CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST	MI	OFFICE USE ONLY
NAME	Mr. Bill	E.	Date
	NICKNAME LAST	SUFFIX	JUL 1 5 2015
	Waybourn		JUL 1 J ZUIJ
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX: APT / SUITE #: C	ITY; STATE; ZIP CODE	TARRA 2015 JUL ELECTIONS
Change of Address			
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER	EXTENSION	
6 CAMPAIGN TREASURER	MS / MRS / MR FIRST	MI	Receipt #20 - Amodal \$
NAME	Ms. Taya		Date Processed
	NICKNAME LAST	SUFFIX	Date Imaged
	Kyle		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SU	NTE #; CITY; STATE;	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER	EXTENSION	
9 REPORT TYPE	January 15 30th day before ek	ection Runoff	15th day after campaign treasurer appointment (Officeholder Only)
	July 15 🛛 8th day before elec	ction Exceeded \$500 limit	Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year	Month	Day Year
	01 / 01 / 2015	THROUGH 06	30 / 2015
11 ELECTION	ELECTION DATE		
	Month Day Year 🗹 Primary	Runoff Other Description	
	3 1 2016 General	Special	an act and any strategy and the company and and any and and any and any and a strategy and any and any and any
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known	
		Sheriff	
	GO TO	PAGE 2	······································

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

14 C/OH NAME		15 File	er 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	
	GENERAL		- m
		COMMITTEE ADDRESS	TARRAN 2015 JUL 1 2015 JUL 1 LECTIONS A
Additional Pages		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	T AM II: 23
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 982.71
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 12,409.88
EXPENDITURE TOTALS		POLITICAL EXPENDITURES OF \$100 OR LESS, S ITEMIZED	\$ (<u>68.00</u>
	4. TOTAL	POLITICAL EXPENDITURES	\$ <u>(8, ∞</u>
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY PORTING PERIOD	\$ 12,91 9 .63
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD	\$ \$

AFFIDAVIT

DAVID S. MCCLELLAND Notary Public, State of Texas My Commission Expires March 15, 2016

true and correct and includes all information required to be reported by me under Title 15, Election Code.

I swear, or affirm, under penalty of perjury, that the accompanying report is

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEALABOVE		
Sworn to and subscribed before me, by the	e said BILL WAYBOURN	, this the14
day of JULY, 20_15_, to c	ertify which, witness my hand and seal of office.	
Will A. Millelle	DAVID MCLELLAND	NOTARY PUBLIC
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

SUBTOTALS - COH

FORM C/OH COVER SHEET PG 3

19 FILER N		20 Filer ID (Ethics Co	mmission Filers)
B	IL WAYBOURN		
21 SCHEDU	JLE SUBTOTALS F SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 11,427. IT
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE E: LOANS		\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUT	IONS	\$ 68.00
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIB	UTIONS	\$
8.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$
9.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINE	SS OF C/OH	\$
10.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	ONTRIBUTIONS	\$
11.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIC RETURNED TO FILER	DNS	\$
		ELECTIONS ADMINISTRATOR	

MONETA	ARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Ins	struction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME	Bill Waybourn	3 Filer ID (Ethics Commission Filers)
	Full name of contributor	7 Amount of contribution (\$)
	BOBBY HARDIN Contributor address; City; State; Zip Code Todos 1713 MELANIE TR., MIDLOTHIAN TX	\$96.8D
	tion / Job title (See Instructions) 9 Employer (See Instructions)	tions)
Date	Full name of contributor	Amount of contribution (\$)
5/14	CRAIG DRISKELL Contributor address; City; State; Zip Code 903 BURLWOOD DR., ARL., TX 76016	\$970.70
Principal occupati	ion / Job title (See Instructions) Employer (See Instruc CLEAT	tions)
Date	Full name of contributor	Amount of contribution (\$)
5/14	LESLIE HILLITOUSE Contributor address; City; State: Zip Code 5532 MARSH LN., GRAPEVINE, TX 76051	\$96.80
	ion / Job title (See Instructions) Employer (See Instructions)	tions)
Date	Full name of contributor out-of-state PAC (ID#)	Amount of contribution (\$)
5/14	VICKIE MCCORMICK Contributor address; City; State; Zip Code 32218 11701 PALM LAKE#1815, JACKSON VILLE, R	#72.52
Principal occupat	ion / Job title (See Instructions) Employer (See Instructions)	tions)
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS N If contributor is out-of-state PAC, please see instruction guide for additional	

MONE	TARY POLITICAL CONTRIBUTIONS	SCHEDULE A1	
The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:	
2 FILER NAME	Bill Waybourn	3 Filer ID (Ethics Commission Filers)	
4 Date	5 Full name of contributor 🔲 out-of-state PAC (ID#:)	7 Amount of contribution (\$)	
5/14	JERRY VENNUM 6 Contributor address; City; State; Zip Code	\$485.20	
9 Dringinglago	3405 HIDDEN PINES, ARL., TX 76016		
DP	Jupation / Job title (See Instructions) 9 Employer (See Instructions)	tions)	
Date	Full name of contributor [] out-of-state PAC (ID#:) MEL BIRDWELL	Amount of contribution (\$)	
5/14	Contributor address; City; State; Zip Code	\$ 485.20	
	1602 CATALINA BAY, GRANBURY, TX	-	
Principal occu	pation / Job title (See Instructions) Employer (See Instruct	lions)	
Date	Full name of contributor [] out-of-state PAC (ID#:)	Amount of contribution (\$)	
5/14	JIM PARRISH Contributor address; City; State; Zip Code 140 TEKAS, PORTALES, NM 88130	\$242.45	
Principal occu	pation / Job title (See Instructions) Employer (See Instructions)	tions)	
Date	Full name of contributor	Amount of contribution (\$)	
5/14	MARK SHELTON Contributor address; City; State; Zip Code 3318 ROSSEVELT, ARL., TX 7606	#96.80	
	pation / Job title (See Instructions) Employer (See Instructions)	tions)	
	CTOR		
		TARRANT CO. 2015 JUL 17 AM ELECTIONS ADMINIS BY:	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

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MONET	ARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 5
2 FILER NAME	Bill Waybourn	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)
5/15	DEBBIE ANDERSON 6 Contributor address; City; State; Zip Code	#242.45
8 Principal occu	807 EVERGREEN GT., KELLER, TX 76248 pation / Job title (See Instructions) 9 Employer (See Instruct	
Date	Full name of contributor 🔲 out-of-state PAC (ID#:)	Amount of contribution (\$)
-1	MICHELLE BROWN	lt
5/15	Contributor address; City; State; Zip Code	\$ 96.80
	7425 JAMIE RENEE, FORT WORTH, TX	
	Dent Dent Dent Dent Dent Dent Dent Dent	tions)
Date	Full name of contributor	
5/16	TONY ARBELAEZ Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal accur	6705 FLAMEWOOD, ARLINGTON, TX 7600	tions)
	pation / Job title (See Instructions) Employer (See Instructions)	
Date	Full name of contributor [] out-of-state PAC (ID#:)	Amount of contribution (\$)
5/16	Contributor address; City; State; Zip Code	\$96.80
	3213 23RD ST., LUBBOCK, TX 79410	14.0-
Principal occu	pation / Job title (See Instructions) Employer (See Instructions)	tions)
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS N	TARRANT COUN 2015 JUL 17 AN 11: ELECTIONS ADMINISTRA BY:
	If contributor is out-of-state PAC, please see instruction guide for additional	I reporting requirements

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1				
The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:	
2 FILER NAME	Bill Waybourn		3 Filer ID (Ethics Commission Filers)	
4 Date	5 Full name of contributor Out-of-state PAC RODNEY WAYBOURN	(ID#:)	7 Amount of contribution (\$)	
5/16	6 Contributor address; City; State; 8540 GARY CT., N. RICHLANI	-2110-1	#485.20	
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instruc	tions)	
Date		(ID#:)	Amount of contribution (\$)	
5/18	NICK SELBY Contributor address; City; State; Hosts 4621 S. COOPER, SUITE	Zip Code 76017 131, ARL. 7x	# 242.45	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruct STREET CI	-	
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)	
5/20	TY TIPTON Contributor address; City; State; P.O. Box 1622, EULESS, 7		#485.20	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	tions)	
Date	Full name of contributor Out-of-state PAC	(ID#:)	Amount of contribution (\$)	
5/22		Zip Code ZIO48 BURG, MD	#96.80	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	tions)	
	ATTACH ADDITIONAL COPIES O	F THIS SCHEDULE AS N	TARRANT COUNTY 2015 JUL 17 AM II: 23 ELECTIONS ADMINISTRATOR BY:	
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.				

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MONE	TARY POLITICAL CONTRIBUTIONS	SCHEDULE A1		
The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:		
2 FILER NAME	Bill Waybourn	3 Filer ID (Ethics Commission Filers)		
4 Date	5 Full name of contributor	7 Amount of contribution (\$)		
5/24	LARRY TRAMMELL 6 Contributor address; City; State; Zip Code 92/21	\$ 970.70		
8 Principal occu	UHDS MIRA MESA #250, SAN DIEGO, CA upation / Job title (See Instructions) 9 Employer (See Instructions)	tions)		
Date	Full name of contributor Image: out-of-state PAC (ID#:) Vacable Sculor	Amount of contribution (\$)		
6/24	KAREN SCHROEDER Contributor address; City; State; Zip Code P.O. Box 170053, ARL, TX 76003	\$96.80		
Principal occu	pation / Job title (See Instructions) Employer (See Instructions)	tions)		
Date	Full name of contributor [] out-of-state PAC (ID#:) JAMES MOORE	Amount of contribution (\$)		
6/29	Contributor address; City; State; Zip Code 3311 DOTT LANE, ARL., TX 76001	\$970.70		
Principal occu	pation / Job title (See Instructions) Employer (See Instructions)	ctions)		
Date	Full name of contributor 🛛 out-of-state PAC (ID#:)	Amount of contribution (\$)		
5/22	Contributor address; City; State; Zip Code	\$ 5,000.00		
Principal occu	2913 PORT ROSE, LEAGUE CITY, TX 77573 pation / Job title (See Instructions) Employer (See Instructions)			
000	NER Z TEXAS (AU SHIELO		
		TARRAI 2015 JUL ELECTIONS BY:		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				
Forms provided by	Texas Ethics Commission www.ethics.state.tx.us	S Revised 02/27/2015		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica	Fees Office Food/Beverage Expense Pollir y Gift/Awards/Memorials Expense Printi	e Overhead/Rental Expense ng Expense ng Expense	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 BILL WAYBOURN	3	Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	2	<u> </u>
3/24	THE REAGAN LEGAC	Y REPUBLICA	IN CUB
6 Amount (\$)	7 Payee address; City; State; Zip Coc	jel	
68.00	P.O. Box 174431, ARLIN	UGTON, TX	16003
8	(a) Category (See categories listed at the top of this schedule) (b) Description	
PURPOSE OF EXPENDITURE	EVENT EXPENSE		tside of Texas, complete Schedule T X, officeholder living expense
9 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 Coo	ie	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule	Check if travel out	side of Texas, complete Schedule T X, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	TAR
Date	Payee name		ANT CO
Amount (\$)	Payee address; City; State; Zip Coo	de .	ED COUNTY An 11:23 HILLIPS HINISTRATOR
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule	Check if travel out	side of Téxas, complete Schedule T X, 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			

Forms provided by Texas Ethics Commission





First Class Mail

Waybourn For Sheriff

TO: Pam Flow 2700 Premier Street Fort Worth, Texas 76111

