

# 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>5</b>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR      FIRST      MI NICKNAME      LAST      SUFFIX <b>Clint C Burgess</b>	<b>OFFICE USE ONLY</b> <b>POSTMARK</b> <b>JUL 15 2015</b> BY: <b>ALM</b> FRANK PHILLIPS ELECTIONS ADMINISTRATOR 2015 JUL 16 AM 11:06 TARRANT COUNTY FILED	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX:    APT / SUITE #:    CITY:    STATE:    ZIP CODE		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE      PHONE NUMBER      EXTENSION (      )		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR      FIRST      MI NICKNAME      LAST      SUFFIX <b>Pamela G Hammer</b>		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);    APT / SUITE #;    CITY;    STATE;    ZIP CODE		
8 CAMPAIGN TREASURER PHONE	AREA CODE      PHONE NUMBER      EXTENSION (      )		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month    Day    Year      THROUGH      Month    Day    Year <b>1 / 1 / 15</b> <b>6 / 30 / 15</b>		
11 ELECTION	ELECTION DATE Month    Day    Year /    /	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) <b>Constable Pct 7</b>	13 OFFICE SOUGHT (if known)	

**GO TO PAGE 2**

**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

**FORM C/OH  
COVER SHEET PG 2**

14 C/OH NAME Clint C Burgess 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.

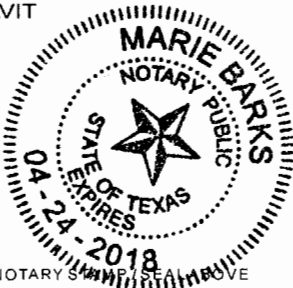
COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	
<input type="checkbox"/> SPECIFIC	
COMMITTEE ADDRESS	
COMMITTEE CAMPAIGN TREASURER NAME	
COMMITTEE CAMPAIGN TREASURER ADDRESS	

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 2015 JUL 16 AM 11:06  
 FRANK PHILLIPS  
 ELECTIONS ADMINISTRATOR

Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 0
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 86,113
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

18 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.

*[Signature]*  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Clint Burgess, this the 15<sup>th</sup> day of July, 2015, to certify which, witness my hand and seal of office.

*[Signature]*  
Signature of officer administering oath

Marie Barks  
Printed name of officer administering oath

*[Signature]*  
Title of officer administering oath

**SUBTOTALS - COH**

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

<b>19 FILER NAME</b> <i>Clint Burgess</i>		<b>20 Filer ID (Ethics Commission Filers)</b>
<b>21 SCHEDULE SUBTOTALS</b>	<b>NAME OF SCHEDULE</b>	<b>SUBTOTAL AMOUNT</b>
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 0
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ 0
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 153,36
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 0
8.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 0
9.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
10.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
11.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

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**TARRANT COUNTY**  
**2015 JUL 16 AM 11:06**  
**FRANK PHILLIPS**  
**ELECTIONS ADMINISTRATOR**  
 BY: \_\_\_\_\_

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## 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 Expenses |
| 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)    |

The Instruction Guide explains how to complete this form.

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 2015 JUL 15 AM 11:06  
 FRANK PHILLIPS  
 ELECTIONS ADMINISTRATOR

1 Total pages Schedule F1: <b>2</b>	2 FILER NAME <b>Clint C. Burgess</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>1/30/15</b>	5 Payee name <b>Godaddy</b>	
6 Amount (\$) <b>25.56</b>	7 Payee address; City; State; Zip Code <b>14455 N. Hayden Rd Scottsdale, Arizona 85260</b>	
8  PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>Websites Monthly Service Fees</b>

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>2/30/15</b>	Payee name <b>Godaddy</b>
Amount (\$) <b>25.56</b>	Payee address; City; State; Zip Code <b>14455 N. Hayden Rd Scottsdale, Arizona 85260</b>
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>
	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>Websites monthly Service Fees</b>

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>3/30/15</b>	Payee name <b>Go daddy</b>
Amount (\$) <b>25.56</b>	Payee address; City; State; Zip Code <b>14455 N. Hayden Rd Scottsdale, Arizona 85260</b>
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>
	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>Websites monthly Service Fees</b>

Complete <u>ONLY</u> 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 FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

FILED  
 TARRANT COUNTY  
 2015 JUL 16 AM 11:06  
 FRANK PHILLIPS  
 ELECTIONS ADMINISTRATOR

1 Total pages Schedule F1: <b>2</b>	2 FILER NAME <b>Clint C. Burgess</b>	3 Filer ID (Ethics Commission File #)
4 Date <b>4/30/15</b>	5 Payee name <b>Godaddy</b>	
6 Amount (\$) <b>25.56</b>	7 Payee address; City; State; Zip Code <b>14455 N. Hayden Rd Scottsdale, Arizona 85260</b>	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>Websites Monthly Service Fees</b>

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>5/30/15</b>	Payee name <b>Godaddy</b>	
Amount (\$) <b>25.56</b>	Payee address; City; State; Zip Code <b>14455 N. Hayden Rd Scottsdale, Arizona 85260</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>Websites Monthly Service Fees</b>

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>6/30/15</b>	Payee name <b>Go daddy</b>	
Amount (\$) <b>25.56</b>	Payee address; City; State; Zip Code <b>14455 N. Hayden Rd Scottsdale, Arizona 85260</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>Websites Monthly Service Fees</b>

Complete <u>ONLY</u> 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

Clint Burgess

Manstield TX 76063



1000



76111

U.S. POSTAGE  
PAID  
MANFIELD, TX  
70803  
JUL 15, 15  
AMOUNT  
**\$4.65**  
00111745-02

Tarrant County Elections  
Attn: Pamela Flow G/Off Report

2700 Premier Street  
Fort Worth, Texas

76111