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

Date Filed 7/15/16

Rebecca Huerta

Rebecca Huerta
City Secretary

Date Hand-delivered or Date Postmarked

Receipt # | Amount $

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: MR	FIRST: CHAD	MI:	NICKNAME:	LAST: MAGILL / SUFFIX:
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ Change of Address	ADDRESS / PO BOX; 641 Texas Ave	APT / SUITE #;	CITY; Corpus Christi	STATE; TX	ZIP CODE 78404
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (361)	PHONE NUMBER 792 0332	EXTENSION		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR: MR	FIRST: LARRY	MI:	NICKNAME:	LAST: ELIZONDO / SUFFIX:
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 5102 Holly Rd Ste B	APT / SUITE #;	CITY; Corpus Christi	STATE; TX	ZIP CODE 78411
8 CAMPAIGN TREASURER PHONE	AREA CODE (361)	PHONE NUMBER 792 0332	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: 1 / 1 / 2016 THROUGH Month / Day / Year: 6 / 30 / 2016

11 ELECTION

ELECTION DATE: Month / Day / Year: / /

ELECTION TYPE: ☐ Primary ☐ Runoff ☐ Other Description ☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any): City Council At-Large

13 OFFICE SOUGHT (if known):

GO TO PAGE 2

INDEXED

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME

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

☐ 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	$ Itemized
2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 40,375.00

EXPENDITURE TOTALS

3.	TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ Itemized
4.	**TOTAL POLITICAL EXPENDITURES**	$ 5,354.01

CONTRIBUTION BALANCE

5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 93,092.98

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
MARY ANN PENA
Notary Public
STATE OF TEXAS
My Comm. Exp. 01-28-2018

AFFIX NOTARY STAMP / SEAL ABOVE

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.

Chad Magill

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Chad Magill, this the 15th day of July, 2016, to certify which, witness my hand and seal of office.

Mary Ann Peña	Mary Ann Peña	Notary Public
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

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. ☐ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$ 40,375.00
2. ☐ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$ 0.00
3. ☐ SCHEDULE B: PLEDGED CONTRIBUTIONS	$ 0.00
4. ☐ SCHEDULE E: LOANS	$ 0.00
5. ☐ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$ 5354.01
6. ☐ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	$ 0.00
7. ☐ SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	$ 0.00
8. ☐ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	$ 0.00
9. ☐ SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	$ 0.00
10. ☐ SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	$ 0.00
11. ☐ SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$ 0.00
12. ☐ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	$ 0.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

Itemized

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Itemized

2 FILER NAME CHAD MAGILL

3 Filer ID (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 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor ☐ 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 ☐ 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 ☐ 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.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

Itemized

The Instruction Guide explains how to complete this form.	**1** Total pages Schedule A2: Itemized
2 FILER NAME CHAD MAGILL	**3** Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS	$

5 Date	**6** Full name of contributor ☐ out-of-state PAC (ID#:_____) **7** Contributor address; City; State; Zip Code	**8** Amount of Contribution $	**9** In-kind contribution description ☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)	**11** Employer (FOR NON-JUDICIAL) (See Instructions)
12 Contributor's principal occupation (FOR JUDICIAL)	**13** Contributor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)	**15** Law firm of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) Contributor address; City; State; Zip Code	Amount of Contribution $	In-kind contribution description ☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employer (FOR NON-JUDICIAL) (See Instructions)
Contributor's principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See Instructions)
Contributor's employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B: NONE

2 FILER NAME CHAD MAGILL

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED PLEDGES $

5 Date	6 Full name of pledgor ☐ out-of-state PAC (ID#:_____)	8 Amount of Pledge $	9 In-kind contribution description
	7 Pledgor address; City; State; Zip Code	☐ Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (See Instructions)		11 Employer (See Instructions)	

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____)	Amount of Pledge $	In-kind contribution description
	Pledgor address; City; State; Zip Code	☐ Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____)	Amount of Pledge $	In-kind contribution description
	Pledgor address; City; State; Zip Code	☐ Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____)	Amount of Pledge $	In-kind contribution description
	Pledgor address; City; State; Zip Code	☐ Check 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.

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E: NONE

2 FILER NAME: CHAD MAGILL

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS $

5 Date of loan

6 Is lender a financial Institution? Y N

7 Name of lender ☐ out-of-state PAC (ID#:_____)

8 Lender address; City; State; Zip Code

9 Loan Amount ($)

10 Interest rate

11 Maturity date

12 Principal occupation / Job title (See Instructions)

13 Employer (See Instructions)

14 Description of Collateral ☐ none

15 Check if personal funds were deposited into political account (See Instructions) ☐

16 GUARANTOR INFORMATION ☐ not applicable

17 Name of guarantor

18 Guarantor address; City; State; Zip Code

19 Amount Guaranteed ($)

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

Name of lender ☐ out-of-state PAC (ID#:_____)

Loan Amount ($)

Is lender a financial Institution? Y N

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral ☐ none

Check if personal funds were deposited into political account (See Instructions) ☐

GUARANTOR INFORMATION ☐ not applicable

Name of guarantor

Guarantor address; City; State; Zip Code

Amount Guaranteed ($)

Principal Occupation (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

See Itemized

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By Candidate/Officeholder/Political Committee
Credit Card Payment
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 CHAD MAGILL	**3** Filer ID (Ethics Commission Filers)
4 Date	**5** Payee name	
6 Amount ($)	**7** Payee address; City; State; Zip Code	
8 **PURPOSE OF EXPENDITURE**	**(a)** Category (See Categories listed at the top of this schedule)	**(b)** Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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	Payee name	
Amount ($)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense
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 ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(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 F2:	**2** FILER NAME CHAD MAGILL	**3** Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		$ 0.00
5 Date	**6** Payee name	
7 Amount ($)	**8** Payee address; City; State; Zip Code	
9 TYPE OF EXPENDITURE	☐ Political ☐ Non-Political	
10 PURPOSE OF EXPENDITURE	**(a)** Category (See Categories listed at the top of this schedule)	**(b)** Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense
11 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	
TYPE OF EXPENDITURE	☐ Political ☐ Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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

PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F3

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F3: NONE

2 FILER NAME CHAD MAGILL

3 Filer ID (Ethics Commission Filers)

4 Date

5 Name of person from whom investment is purchased

6 Address of person from whom investment is purchased; City; State; Zip Code

7 Description of investment

8 Amount of investment ($)

Date

Name of person from whom investment is purchased

Address of person from whom investment is purchased; City; State; Zip Code

Description of investment

Amount of investment ($)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 F4:	**2** FILER NAME CHAD MAGILL	**3** Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		$ 0.00
5 Date	**6** Payee name	
7 Amount ($)	**8** Payee address; City; State; Zip Code	
9 TYPE OF EXPENDITURE	☐ Political ☐ Non-Political	
10 PURPOSE OF EXPENDITURE	**(a)** Category (See Categories listed at the top of this schedule)	**(b)** Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense
11 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	
TYPE OF EXPENDITURE	☐ Political ☐ Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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 PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By Candidate/Officeholder/Political Committee
Credit Card Payment
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 G:	**2** FILER NAME CHAD MAGILL	**3** Filer ID (Ethics Commission Filers)
4 Date	**5** Payee name	
6 Amount ($) ☐ Reimbursement from political contributions intended	**7** Payee address; City; State; Zip Code	
8 **PURPOSE OF EXPENDITURE**	**(a)** Category (See Categories listed at the top of this schedule)	**(b)** Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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	Payee name	
Amount ($) ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	**(b)** Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date	Payee name	
Amount ($) ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	**(b)** Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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

PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

See Itemized

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By Candidate/Officeholder/Political Committee
Credit Card Payment
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 H:	2 FILER NAME CHAD MAGILL	3 Filer ID (Ethics Commission Filers)
4 Date	5 Business name	
6 Amount ($)	7 Business address; City; State; Zip Code	
8 **PURPOSE OF EXPENDITURE**	(a) Category (See Categories listed at the top of this schedule)	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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	Business name	
Amount ($)	Business address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date	Business name	
Amount ($)	Business address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

NONE

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I:	**2** FILER NAME CHAD MAGILL	**3** Filer ID (Ethics Commission Filers)
4 Date	**5** Payee name	
6 Amount ($)	**7** Payee address; City; State; Zip Code	
8 **PURPOSE OF EXPENDITURE**	**(a)** Category (See instructions for examples of acceptable categories.)	**(b)** Description (See instructions regarding type of information required.)
Date	Payee name	
Amount ($)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount ($)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount ($)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K: NONE

2 FILER NAME CHAD MAGILL

3 Filer ID (Ethics Commission Filers)

4 Date	5 Name of person from whom amount is received 6 Address of person from whom amount is received; City; State; Zip Code	8 Amount ($)
	7 Purpose for which amount is received ☐ Check if political contribution returned to filer	

Date	Name of person from whom amount is received Address of person from whom amount is received; City; State; Zip Code	Amount ($)
	Purpose for which amount is received ☐ Check if political contribution returned to filer	

Date	Name of person from whom amount is received Address of person from whom amount is received; City; State; Zip Code	Amount ($)
	Purpose for which amount is received ☐ Check if political contribution returned to filer	

Date	Name of person from whom amount is received Address of person from whom amount is received; City; State; Zip Code	Amount ($)
	Purpose for which amount is received ☐ Check if political contribution returned to filer	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.

1 Total pages Schedule T: NONE

2 FILER NAME CHAD MAGILL

3 Filer ID (Ethics Commission Filers)

4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

5 Contribution / Expenditure reported on:

☐ Schedule A2 ☐ Schedule B ☐ Schedule B(J) ☐ Schedule C2 ☐ Schedule D ☐ Schedule F1
☐ Schedule F2 ☐ Schedule F4 ☐ Schedule G ☐ Schedule H ☐ Schedule COH-UC ☐ Schedule B-SS

6 Dates of travel

7 Name of person(s) traveling

8 Departure city or name of departure location

9 Destination city or name of destination location

10 Means of transportation

11 Purpose of travel (including name of conference, seminar, or other event)

Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:

☐ Schedule A2 ☐ Schedule B ☐ Schedule B(J) ☐ Schedule C2 ☐ Schedule D ☐ Schedule F1
☐ Schedule F2 ☐ Schedule F4 ☐ Schedule G ☐ Schedule H ☐ Schedule COH-UC ☐ Schedule B-SS

Dates of travel

Name of person(s) traveling

Departure city or name of departure location

Destination city or name of destination location

Means of transportation

Purpose of travel (including name of conference, seminar, or other event)

Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:

☐ Schedule A2 ☐ Schedule B ☐ Schedule B(J) ☐ Schedule C2 ☐ Schedule D ☐ Schedule F1
☐ Schedule F2 ☐ Schedule F4 ☐ Schedule G ☐ Schedule H ☐ Schedule COH-UC ☐ Schedule B-SS

Dates of travel

Name of person(s) traveling

Departure city or name of departure location

Destination city or name of destination location

Means of transportation

Purpose of travel (including name of conference, seminar, or other event)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Contributor		Amount	Address	City	State	Zip
Karleen & Kyle Pape	1/15/2016	250.00	1801 Hosea Ct	Corpus Christi	TX	78418
Carter Tate	2/24/2016	250.00	13710 Primavera Dr	Corpus Christi	TX	78418
R Johnson	2/24/2016	100.00	4409 Sue Circle	Corpus Christi	TX	78410
Kimberly & Gene Cran	3/8/2016	100.00	4901 Ocean Drive	Corpus Christi	TX	78412
Yvette & Randy Maldonado	3/17/2016	500.00	6301 King Trail	Corpus Christi	TX	78414
Freese And Nichols PAC	3/23/2016	250.00	4055 International Plaza	Fort Worth	TX	76109
Amy & Brant Aggus	3/31/2016	50.00	1818 Hosea Ct	Corpus Christi	TX	78418
CCPOA	4/12/2016	250.00	3122 Leopard St	Corpus Christi	TX	78408
Ronald Guzman	4/18/2016	250.00	6129 Hastings Dr	Corpus Christi	TX	78414
Christopher Carlisle	4/25/2016	250.00	418 Cape Cod	Corpus Christi	TX	78412
Joe & Phyllis Threatt	4/26/2016	25.00	216 Michael St	Hutchins	TX	75141
Mr or Mrs David P Engel	5/2/2016	1000.00	230 Amistad	Corpus Christi	TX	78404
Orion Drilling	5/6/2016	5000.00	674 Flato Rd	Corpus Christi	TX	78405
Ernest Garza	5/7/2016	500.00	10201 Leopard Ste A	Corpus Christi	TX	78410
Kamlesh Bhika	5/8/2016	250.00	5224 IH37	Corpus Christi	TX	78407
Gabriel Guerra	5/9/2016	500.00	5710 Neustadt	Corpus Christi	TX	78414
Chris Clark	6/1/2016	2500.00	6229 Leopard St	Corpus Christi	TX	78409
Kathy Rouqette	6/1/2016	50.00	1714 Lesle Ln	Corpus Christi	TX	78412
Douglas Allison	6/3/2016	2500.00	4920 Ocean Drive	Corpus Christi	TX	78412
Phillip Skrobarcyk	6/8/2016	600.00	1102 Second St	Corpus Christi	TX	78404
Benny Mota	6/9/2016	600.00	4454 Naples Street	Corpus Christi	TX	78415
LAN-PAC	6/10/2016	750.00	2925 Briarpark Dr	Houston	TX	77042
Richard Groomer	6/10/2016	1000.00	9801 McCullough	San Antonio	TX	78216
Linebarger Goggan Blair & Sampson	6/13/2016	1500.00	PO Box 17428	Austin	TX	78760
Robert Parker	6/13/2016	1500.00	PO Box 9316	Corpus Christi	TX	78469
Lisa & Daniel Dibble	6/16/2016	250.00	7537 Beau Terre	Corpus Christi	TX	78414
Raymond Lucas	6/16/2016	250.00	323 Twisted Wood	San Antonio	TX	78216
Bradley S Lomax	6/17/2016	250.00	309 Water St	Corpus Christi	TX	78401
Turner Ramirez	6/17/2016	2500.00	5525 S Staples A7	Corpus Christi	TX	78411

PMG Retail & Entertainment	6/20/2016	600.00	16035 University Oak	San Antonio	TX	78249
Pro Tech Mechanical	6/20/2016	1500.00	6346 Harwick Dr	Corpus Christi	TX	78417
The Pet Nanny	6/20/2016	600.00	4833 Saratoga # 727	Corpus Christi	TX	78413
Cervantes Electric	6/21/2016	300.00	5109 Springbrook Dr	Corpus Christi	TX	78413
Diane LaRue	6/21/2016	300.00	PO Box 331477	Corpus Christi	TX	78463
Lacey & Jeremy Baugh	6/22/2016	250.00	15325 Lazio Ct	Corpus Christi	TX	78410
Pete McRae	6/22/2016	500.00	PO Box 2454	Georgetown	TX	78627
Raul Ortiz	6/23/2016	1000.00	102 Airport Rd	Corpus Christi	TX	78405
Phillip Skrobarcyk	6/24/2016	1000.00	1102 Second St	Corpus Christi	TX	78404
Israel Garcia	6/27/2016	100.00	4833 Saratoga Box 193	Corpus Christi	TX	78413
Rudy Garza	6/27/2016	200.00	6221 Michaux	Corpus Christi	TX	78414
Salazar Investments	6/27/2016	250.00	2434 Sacky Dr	Corpus Christi	TX	78415
Deborah & Scot Oshman	6/28/2016	500.00	1342 Sandpiper Dr	Corpus Christi	TX	78418
Don Feferman	6/28/2016	250.00	615 N Upper Broadway 650	Corpus Christi	TX	78401
K&M Premier RE	6/28/2016	750.00	7009 Staples St 102	Corpus Christi	TX	78413
Lisa & Peter Matl	6/28/2016	500.00	3355 San Antonio St	Corpus Christi	TX	78411
Olga Garcia	6/28/2016	500.00	15321 Cruiser St B	Corpus Christi	TX	78418
Ashley-Marie & Zachary Gingrich	6/29/2016	500.00	14501 Compass #123	Corpus Christi	TX	78418
Govind Development	6/29/2016	2500.00	PO Box 271127	Corpus Christi	TX	78427
Tabitha & Donald Clark	6/29/2016	500.00	6425 Coronation	Corpus Christi	TX	78412
Dan Leyendecker	6/30/2016	2500.00	14702 Santa Gertrudis	Corpus Christi	TX	78410
Dr R Bryan Gulley DDS	6/30/2016	500.00	6421 Saratoga 101	Corpus Christi	TX	78414
Dr. Kusumakar & Bhakti Sooda	6/30/2016	500.00	3 Great Lakes Circle	Corpus Christi	TX	78413
Mark & Rachel Garza	6/30/2016	500.00	4833 Saratoga Ste 612	Corpus Christi	TX	78413
TOTAL FUNDRAISING as of 6/30/2016:		$ 40,375.00				

Vendor	Date	Amount	Category/Purpose
MAJIC RPG	1/4/2016	$ 400.00	Advertising Expense
American Bank	1/15/2016	$ 8.00	Accounting/Banking Expense
PRINTSQUICK	1/29/2016	$ 58.73	Advertising Expense
INSTXFER APP	2/8/2016	$ 39.80	Advertising Expense APP R&D
Westside Business Association Breakfast Sponsor	2/12/2016	$ 150.00	Event Expense - Supporting WBA
American Bank	2/15/2016	$ 8.00	Accounting/Banking Expense
Garibaldi's	2/29/2016	$ 226.00	Event Expense - Campaign Announcement
Thomas Holbein	3/4/2016	$ 200.00	Advertising Expense
MOTC	3/7/2016	$ 347.24	Advertising Expense - Printing
INSTXFER APP	3/7/2016	$ 39.80	Advertising Expense APP R&D
Democracy Engine Fee	3/17/2016	$ 3.95	Online Donation Transaction Fee
INSTXFER APP	4/6/2016	$ 39.80	Advertising Expense APP R&D
GPRINT	4/12/2016	$ 118.71	Event Expense - Printing
American Bank	4/15/2016	$ 8.00	Accounting/Banking Expense
BLSCOMO1446308	4/26/2016	$ 738.00	Advertising Expense
Google Play Dev	5/2/2016	$ 25.00	Advertising Expense - App Store Developer
Apple Store Dev	5/2/2016	$ 107.17	Advertising Expense - App Store Developer
Democracy Engine Fee	5/5/2016	$ 10.70	Online Donation Transaction Fee
INSTXFER APP	5/6/2016	$ 39.80	Advertising Expense APP R&D
Democracy Engine Fee	5/12/2016	$ 28.52	Online Donation Transaction Fee
GPRINT	5/12/2016	$ 52.00	Online Donation Transaction Fee
BOMA	5/12/2016	$ 50.00	Event Expense - Supporting BOMA
American Bank	5/15/2016	$ 8.00	Accounting/Banking Expense
GPRINT	5/16/2016	$ 326.80	Event Expense - Printing Town Hall MTGs
ANMTO	6/3/2016	$ 237.60	Advertising Expense APP R&D
INSTXFER APP	6/6/2016	$ 39.80	Advertising Expense APP R&D
Democracy Engine Fee	6/9/2016	$ 96.02	Online Donation Transaction Fee
Democracy Engine Fee	6/16/2016	$ 60.40	Online Donation Transaction Fee
Democracy Engine Fee	6/23/2016	$ 66.02	Online Donation Transaction Fee
American Bank	6/15/2016	$ 8.00	Accounting/Banking Expense
WalMart	6/28/2016	$ 94.77	Event Expense - Golf Tournament
HobbyLobby	6/24/2016	$ 36.74	Event Expense - Golf Tournament
AcademySports	6/27/2016	$ 360.80	Event Expense - Golf Tournament
WalMart	6/28/2016	$ 94.77	Event Expense - Golf Tournament
River Hills CC	6/30/2016	$ 945.07	Event Expense - Golf Tournament
Michael Saldana	6/30/2016	$ 80.00	Event Expense - Golf Tournament
David Mendez	6/30/2016	$ 200.00	Event Expense - Golf Tournament
TOTAL EXPENSES as of 6/30/2016		$ 5,354.01	