

Employer (See Instructions)

DIT Construction

Date

4/27/18

Full name of contributor

out-of-state PAC (ID#: _____)

Dave Hartig

Contributor address; City; State; Zip Code

100 Denny Fox Burrell TX 78611

Amount of contribution (\$)

\$ 100.⁰⁰

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

N/A

Date

4/27/18

Full name of contributor

out-of-state PAC (ID#: _____)

Mark Lundsford

Contributor address; City; State; Zip Code

Po Box 949 Burrell, TX 78611

Amount of contribution (\$)

\$ 400.⁰⁰

Principal occupation / Job title (See Instructions)

Insurance Agent

Employer (See Instructions)

Self

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **3**

2 FILER NAME

Damon C. Beierle

3 Filer ID (Ethics Commission Filers)

4 Date

5/7/18

5 Full name of contributor out-of-state PAC (ID#: _____)

Eddie Shell

6 Contributor address; City; State; Zip Code

6000 US-281 Merble Falls TX 78654

7 Amount of contribution (\$)

\$1,000.00

8 Principal occupation / Job title (See Instructions)

A Horney

9 Employer (See Instructions)

Shell: Shell A Horneys

Date

5/7/18

Full name of contributor out-of-state PAC (ID#: _____)

Walker Vaughan

Contributor address; City; State; Zip Code

127 Fox Circle Burnett, TX 78611

Amount of contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

N/A

Date

5/11/18

Full name of contributor out-of-state PAC (ID#: _____)

Danny Floyd

Contributor address; City; State; Zip Code

3400 CR 252 Bertram, TX 78605

Amount of contribution (\$)

\$800.00

Principal occupation / Job title (See Instructions)

CEO

Employer (See Instructions)

DIS Construction

Date

5/11/18

Full name of contributor out-of-state PAC (ID#: _____)

Larry Westphal

Contributor address; City; State; Zip Code

932 CR 202 Burnett, TX 78611

Amount of contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

machinist

Employer (See Instructions)

Self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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