

# 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:						
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: _____ FIRST: <u>James</u> MI: <u>N.</u> NICKNAME: _____ LAST: <u>Oakley</u> SUFFIX: _____	<div style="border: 2px solid black; padding: 10px; font-weight: bold; font-size: 1.2em;">OFFICE USE ONLY</div> <div style="border: 1px solid black; padding: 5px; margin: 5px 0;">Date Received</div> <div style="font-size: 1.5em; font-weight: bold; text-align: center;">RECEIVED</div> <div style="font-size: 1.5em; font-weight: bold; text-align: center;">JAN 31 2022</div> <div style="font-weight: bold; text-align: center;">BURNET CO ELECTIONS</div> <div style="border: 1px solid black; padding: 5px; margin: 5px 0;">Date Hand-delivered or Date Postmarked</div> <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	
Receipt #	Amount \$								
Date Processed									
Date Imaged									
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX, APT / SUITE #, CITY, STATE, ZIP CODE <u>P.O. Box 121 Spicewood, TX 78669</u>								
<b>5</b> CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <u>(512) 744-5205</u>								
<b>6</b> CAMPAIGN TREASURER NAME	MS / MRS / MR: _____ FIRST: <u>James</u> MI: _____ NICKNAME: _____ LAST: <u>Oakley</u> SUFFIX: _____								
<b>7</b> CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #, CITY, STATE, ZIP CODE <u>116 Combs Alley Spicewood, TX 78669</u>								
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <u>(512) 744-5205</u>	<div style="border: 2px solid black; padding: 10px; font-weight: bold; font-size: 1.2em;">RECEIVED</div> <div style="font-size: 1.5em; font-weight: bold; text-align: center;">JAN 31 2022</div> <div style="font-weight: bold; text-align: center;">BURNET CO ELECTIONS</div>							
<b>9</b> REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after election <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)								
<b>10</b> PERIOD COVERED	Month Day Year    THROUGH    Month Day Year <u>1 / 1 / 22</u> <u>1 / 20 / 22</u>								
<b>11</b> ELECTION	ELECTION DATE Month Day Year <u>3 / 1 / 22</u>	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special							
<b>12</b> OFFICE	OFFICE HELD (if any) <u>County Judge</u>	<b>13</b> OFFICE SOUGHT (if known) <u>County Judge</u>							
<b>14</b> NOTICE FROM POLITICAL COMMITTEE(S)  <input type="checkbox"/> Additional Pages	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 <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS							

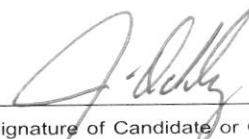
GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4,600.-
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,250.-
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 14,397.89
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

18 SIGNATURE 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 of Candidate or Officeholder

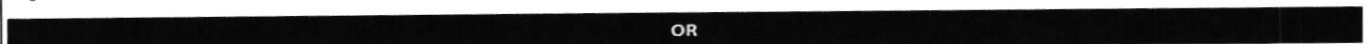
**Please complete either option below:**

**(1) Affidavit**

NOTARY STAMP / SEAL

Sworn to and subscribed before me by \_\_\_\_\_ this the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_, to certify which, witness my hand and seal of office.

Signature of officer administering oath                      Printed name of officer administering oath                      Title of officer administering oath



**(2) Unsworn Declaration**

My name is James Oakley, and my date of birth is 07/14/1965.  
 My address is 116 Combs Alley, Spicewood, TX, 78669, USA.  
(street) (city) (state) (zip code) (country)  
 Executed in Burnet County, State of TEXAS, on the 31 day of JAN., 20 22.  
(month) (year)  
 \_\_\_\_\_  
 Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - C/OH

**FORM C/OH  
COVER SHEET PG 3**

<b>19</b> FILER NAME		<b>20</b> Filer ID (Ethics Commission Filers)
<b>21</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 4600.
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		\$ 1250.-
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		\$

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>James Oakley</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>1/10</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Juliette Madeigal</i>	7 Amount of contribution (\$) <i>200.-</i>
	6 Contributor address; City; State; Zip Code <i>5424 Corsi Bear Cv. Spicewood, TX 78669</i>	
8 Principal occupation / Job title (See Instructions) <i>Physician</i>		9 Employer (See Instructions) <i>Self</i>
Date <i>1/5</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Kevin Collier</i>	Amount of contribution (\$) <i>1,000.-</i>
	Contributor address; City; State; Zip Code <i>201 CR 121 Marble Falls, TX 78654</i>	
Principal occupation / Job title (See Instructions) <i>Materials Supplier</i>		Employer (See Instructions) <i>Self</i>
Date <i>1/13</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Terry Spracke</i>	Amount of contribution (\$) <i>250.-</i>
	Contributor address; City; State; Zip Code <i>101 Morgan Cove Cuert, TX 78611</i>	
Principal occupation / Job title (See Instructions) <i>Retired</i>		Employer (See Instructions)
Date <i>1/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Will Conley</i>	Amount of contribution (\$) <i>300.-</i>
	Contributor address; City; State; Zip Code <i>701 Mountain Crest Wimberly, TX 78674</i>	
Principal occupation / Job title (See Instructions) <i>Consultant</i>		Employer (See Instructions) <i>Self</i>

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>James Oakley</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>1/13/22</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>James Oakley</i>	7 Amount of contribution (\$)  <i>250.-</i>
6 Contributor address; City; State; Zip Code <i>503 S. Water Street, TX 78611</i>		
8 Principal occupation / Job title (See Instructions) <i>REALTOR</i>		9 Employer (See Instructions) <i>Self</i>
Date <i>1/13/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>James Lamar</i>	Amount of contribution (\$)  <i>100.-</i>
Contributor address; City; State; Zip Code <i>1104 Majestic Hills Spicewood, TX 78667</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>1/13/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Martha Jones</i>	Amount of contribution (\$)  <i>1,000.-</i>
Contributor address; City; State; Zip Code <i>P.O. Box 1296 Brady, TX 76825</i>		
Principal occupation / Job title (See Instructions) <i>Banker</i>		Employer (See Instructions)
Date <i>1/8/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Gordon Griffin</i>	Amount of contribution (\$)  <i>500.-</i>
Contributor address; City; State; Zip Code <i>2800 Northwood Rd. Austin, TX 78703</i>		
Principal occupation / Job title (See Instructions) <i>Real Estate Investor</i>		Employer (See Instructions) <i>Self</i>
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>James Oakley</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>1/8/22</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Stacy Collier</i>	7 Amount of contribution (\$)  <i>1,000.00</i>
6 Contributor address; City; State; Zip Code <i>201 CR. 121 MARBLE FALLS, TX 78254</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

### 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.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME <i>James Oakley</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>1/14/22</i>	<b>5</b> Payee name <i>Victory Publishing</i>	
<b>6</b> Amount (\$) <i>1250</i>	<b>7</b> Payee address; City; State; Zip Code <i>Marble Falls, TX 78654</i>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>Advertising</i>	<b>(b)</b> Description
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>JAMES OAKLEY</i>	Office sought <i>County Judge</i> Office held <i>County Judge</i>
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	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	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	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	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

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