

**SPECIFIC-PURPOSE COMMITTEE REPORT:
PURPOSE AND TOTALS**

**FORM SPAC
COVER SHEET PG 2**

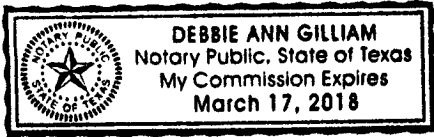
12 COMMITTEE NAME **CITIZENS FOR CALVIN BOYD FOR SHERIFF** ACCOUNT # (Ethics Commission Filers)

13 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT - (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder)	<input checked="" type="checkbox"/> CANDIDATE <input type="checkbox"/> OFFICEHOLDER	CANDIDATE / OFFICEHOLDER NAME CALVIN BOYD
	<input type="checkbox"/> MEASURE	OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) BURNET COUNTY SHERIFF
		BALLOT IDENTIFICATION / # ELECTION DATE Month Day Year 03 / 01 / 2016
		DESCRIPTION

14 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 70.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,120.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 104.04
	4. TOTAL POLITICAL EXPENDITURES	\$ 3,217.69
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 6676.85
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

15 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.



James R. Lott
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said James Lott, this the 25 day of January, 2016, to certify which, witness my hand and seal of office.

Debbie Ann Gilliam **DEBBIE ANN GILLIAM** Notary Public State of Texas
Signature of officer administering oath Printed name of officer administering oath 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: 3	
2 FILER NAME CITIZENS FOR CALVIN BOYD FOR SHERIFF		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 1/16/16	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) E.B. PRICE	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1438 CR 210B BERTRAM, TX. 78605		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 1/16/16	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB WALKER III	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 117 VANDERVENTER DR. BURNET TX. 78611		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1/19/16	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WM. H. LUEDECKE III (STOREHOUSE ACCT)	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. BOX 1632 BERTRAM, TX. 78605		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1/19/16	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVID & CAROL GASTINGER	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 316 YELLOW RIBBON TRL. BURNET, TX. 78611		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1/19/16	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAIG & SUZANNE COSGRAY	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 272086 WATERFALL HILL PARKWAY SPICEWOOD, TX. 78669		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

1

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A:

2 FILER NAME **CITIZENS FOR CALVIN BOYD FOR SHERIFF** 3 ACCOUNT # (Ethics Commission Filers)

4 Date 1/19/16	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) CRAIG & VONDA ORTON	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 127 QUAIL TRAIL MARBLE FALLS, TX 78654		(If travel outside of Texas, complete Schedule T)	

9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions)

Date 1/19/16	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) THOMAS & MARY STEPHENS	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 320 WINDMILL BURNET, TX. 78654		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date 1/24/16	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) WALTER A. VAUGHAN JR	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 127 FOX CIRCLE BURNET, TX. 78611		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date 1/26/16	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) KENNETH & BEVERLY GRAHAM	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 112 WALLACE RIDGLE DR BURNET, TX. 78611		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date 1/26/16	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) EDWARD & NANCY MIDDLEBROOKS	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1911 CR100 BURNET, TX. 78611		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

CITIZENS FOR CALVIN BOYD FOR SHERIFF

3 ACCOUNT # (Ethics Commission Filers)

4 Date

1/26/16

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

RON & LORETTA GAHAGAN

7 Amount of contribution (\$)

\$50.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

210 POINT ST.
BURNET, TX. 78611

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/26/16

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

ROBERT & SACHIKO THOMSON

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

204 RIO ANCHO BLVD
LIBERTY HILL, TX 78642

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/26/16

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

JEFF BREEDLOVE

Amount of contribution (\$)

\$20.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

123 ROCK BLUFF
KINGSLAND, TX. 78639

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor 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 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)

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME CITIZENS FOR CALUID BOYD FOR SHERIFF	3 Filer ID (Ethics Commission Filers)
4 Date 1-20-16	5 Payee name THOMAS GRAPHICS INC	
6 Amount (\$) \$1,861.38	7 Payee address; City; State; Zip Code P.O. BOX 142226 AUSTIN, TX. 78714-2226	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) ADVERTISING MAIL OUTS	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 1-23-16	Payee name TEXAS PUBLISHING (KBey)	
Amount (\$) \$1,065.00	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) ADVERTISING (RADIO)	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 1-23-16	Payee name TEXAS PUBLISHING (KBey)	
Amount (\$) \$50.00	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) ADVERTISING (RADIO)	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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