Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 ACCOUNT # (Ethics Commission Filers)

2 Total pages filed: 4

OFFICE USE ONLY
Date Received
Date Filed 10/8/14
Rebecca Huerta
Date Hand Delivered or Postmarked
Rebecca Huerta
City Secretary
Receipt # Amount
Date Processed
Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME
MS / MRS / MR: MR FIRST: LEE MI: N
NICKNAME LAST: McGINNIS SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
☐ change of address
ADDRESS / PO BOX: 3909 STIRMAN ST APT / SUITE #: CITY: CC STATE: TX ZIP CODE: 78411

5 CANDIDATE/ OFFICEHOLDER PHONE
AREA CODE: (361) PHONE NUMBER: 425-4903 EXTENSION:

6 CAMPAIGN TREASURER NAME
MS / MRS / MR: MR FIRST: MAX MI: D
NICKNAME LAST: MAUGHAN SUFFIX

7 CAMPAIGN TREASURER ADDRESS (residence or business)
STREET ADDRESS (NO PO BOX PLEASE): 781 CORNELIA CR APT / SUITE #: CITY: Corpus Christi STATE: TX ZIP CODE: 78408

8 CAMPAIGN TREASURER PHONE
AREA CODE: (361) PHONE NUMBER: 877-8742 EXTENSION:

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 $500 limit ☐ Final report (Attach C/OH - FR)

10 PERIOD COVERED
Month Day Year: August 15 2014 THROUGH Month Day Year: SEPTEMBER 26 2014

11 ELECTION
ELECTION DATE Month Day Year: Nov 4 2014
ELECTION TYPE ☐ Primary ☐ Runoff ☑ General ☐ Special

12 OFFICE
OFFICE HELD (if any): N/A
13 OFFICE SOUGHT (if known): MAYOR

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INDEXED

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Lee McGinnis

15 ACCOUNT # (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

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

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	$ 180.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 380.00
EXPENDITURE TOTALS	3	TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ 155.00
	4.	TOTAL POLITICAL EXPENDITURES	$ 322.11
CONTRIBUTION BALANCE	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 157.89
OUTSTANDING LOAN TOTALS	6	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0.00

18 AFFIDAVIT

NOTARY PUBLIC STATE OF TEXAS
PAUL PIERCE
Notary Public
STATE OF TEXAS
My Comm. Exp. 04-16-2018

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Lee McGinnis, this the 8th day of October, 20 14, to certify which, witness my hand and seal of office

Signature of officer administering oath | Printed name of officer administering oath: Paul Pierce | Title of officer administering oath: Asst. City Sec. / Notary Public

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 1

2 FILER NAME: LEE N. McGINNIS

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#) / 6 Contributor address City State Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
8/28/14	DEBORAH Noble McGINNIS #4102 809 DERY CC TX 78408		Business Cards (If travel outside of Texas, complete Schedule T)

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

Date	Full name of contributor ☐ out-of-state PAC (ID#) / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/10/14	DEBORAH Noble McGINNIS 809 DERY #4102 CC TX 78408		TEE-SHIRTS (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#) / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/15/2014	DEBORAH Noble McGINNIS 809 DERY #4102 CC TX 78408	$100.00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Public SAFETY DISPATCHER	CC INTERNATIONAL AIRPORT

Date	Full name of contributor ☐ out-of-state PAC (ID#) / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/21/2014	MARK Hebner 15202 REALES CC TX 78418	$100.00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
SALES REP	CONDIT Company

Date	Full name of contributor ☐ out-of-state PAC (ID#) / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
			(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 foradditional reporting requirements.

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
1	LEE N McGINNIS	

4 Date	5 Payee name
8/15/2014	CITY OF CORPUS CHRISTI

6 Amount ($)	7 Payee address; City; State, Zip Code
$100.00	1201 Leopard ST Corpus Christi TX 78401

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	FEES	Filing FEE

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	LEE N. McGINNIS	MAYOR	N/A

Date	Payee name
09/02/2014	UNITED STATES POSTAL SERVICE

Amount ($)	Payee address; City; State; Zip Code
$67.11	4801 EVERHART RD. CC TX 78411

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	OTHER (MAIL BOX)	P.O. BOX

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	LEE McGINNIS	MAYOR	N/A

Date	Payee name

Amount ($)	Payee address; City; State; Zip Code

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)

Complete ONLY 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 (If travel outside of Texas, complete Schedule T)

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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