

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:

OFFICE USE ONLY

Date Received

RECEIVED

FEB 22 2022

BURNET CO ELECTIONS

Date Hand-delivered or Date Postmarked

Receipt #

Amount \$

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR

FIRST

MI

James

NICKNAME

LAST

SUFFIX

Oakley

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

P.O. Box 121

Spicewood, TX 78669

Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(512)

744-5205

6 CAMPAIGN TREASURER NAME

MS / MRS / MR

FIRST

MI

Same

NICKNAME

LAST

SUFFIX

7 CAMPAIGN TREASURER ADDRESS
(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

116 Combs Alley

8 CAMPAIGN TREASURER PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(512)

744-5205

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 Modified Reporting Limit

Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month

Day

Year

Month

Day

Year

1 / 21 / 22

THROUGH

1 / 22 / 22

11 ELECTION

ELECTION DATE

Month

Day

Year

3 / 1 / 22

ELECTION TYPE

Primary

Runoff

Other Description

General

Special

12 OFFICE

OFFICE HELD (if any)

County Judge

13 OFFICE SOUGHT (if known)

County Judge

14 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

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

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)	\$ 23,100.
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 8327.36
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 29,170.53
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

OR

(2) Unsworn Declaration

My name is James Oakley, and my date of birth is 07-14-65.

My address is 116 Combs Alley, Spicewood, TX, 78669, USA.
(street) (city) (state) (zip code) (country)

Executed in Brewster County, State of Texas, on the 22 day of February, 20 22.
(month) (year)



 Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
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	\$
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>2/19/22</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>MARK LEACH</i>	7 Amount of contribution (\$) <i>100.-</i>
6 Contributor address; City; State; Zip Code <i>2501 S. Hwy 183 Lumbert, TX 78641</i>		
8 Principal occupation / Job title (See Instructions) <i>Rancher</i>		9 Employer (See Instructions)
Date <i>2/10/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>LAKEWOOD CAPITAL</i>	Amount of contribution (\$) <i>5,000.-</i>
Contributor address; City; State; Zip Code <i>9827 Cogdill Rd. Ste 1 Knoxville, TN 37932</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>1/25/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>JAMES HEATH</i>	Amount of contribution (\$) <i>750.-</i>
Contributor address; City; State; Zip Code <i>?</i>		
Principal occupation / Job title (See Instructions) <i>?</i>		Employer (See Instructions)
Date <i>2/9</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>JOHN SIMMONS</i>	Amount of contribution (\$) <i>4000.-</i>
Contributor address; City; State; Zip Code <i>3215 Stead Ave. Austin, TX 78757</i>		
Principal occupation / Job title (See Instructions) <i>investor</i>		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.

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>2/7/22</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>FRANK DAVIS</i>	7 Amount of contribution (\$) <i>1,000.-</i>
6 Contributor address; City; State; Zip Code <i>616 ROBIN Dale Dr. LakeWAM, TX 78734</i>		
8 Principal occupation / Job title (See Instructions) <i>REAL ESTATE DEVELOPER</i>		9 Employer (See Instructions)
Date <i>2/8/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>MARK FOX</i>	Amount of contribution (\$) <i>1,000.-</i>
Contributor address; City; State; Zip Code <i>1402 Blue Bonnet Marble Falls TX 78654</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>2/8/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Doyle Sinuous</i>	Amount of contribution (\$) <i>500.-</i>
Contributor address; City; State; Zip Code <i>P.O. Box 758 Spicewood, TX 78669</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>2/8/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>CHAS Harte</i>	Amount of contribution (\$) <i>500.-</i>
Contributor address; City; State; Zip Code <i>3939 BeeCave Rd. Bld. C100 Austin, TX 78746</i>		
Principal occupation / Job title (See Instructions) <i>Holdings Company MGR.</i>		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME <i>James Oakley</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>2/14/22</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>La Vonna Fox</i>	7 Amount of contribution (\$) <i>500.-</i>
6 Contributor address; City; State; Zip Code <i>605 N. WATER BUENUT TX 78611</i>		
8 Principal occupation / Job title (See Instructions) <i>Retired</i>		9 Employer (See Instructions)
Date <i>2/10/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>CAROLY CLINTON</i>	Amount of contribution (\$) <i>150.-</i>
Contributor address; City; State; Zip Code <i>P.O. Box 1099 BUENUT, TX 78611</i>		
Principal occupation / Job title (See Instructions) <i>Sales</i>		Employer (See Instructions)
Date <i>2/8/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>TERRY WILSON</i>	Amount of contribution (\$) <i>1,000.-</i>
Contributor address; City; State; Zip Code <i>P.O. Box 489 MARBLE FALLS, TX 78654</i>		
Principal occupation / Job title (See Instructions) <i>Retired - STATE REP.</i>		Employer (See Instructions)
Date <i>2/8/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>ALLEN SPELCE</i>	Amount of contribution (\$) <i>200.-</i>
Contributor address; City; State; Zip Code <i>P.O. Box 752 Spicewood, TX 78669</i>		
Principal occupation / Job title (See Instructions) <i>Rancher</i>		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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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>1/28/22</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Robert Wells</i>	7 Amount of contribution (\$) <i>500.-</i>
6 Contributor address; City; State; Zip Code <i>1650 Kellinwood Oaks. KARY TX 77450</i>		
8 Principal occupation / Job title (See Instructions) <i>SALES</i>		9 Employer (See Instructions)
Date <i>2/8/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Donald Morgan</i>	Amount of contribution (\$) <i>1,000.-</i>
Contributor address; City; State; Zip Code <i>103 Costa Bella Ave Austin, TX 78734</i>		
Principal occupation / Job title (See Instructions) <i>Developer</i>		Employer (See Instructions)
Date <i>2/8/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Raymond Houke</i>	Amount of contribution (\$) <i>200.-</i>
Contributor address; City; State; Zip Code <i>435 Lost Cove Spicewood TX 78669</i>		
Principal occupation / Job title (See Instructions) <i>Retired</i>		Employer (See Instructions)
Date <i>2/8/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Mark Axford</i>	Amount of contribution (\$) <i>1,000.-</i>
Contributor address; City; State; Zip Code <i>217 Waters Edge BURNETT, TX 78611</i>		
Principal occupation / Job title (See Instructions) <i>INVESTOR</i>		Employer (See Instructions)

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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>2/8/22</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Dave Kithiz</i>	7 Amount of contribution (\$) <i>500.-</i>
6 Contributor address; City; State; Zip Code <i>1921 Fm 1980 Marble Falls, TX 78654</i>		
8 Principal occupation / Job title (See Instructions) <i>Retired</i>		9 Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Mary Magor-Kaeth</i>	Amount of contribution (\$)
Contributor address; City; State; Zip Code <i>99 Hi View Dr. Marble Falls, TX 78654</i>		<i>100.-</i>
Principal occupation / Job title (See Instructions) <i>CONSULTANT</i>		Employer (See Instructions)
Date <i>2/1/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Linda Rogers</i>	Amount of contribution (\$)
Contributor address; City; State; Zip Code <i>P.O. Box 190 Briggs TX 78608</i>		<i>200.-</i>
Principal occupation / Job title (See Instructions) <i>Retired</i>		Employer (See Instructions)
Date <i>2/8/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>G.B. Stackel Sand</i>	Amount of contribution (\$)
Contributor address; City; State; Zip Code <i>319 Stewart Meadowlake, TX 78654</i>		<i>500.-</i>
Principal occupation / Job title (See Instructions) <i>MARINA OWNER</i>		Employer (See Instructions)
<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

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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>1/20/22</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Ronda Hostrater</i>	7 Amount of contribution (\$) <i>50.-</i>
6 Contributor address; City; State; Zip Code <i>280 CR200C Buena Vista TX 78611</i>		
8 Principal occupation / Job title (See Instructions) <i>Retired</i>		9 Employer (See Instructions)
Date <i>2/10/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jeff Townsend</i>	Amount of contribution (\$) <i>50.-</i>
Contributor address; City; State; Zip Code <i>1012 W. Boundary Buena Vista, TX 78611</i>		
Principal occupation / Job title (See Instructions) <i>Retired</i>		Employer (See Instructions)
Date <i>2/8/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Joyce Smith</i>	Amount of contribution (\$) <i>100.-</i>
Contributor address; City; State; Zip Code <i>2510 CR137 Buena Vista, TX 78611</i>		
Principal occupation / Job title (See Instructions) <i>Retired</i>		Employer (See Instructions)
Date <i>2/8/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Alan Swider</i>	Amount of contribution (\$) <i>100.-</i>
Contributor address; City; State; Zip Code <i>P.O. Box 578 Buena Vista, TX 78611</i>		
Principal occupation / Job title (See Instructions) <i>REALTOR</i>		Employer (See Instructions)
<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

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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>1/25/12</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>TX. ASSN. REALTORS</i>	7 Amount of contribution (\$) <i>4,000.-</i>
6 Contributor address; City; State; Zip Code <i>P.O. Box 2246 Austin, TX 78768</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#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
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.

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.

1 Total pages Schedule F1:	2 FILER NAME <i>James Oakley</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>1/26/22</i>	5 Payee name <i>Post office</i>	
6 Amount (\$) <i>69.60</i>	7 Payee address; <i>Spicewood</i>	City; State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>STAMP</i>	(b) Description
	(c) <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 <i>James Oakley</i>	Office sought <i>County Judge</i> →
Date <i>2/7/22</i>	Payee name <i>Hugh Lander Newspaper Marble Falls</i>	
Amount (\$) <i>2300.-</i>	Payee address;	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>PRINT Advertising</i>	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 <i>James Oakley</i>	Office sought <i>County Judge</i> →
Date <i>2/15/22</i>	Payee name <i>Victory Publishing</i>	
Amount (\$) <i>755.-</i>	Payee address;	City; State; Zip Code <i>MARBLE FALLS</i>
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>RADIO + WEB ADVERTISING</i>	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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>James Oakley</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>2/12/22</i>	5 Payee name <i>Burnet Chamber of Commerce</i>
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6 Amount (\$) <i>320.-</i>	7 Payee address; City; State; Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>TABLE SPONSOR for ANNOUNCE</i>	(b) Description <i>ANNOUNCE</i>
	(c) <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
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Date <i>2/12/22</i>	Payee name <i>Burnet County Republican Club</i>
------------------------	--

Amount (\$) <i>350.-</i>	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>DONATION C CLUB CITIZEN</i>	Description
	(c) <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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Date <i>2/7/22</i>	Payee name <i>Capital Printing</i>
-----------------------	---------------------------------------

Amount (\$) <i>307.-</i>	Payee address; City; State; Zip Code <i>P.O. Box 17548 Austin TX 78760</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Hand out PRINTING</i>	Description
	(c) <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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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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.

1 Total pages Schedule F1:	2 FILER NAME <i>James Oakley</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>2/8/22</i>	5 Payee name <i>Post Office</i>	
6 Amount (\$) <i>2517.14</i>	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Postage for Mailer</i>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <i>2/8/22</i>	Payee name <i>Capital Printing</i>		
Amount (\$) <i>2456.05</i>	Payee address; <i>P.O. Box 17548</i>	City; <i>Austin, TX</i>	State; Zip Code <i>78760</i>
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Printing for Mailer</i>	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
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		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED