CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The CIOH Instruction Guide explains how to complete this form. 1 ACCOUNT # (Elbhas Commission Free) 2 Total pages filed: 3 CANDIDATE / OFFICEHOLDER NAME Mr. Clint IVES 4 CANDIDATE / OFFICEHOLDER NORTH NICOSIAME 4 CANDIDATE / OFFICEHOLDER NICOSIAME 5 CANDIDATE / OFFICEHOLDER NICOSIAME 6 CAMPAIGN TREASURER NAME 7 CAMPAIGN TREASURER NAME 8 CAMPAIGN TREASURER NORMS NORDEOX PLASSE. APT (SUITE #. CITY. STATE. ZIP CODE. NICOSIAME 8 CAMPAIGN TREASURER NORMS NORDEOX PLASSE. APT (SUITE #. CITY. STATE. ZIP CODE. NICOSIAME 8 CAMPAIGN TREASURER NORMS NORDEOX PLASSE. APT (SUITE #. CITY. STATE. ZIP CODE. NICOSIAME 9 STREET ADDRESS (NORDEOX PLASSE). APT (SUITE #. CITY. STATE. ZIP CODE. NICOSIAME 10 Date Imaged 10 Date Imaged 10 Date Imaged 10 Date Imaged 11 Date Imaged 12 TX 77968 13 CAMPAIGN TREASURER NORMS NORDEOX PLASSE. APT (SUITE #. CITY. STATE. ZIP CODE. Image. NICOSIAME 14 CANDIDATE / OFFICE HOLDER PLONE NUMBER 15 CAMPAIGN TREASURER NORMS NORDEOX PLASSE. APT (SUITE #. CITY. STATE. ZIP CODE. Image. TX 77968 10 PERIOD 11 Date Imaged 12 OFFICE NORMS NORDEOX PLASSE. APT (SUITE #. CITY. STATE. ZIP CODE. Image. TX 77968 14 CAMPAIGN TREASURER NORMS NORDEOX PLASSE. APT (SUITE #. CITY. STATE. ZIP CODE. Image. TX 77968 15 CAMPAIGN TREASURER NORMS NORDEOX PLASSE. APT (SUITE #. CITY. STATE. ZIP CODE. Image. TX 77968 16 CAMPAIGN TREASURER NORMS NORDEOX PLASSE. APT (SUITE #. CITY. STATE. ZIP CODE. Image. TX 77968 17 CAMPAIGN TREASURER NORMS NORDEOX PLASSE. APT (SUITE #. CITY. STATE. ZIP CODE. Image. TX 77968 18 CAMPAIGN TREASURER NORMS NORDEOX PLASSE. APT (SUITE #. CITY. STATE. ZIP CODE. Image. TX 77968 19 REPORT TYPE 10 July 15						
OFFICEHOLDER NAME Mr. Clint LOST	The C/OH Instruction	2 Total pages filed:				
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S CANDIDATE/ OFFICEHOLDER (361) 649-2068 6 CAMPAIGN TREASURER NAME Mrs. Nancy L L NILIVIVES 7 CAMPAIGN TREASURER ADDRESS (residence or business) 8 CAMPAIGN TREASURER ADDRESS (residence or business) 9 REPORT TYPE M January 15	MAILING	PO BOX 533 Inez	TX 77968	Date Hand-delivered or Postmarked		
OFFICEHOLDER PHONE (361) 649-2068 Date Processed Date Proc	change of address			Receipt # Amount		
PHONE 6 CAMPAIGN TREASURER NAME Mrs. Nancy L NUII/Ives 7 CAMPAIGN TREASURER ADDRESS (residence or business) 8 CAMPAIGN TREASURER ADDRESS (residence or business) 9 REPORT TYPE AREA CODE January 15 Sth day before election July 15 Sth day before election Street election Street ADDRESS (residence or business) 9 REPORT TYPE January 15 Sth day before election Street ADDRESS STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE#: CITY: STATE ZIP CODE TYPE AREA CODE PHONE NUMBER EXTENSION 15th day after campaign treasurer appointment (officons/sor orly) I sth day before election I street campaign treasurer appointment (officons/sor orly) I sth day before election I street campaign treasurer appointment (officons/sor orly) I sth day after campaign treasurer appointment (officons/sor orly) I sth day before election I street campaign treasurer appointment (officons/sor orly) I sth day after campaign treasurer appointment (officons/sor orly) I sth day after campaign treasurer appointment (officons/sor orly) I sth day after campaign treasurer appointment (officons/sor orly) I sth day after campaign treasurer appointment (officons/sor orly) I sth day after campaign treasurer appointment (officons/sor orly) I sth day after campaign treasurer appointment (officons/sor orly) I sth day after campaign treasurer appointment (officons/sor orly) I sth day after campaign treasurer appointment (officons/sor orly) I sth day after campaign treasurer appointment (officons/sor orly) I sth day after campaign treasurer appointment (officons/sor orly) I sth day after campaign treasurer appointment (officons/sor orly) I sth day after campaign treasurer appointment (officons/sor orly) I sth day after campaign treasurer appointment (officons/sor orly) I sth day after campaign treasurer appointment (officons/sor orly) I sth day after campaign treasurer appointment (officons/sor orly) I sth day after campaign treasurer appointment (officons/sor orly) I sth day after campaign treasurer appointment (officons/sor orly) I standard Treasurer appoin			EXTENSION	Date Processed		
TREASURER NAME Mrs. Nancy Last Suffix Null/Ives 7 CAMPAIGN TREASURER ADDRESS (NOPOBOX PLEASE): APT/SUITE#: CITY: STATE ZIPCODE 7 CAMPAIGN TREASURER ADDRESS (residence or business) 8 CAMPAIGN TREASURER PHONE 8 CAMPAIGN (361) 576-0638 9 REPORT TYPE AREA CODE PHONE NUMBER EXTENSION 9 REPORT TYPE ADDRESS (361) 576-0638 9 REPORT TYPE ADDRESS (361) 576-0638 10 PERIOD Exceeded \$500 Final report (Attach C/CH - FR) 10 PERIOD THROUGH ADDRESS (APT/SUITE#: CITY: STATE ZIPCODE TYPE ADDRESS (Residence or business) 10 PERIOD THROUGH ADDRESS (NO POBOX PLEASE): APT/SUITE#: CITY: STATE ZIPCODE TYPE ADDRESS (Residence or business) 11 ELECTION ADDRESS (NO POBOX PLEASE): APT/SUITE#: CITY: STATE ZIPCODE TYPE ADDRESS (Residence or business) 12 OFFICE 13 OFFICE SOUGHT (# Mover) Victoria County Commissioner		(361) 649-2068				
NAME Mrs. Nancy Last Suffix Null/Ives 7 CAMPAIGN TREASURER ADDRESS (No POBOX PLEASE); APT/SUITE#; CITY; STATE; ZIP CODE 9 S79 J-2 Ranch Rd Inez TX 77968 8 CAMPAIGN TREASURER PHONE 9 REPORT TYPE January 15 January 15 South day before election Runoff Isth day after campaign treasurer appointment (officertoking orby) July 15 Sth day before election Exceeded \$500 Final report (Attach C/OH - FR) 10 PERIOD COVERED 11 ELECTION Month Day Year THROUGH 12 OFFICE OFFICEHELD (frany) Victoria County Commissioner Null/Ives CITY: STATE: ZIP CODE TX 77968 EXTENSION Runoff EXTENSION Final report (Attach C/OH - FR) Individual State of the company of the c	E .	MS/MRS/MR FIRST	MI	Date Imaged		
TREASURER ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE, ZIP CODE TREASURER ADDRESS (residence or business) 9579 J-2 Ranch Rd Inez TX 77968 8 CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION PHONE AREA CODE PHONE NUMBER EXTENSION PHONE AREA CODE PHONE NUMBER EXTENSION PHONE July 15 Sth day before election Runoff treasurer appointment (official-older only) July 15 Sth day before election Exceeded \$500 Final report (Attach C/OH - FR) 10 PERIOD COVERED North Day Year THROUGH THROUGH THROUGH Phinary Runoff General Special 12 OFFICE OFFICE HELD (Ifany) Victoria County Commissioner			SUFFIX			
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January 15 30th day before election Runoff treasurer appointment (officeholder only) July 15 8th day before election Exceeded \$500 Final report (Attach C/OH - FR) North Dey Year THROUGH 12/31/13 11 ELECTION ELECTIONDATE Primary Runoff General Special 12 OFFICE OFFICE HELD (if any) Victoria County Commissioner	TREASURER		EXTENSION			
July 15	9 REPORT TYPE	January 15 30th day before election	Runoff	treasurer appointment		
THROUGH 12/31/13 11 ELECTION Month ELECTION DATE ELECTION TYPE Primary Runoff General Special 12 OFFICE OFFICE HELD (if any) Victoria County Commissioner		July 15 8th day before election				
Month Day Year Primary Runoff General Special 12 OFFICE OFFICE HELD (if any) Victoria County Commissioner		1				
Victoria County Commissioner	11 ELECTION	Month Day Year	Runoff	General Special		
I I	12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)			
		·				
GO TO PAGE 2						

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME		15 /	CCOUNT # (Ethics Commission Filers)	
16 NOTICE FROM POLITICAL COMMITTEE(S)	CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE (
	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL SPECIFIC	COMMITTEE ADDRESS		
	<u>.</u>	COMMITTEE CAMPAIGN TREASURER NAME		
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS	1/1/1	
		COMMITTEE CAME AGN TREASURER ADDRESS		
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	
	· ·	POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$1,675.00	
EXPENDITURE TOTALS	· · · · · · · · · · · · · · · · · · ·			
	4. TOTAL	POLITICAL EXPENDITURES	\$2,845.75	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$1693.18			
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD	\$	
18 AFFIDAVIT	KAY L. PO MY COMMISSION March 17,	N EXPIRES L	mation required to be reported by	
Sworn to and sub		me, by the said $\frac{ClintC.tves}{Rg, 20 14}$, to certify which, witness my l	, this the	
$\frac{977}{4}$ day	of Janua	. /		
Signature of officer admi	inistering cath	Printed name of officer administering path	Title of officer administering oath	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The	Instruction Guide explains how to complete this	1 Total pages Schedule A:				
2 FILER NAME Clint C. Ives			3 ACCOUNT # (Ethics Commission Filers)			
4 Date	Full name of contributor out-of-state PAC (ID#:		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
12/16/13	Jon R. New 6 Contributor address; City; State; Zip Code		\$250.00	description (if applicable)		
	PO Box 1247 Victoria, TX	77902		 		
			(If travel outside	of Texas, complete Schedule T)		
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See	Instructions)			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of	In-kind contribution		
Date	D D' 1		contribution (\$)	description (if applicable)		
404-40	Ron Dickson			1 1		
12/17/13	Contributor address; City; State; ZipCode 305		\$200.00	 		
	Buckingham Victoria, TX	77904	(If travel outside o	of Texas, complete Schedule T)		
Principal occu	pation / Job title (See Instructions)	Employer (See I	nstructions)			
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
12/16/13	Gene Migura Contributor address; City; State; Zip Code 105		\$25.00			
	Kreekview Victoria, TX	77904	(If travel outside	of Texas, complete Schedule T)		
Principal occuj	pation / Job title (See Instructions)	Employer (See I	nstructions)			
Date	Full name of contributor out-of-state PAC (ID#		Amount of	In-kind contribution		
	VA/ Duma manufacture		contribution (\$)	description (if applicable)		
12/17/13	W.Brzozowske Contributor address; City; State; Zip Code 205 Whispering		\$100.00	 		
	Creek Dr Victoria, TX	77904	(If travel outside	of Texas, complete Schedule T)		
Principal occu	pation / Job title (See Instructions)	Employer (See I		or rocks, compete concede 17		
Date	Full name of contributor out-of-state PAC (ID#:	,	Amount of	In-kind contribution		
			contribution (\$)	description (if applicable)		
12/17/13	Bette-Jo Buhler Contributor address; City; State; Zip Code		\$50.00			
	8607 N Navaro					
	Victoria TX	X 77904				
	Suit IVI		· · · · · · · · · · · · · · · · · · ·	of Texas, complete Schedule T)		
Principal occu	pation / Job title (See Instructions)	Employer (See I	instructions)			
			· 			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

(TDD 1-800-735-2989) (512) 463-5800 Austin, Texas 78711-2070 **Texas Ethics Commission** P.O. Box 12070 POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 Total pages Schedule A: The Instruction Guide explains how to complete this form. 3 ACCOUNT # (Ethics Commission Filers) 2 FILER NAME Clint C. Ives 4 Date Full name of contributor Amount of In-kind contribution Out-of-state PAC (ID#: description (if applicable) contribution (\$) Ruschhaupt & Sons 12/19/13 6 Contributor address; City; State; Zip Code \$100.00 8444 Lower Mission Valley Rd Victoria, TX 77905 (If travel outside of Texas, complete Schedule T) 10 Employer (See Instructions) 9 Principal occupation / Job title (See Instructions) Full name of contributor In-kind contribution Amount of Date contribution (\$) description (if applicable) Robert McKay 12/18/13 Contributor address; City; State; ZipCode \$50.00 303 Victoria, TX 77904 Leisure Ln (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) In-kind contribution Full name of contributor ut-of-state PAC (ID# Amount of Date description (if applicable) contribution (\$) Sharon Steen 12/14/13 City; State; Zip Code Contributor address; \$50.00 508 Victoria, TX 77901 N. Glass (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Full name of contributor In-kind contribution Amount of Out-of-state PAC (ID# contribution (\$) description (if applicable) Mark Zafereo 12/14/13 City; State; Zip Code Contributor address: \$100.00 Kreekview Dr Victoria, TX 77904 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Full name of contributor In-kind contribution Amount of Date out-of-state PAC (ID#: description (if applicable) contribution (\$) Milton Chapman 12/14/13 Contributor address; City; State; Zip Code \$50.00

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide foradditional reporting requirements.

Employer (See Instructions)

Canyon Creek Victoria, TX 77901

(If travel outside of Texas, complete Schedule T)

217

Principal occupation / Job title (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A:		
2 FILER NAME Clint C. Ives			3 ACCOUNT # (Ethics Commission Filers)		
4 Date	Full name of contributor out-of-state PAC (ID#_		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
12/14/13	6 Contributor address; City; State; Zip Code		\$50.00	 	
	N. Glass Victoria,	TX 77901	(If travel outside	of Texas, complete Schedule T)	
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See I			
Date	Full name of contributor	bell	Amount of contribution (\$)	In-kind contribution description (if applicable)	
12/16/13	Contributor address; City; State; ZipCode 213		\$100.00	 	
	Woodlands Ln Victoria, TX	X 77904	(If travel outside o	of Texas, complete Schedule T)	
Principal occup	pation / Job title (See Instructions)	Employer (See I	nstructions)		
Date	Full name of contributor out-of-state PAC (ID#:		Amount of contribution (\$)	In-kind contribution description (if applicable)	
12/13/13	John McQuillen Contributor address; City; State; Zip Code 402		\$100.00	 	
	Windy Way Dr. Victoria, T	TX 77904	(If travel outside o	of Texas, complete Schedule T)	
Principal occup	pation / Job title (See Instructions)	Employer (See I	nstructions)		
Date	Full name of contributor out-of-state PAC (ID#		Amount of	In-kind contribution	
12/14/13	Morgan Dunn O'Connor		s100.00	description (if applicable)	
	Contributor address; City; State; Zip Code		\$100.00	· 	
	PO Box 290 Victoria, TX	77902			
				of Texas, complete Schedule T)	
Principal occup	eation / Job title (See Instructions)	Employer (See II	nstructions)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of	In-kind contribution	
12/21/13	Janet Miller		contribution (\$)	description (if applicable)	
	Contributor address; City; State; Zip Code 6040 Country		\$200.00		
	Club Dr Victoria, TX	77904	()	A Towns assessment to Out and the Th	
Principal occup	eation / Job title (See Instructions)	Employer (See In		of Texas, complete Schedule T)	
		L			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

P.O. Box 12070

SCHEDULE A

The	Instruction Guide explains how to complete this	form.	1 Total pages Sch	nedule A:		
2 FILER NAME	Clint C. Ives		3 ACCOUNT # (E	thics Commission Filers)		
4 Date	Full name of contributor out-of-state PAC (ID#_Dr. John McNeill)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
12/26/13	6 Contributor address; City; State; Zip Code PO Box 3446 Victoria,	ГХ 77903	\$100.00	 		
			(If travel outside	of Texas, complete Schedule T)		
9 Principal occuj	pation / Job title (See Instructions)	10 Employer (See I	Instructions)			
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
12/30/13	Contributor address; City; State; ZipCode 106		\$50.00			
	Professional Park Victoria,	TX 77904				
				of Texas, complete Schedule T)		
Principal occuj	pation / Job title (See Instructions)	Employer (See I	instructions)			
Date	Full name of contributor ut-of-state PAC (ID#	,	Amount of	In-kind contribution		
Date	Tourname of contributor	· · · · · · · · · · · · · · · · · · ·	contribution (\$)	description (if applicable)		
				1		
	Contributor address; City; State; Zip Code					
Dringing! goog	potion / Joh title (Con Instructions)	Employee (Co. I	· · · · · · · · · · · · · · · · · · ·	of Texas, complete Schedule T)		
Principal occup	pation / Job title (See Instructions)	Employer (See I	nstructions)			
Date	Full name of contributor out-of-state PAC (ID#:	, 1	Amount of	In-kind contribution		
Date	out-or-state PAC (ID#		contribution (\$)	description (if applicable)		
				i I		
	Contributor address; City; State; Zip Code			•		
			46.4			
Principal occur	pation / Job title (See Instructions)	Employer (See I		of Texas, complete Schedule T)		
	,		,			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of	In-kind contribution		
			contribution (\$)	description (if applicable)		
				' 		
	Contributor address City; State; Zip Code] 		
			(If travel outside	of Texas, complete Schedule T)		
Principal occur	pation / Job title (See Instructions)	Employer (See I	•	or reside, complete constants ()		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense **Event Expense** Fees

Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense

Polling Expense **Printing Expense** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Travel Out Of District Office Overhead/Rental Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)

(512) 463-5800

The Instruction Guide explains how to complete this form.

EXPENDITURE CATEGORIES FOR BOX 8(a)

	The Instruc	ction Guide explains how to	complete this form.	
1 Total pages Schedule G:	2 FILER NAME Clint C. Ives			3 ACCOUNT # (Ethics Commission Filers)
4 Date 9/14/13	5 Payee name Howell NJH	S		
\$50.00 Reimbursement from political contributions intended	7 Payee address;	City; State; Zip Code Victoria, TX 77	7901	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories Advertising	listed at the top of this schedule)	(b) Description (If the Advertising	ravel outside of Texas, complete ScheduleT)
Date 9/14/13	Payee name Inez Comm	Benefit Assoc.		
Amount (\$) 20.00 Reimbursement from political contributions intended	Payee address;	City; State; Zip Code Inez TX 77968		
PURPOSE OF EXPENDITURE	Category (See categories Advertising	listed at the top of this schedule)	Description (If the Advertising Advertisin	ravel outside of Texas, complete ScheduleT)
Date 9/14/13	Payee name Inex Volunte	eer Fire Depmt.		
Amount (\$) 450.00 Reimbursement from political contributions intended	Payee address;	City; State; Zip Code Inez, TX 77968	3	
PURPOSE OF EXPENDITURE	Category (See categories Avertising	listed at the top of this schedule)	Advertisin	ng
Date 11/18/13	Payee name Victoria Cou	ınty Republican	Party	
Amount (\$) \$750.00 Reimbursement from political contributions intended	Payee address;	City; State; Zip Code Victoria, TX 77	7901	
PURPOSE OF EXPENDITURE	Category (See categories Filing Fee	listed at the top of this schedule)	Description (If the Filling Fee	ravel outside of Texas, complete Schedule T)
	ATTACH ADDI	TIONAL COPIES OF THIS S	SCHEDULE AS NEE	EDED

Revised 04/19/2013

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gift/Awards/Memorials Expense Legal Services

Food/Beverage Expense **Polling Expense** Printing Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Travel Out Of District Office Overhead/Rental Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By
Candidate/Officeholder/Political Committee

OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

The instruc	ction Guide explains how to	complete this form.	
2 FILER NAME Clint C. Ives			3 ACCOUNT # (Ethics Commission Filers)
5 Payee name Boy Scout T	roop 368		
7 Payee address;	City; State; Zip Code		
	Victoria, TX 7	7904	
(a) Category (See categories	listed at the top of this schedule)	(b) Description (If to	ravel outside of Texas, complete ScheduleT)
Avertising		Fund Raiser	r Donation
Payee name Inez Vol. Fi	re Department		
Payee address;	City; State; Zip Code		
	Inez, TX 7796	8	
Category (See categories	s listed at the top of this schedule)	Description (If t	ravel outside of Texas, complete ScheduleT)
Avertising		Fund Rai	ser Donation
Payee name St. Joseph C	atholic Church		
Payee address;	City; State; Zip Code		
	Victoria, TX 7	7901	
Category (See categories	s listed at the top of this schedule)	Description (If t	travel outside of Texas, complete ScheduleT)
Advertising		Fund Rai	ser Donation
Payee name		A section of the sect	
Industrial Junior High Band Booster			
Payee address;	City; State; Zip Code Inez, TX 7796	8	
Catagony (See esternio	e listed at the top of this echadule)	Description (#1	travel outside of Texas, complete Schedule T)
Category (see categories	s nation at the top of this sociedate)	,	auto. Calaido di Tondo, compidio dandado 17
A .1		E1 D -:	gor Donation
Advertising		Fund Rai	ser Donation
	2 FILER NAME Clint C. Ives 5 Payee name Boy Scout T 7 Payee address; (a) Category (See categories Avertising Payee name Inez Vol. Fit Payee address; Category (See categories Avertising Payee name St. Joseph C Payee address; Category (See categories Advertising Payee address;	2 FILER NAME Clint C. Ives 5 Payee name Boy Scout Troop 368 7 Payee address; City; State; Zip Code Victoria, TX 7 (a) Category (See categories listed at the top of this schedule) Avertising Payee name Inez Vol. Fire Department Payee address; City; State; Zip Code Inez, TX 7796 Category (See categories listed at the top of this schedule) Avertising Payee name St. Joseph Catholic Church Payee address; City; State; Zip Code Victoria, TX 7 Category (See categories listed at the top of this schedule) Advertising Payee name Industrial Junior High Band Payee address; City; State; Zip Code	Clint C. Ives 5 Payee name Boy Scout Troop 368 7 Payee address; City; State; Zip Code Victoria, TX 77904 (a) Category (See categories listed at the top of this schedule) Avertising Payee name Inez Vol. Fire Department Payee address; City; State; Zip Code Inez, TX 77968 Category (See categories listed at the top of this schedule) Avertising Payee name St. Joseph Catholic Church Payee address; City; State; Zip Code Victoria, TX 77901 Category (See categories listed at the top of this schedule) Advertising Payee name Industrial Junior High Band Booster Payee address; City; State; Zip Code Inez, TX 77968

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Salaries/Wages/Contract Labor

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

Advertising Expense

Gift/Awards/Memorials Expense

SCHEDULE G

Loan Repayment/Reimbursement

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Legal Services Solic Food/Beverage Expense Trav Polling Expense Trav	citation/Fundraising Expense rel In District rel Out Of District ce Overhead/Rental Expens	Contributions/Donations Made By Candidate/Officeholder/Political Committee
	The Instruction Guide expl	ains how to complete th	is form.
1 Total pages Schedule G:	2 FILER NAME Clint C. Ives		3 ACCOUNT # (Ethics Commission Filers)
4 Date 10/25/13	5 Payee name Wood-Hi Elementary	Booster	
\$225.00 Reimbursement from political contributions intended	7 Payee address; City; State; Victoria	Zip Code , TX 77904	
8 PURPOSE	(a) Category (See categories listed at the top of this	schedule) (b) Descri	ption (If travel outside of Texas, complete ScheduleT)
OF EXPENDITURE	Avertising	Fund I	Raiser Donation
Date 9/7/13	Payee name Inez Vol. Fire Departs	ment	
Amount (\$) \$100.00 Reimbursement from political contributions intended	Payee address; City; State; Inez, T	Zip Code	
PURPOSE	Category (See categories listed at the top of this	schedule) Descri	ption (If travel outside of Texas, complete ScheduleT)
OF EXPENDITURE	Avertising	Fun	d Raiser Donation
Date 11/12/13	Payee name Mercer Photography		
Amount (\$) \$663.99 Reimbursement from political contributions intended	Payee address; City; State;	·	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this Advertising	Cam	ption (If travel outside of Texas, complete ScheduleT) npaign Family photo, sitting, ting of mailers and release.
Date 12/12/13	Payee name Office Depot		
Amount (\$) \$141.76 Reimbursement from political contributions intended	Payee address; City; State; Victoria	Zip Code , TX 77904	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this Advertising		ption (If travel outside of Texas, complete Schedule T) els, printing, stamps /mailer
	ATTACH ADDITIONAL COPIE	S OF THIS SCHEDULE	AS NEEDED

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