

**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 | 2 Total pages filed: 19 |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR | FIRST Constance | MI MI |
| | NICKNAME | LAST Johnson | SUFFIX |
| OFFICE USE ONLY | | | |
| Date Received FEB 05 2018 | | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; 214 S. Main St. Victoria, TX 77901 | | ZIP CODE |
| | Date Hand-delivered or Date Postmarked | | |
| | Receipt # | Amount | |
| | Date Processed | | |
| Date Imaged | | | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR | FIRST Amanda | MI Krejci |
| | NICKNAME | LAST Roessler | SUFFIX |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1700 FM 622 Victoria TX 77905 | | |
| | | | |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE (361) | PHONE NUMBER 571-1555 | EXTENSION |
| | | | |
| 8 REPORT TYPE | <input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) | | |
| | <input 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) | | |
| 9 PERIOD COVERED | Month | Day | Year |
| | 01/01/2018 | THROUGH | 01/25/2018 |
| 10 ELECTION | ELECTION DATE Month Day Year 03/06/2018 | | ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special |
| | | | |
| 11 OFFICE | OFFICE HELD (if any) | | 12 OFFICE SOUGHT (if known) Criminal District Attorney Place Victoria Co |
| | | | |

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

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

2 of 19

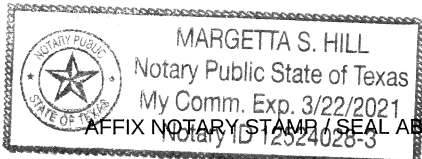
| | |
|--|--------------------|
| 13 C / OH NAME Johnson, Constance | 14 Filer ID |
|--|--------------------|

| | | | |
|---|--|----------------|--|
| 15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages | This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. | | |
| <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC | COMMITTEE TYPE | COMMITTEE NAME | |
| | COMMITTEE ADDRESS | | |
| | COMMITTEE CAMPAIGN TREASURER NAME | | |
| | COMMITTEE CAMPAIGN TREASURER ADDRESS | | |

| | | | | |
|--------------------------------|----|--|----|-----------|
| 16 CONTRIBUTION TOTALS | 1. | TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | \$ | 3,310.00 |
| | 2. | TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 12,610.00 |
| EXPENDITURE TOTALS | 3. | TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED | \$ | 255.12 |
| | 4. | TOTAL POLITICAL EXPENDITURES | \$ | 11,781.97 |
| CONTRIBUTION BALANCE | 5. | TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 16,870.16 |
| OUTSTANDING LOAN TOTALS | 6. | TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 0.00 |

17 AFFADAVIT

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.



AFFIX NOTARY STAMP / SEAL ABOVE

Constance Johnson

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Constance Filley Johnson, this the 5th day of February, 2018, to certify which, witness my hand and seal of office.

Margetta Hill

Signature of officer administering

Margetta Hill

Printed name of officer administering

Notary

Title of officer administering oath

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

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| | | |
|--|---|--------------------|
| 18 FILER NAME Johnson, Constance | | 19 Filer ID |
| 20 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 11,660.00 |
| 2. | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ 950.00 |
| 3. | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ |
| 4. | <input type="checkbox"/> SCHEDULE E: LOANS | \$ |
| 5. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 11,781.97 |
| 6. | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 7. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ |
| 8. | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ |
| 9. | <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | \$ |
| 10. | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ |
| 11. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 12. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/5 Rpt: 4/19 |
| 2 FILER NAME Johnson, Constance | | 3 Filer ID |
| 4 Date 01/14/2018 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broussard, Norris <hr/> 6 Contributor address; City; State; Zip Code 107 Longfellow Victoria, TX 77904 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) |
| Date 01/10/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charbula, Davy <hr/> Contributor address; City; State; Zip Code P.O. Box 425 Edna, TX 77957 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) Private Investigator | | Employer (See Instructions) |
| Date 01/19/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Costas, Elliot <hr/> Contributor address; City; State; Zip Code P.O Box 4647 Victoria, TX 77903 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/14/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ernst, JoAnn <hr/> Contributor address; City; State; Zip Code 202 Whispering Creek Victoria, TX 77904 | Amount of Contribution (\$) \$200.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 01/04/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Filley, Michael <hr/> Contributor address; City; State; Zip Code 13019 Sherbourne Austin, TX 78729 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/5 Rpt: 5/19 |
| 2 FILER NAME Johnson, Constance | | 3 Filer ID |
| 4 Date 01/22/2018 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fontenot, Karl | 7 Amount of Contribution (\$) \$1,000.00 |
| 6 Contributor address; City; State; Zip Code P.O. Box 3570 Victoria, TX 77903 | | |
| 8 Principal occupation / Job title (See Instructions) Business Owner | | 9 Employer (See Instructions) |
| Date 01/14/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hauboldt, Charles | Amount of Contribution (\$) \$250.00 |
| Contributor address; City; State; Zip Code 209 Woodridge Victoria, TX 77904 | | |
| Principal occupation / Job title (See Instructions) Business Owner | | Employer (See Instructions) |
| Date 01/12/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Frank | Amount of Contribution (\$) \$3,000.00 |
| Contributor address; City; State; Zip Code P.O. Box 366 Victoria, TX 77902 | | |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/14/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jirkovsky, Donald | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code P.O. Box 4945 Victoria, TX 77903 | | |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) |
| Date 01/14/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mabray, Amy Zuniga | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code 220 Wearden Victoria, TX 77904 | | |
| Principal occupation / Job title (See Instructions) Paralegal | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/5 Rpt: 6/19 |
| 2 FILER NAME Johnson, Constance | | 3 Filer ID |
| 4 Date 01/10/2018 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Machicek, Eddie | 7 Amount of Contribution (\$) \$100.00 |
| 6 Contributor address; City; State; Zip Code 201 Longfellow Victoria, TX 77904 | | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) |
| Date 01/09/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Gene | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code 2001 W. McCarty Lane Austin, TX 78666 | | |
| Principal occupation / Job title (See Instructions) Social Worker | | Employer (See Instructions) |
| Date 01/14/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Lisa | Amount of Contribution (\$) \$250.00 |
| Contributor address; City; State; Zip Code 504 Turtle Rock Victoria, TX 77904 | | |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/14/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Amanda | Amount of Contribution (\$) \$250.00 |
| Contributor address; City; State; Zip Code P.O. Box 4807 Victoria, TX 77903 | | |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/19/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyna, Nilda | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code 2601 N. Azalea, Ste 6 Victoria, TX 77901 | | |
| Principal occupation / Job title (See Instructions) Owner | | Employer (See Instructions) Reyna Secretarial Services |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/5 Rpt: 7/19 |
| 2 FILER NAME Johnson, Constance | | 3 Filer ID |
| 4 Date 01/14/2018 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Sharon | 7 Amount of Contribution (\$) \$400.00 |
| 6 Contributor address; City; State; Zip Code 111 Suzanne Lane Victoria, TX 77901 | | |
| 8 Principal occupation / Job title (See Instructions) Dispatcher | | 9 Employer (See Instructions) |
| Date 01/14/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ridley, Pauline | Amount of Contribution (\$) \$200.00 |
| Contributor address; City; State; Zip Code 403 Larkspur Victoria, TX 77904 | | |
| Principal occupation / Job title (See Instructions) Radiographer | | Employer (See Instructions) |
| Date 01/14/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scherer, Calvin | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code P.O. Box 2532 Victoria, TX 77902 | | |
| Principal occupation / Job title (See Instructions) Owner | | Employer (See Instructions) Victoria Oliver |
| Date 01/14/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Larissa Harlan | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code 24023 Spring Sunset Spring, TX 77373 | | |
| Principal occupation / Job title (See Instructions) Office Manager | | Employer (See Instructions) |
| Date 01/25/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swanner, Ben | Amount of Contribution (\$) \$200.00 |
| Contributor address; City; State; Zip Code 403 Maplewood Dr. Victoria, TX 77901 | | |
| Principal occupation / Job title (See Instructions) Insurance Salesman | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/5 Rpt: 8/19 |
| 2 FILER NAME Johnson, Constance | | 3 Filer ID |
| 4 Date 01/14/2018 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villafranca, Glenn <hr/> 6 Contributor address; City; State; Zip Code 903 W. Constitution Victoria, TX 77901 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) |
| Date 01/21/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wasicek, L.D. <hr/> Contributor address; City; State; Zip Code 107 Lancaster St. Victoria, TX 77904 | Amount of Contribution (\$) \$400.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 01/23/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkinson, Edward <hr/> Contributor address; City; State; Zip Code 102 Summit View Victoria, TX 77904 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/14/2018 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkinson, Nancy <hr/> Contributor address; City; State; Zip Code 105 Green Way Victoria, TX 77904 | Amount of Contribution (\$) \$200.00 |
| Principal occupation / Job title (See Instructions) Car Dealership Owner | | Employer (See Instructions) |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| | | | |
|--|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2: Sch: 1/1 Rpt: 9/19 | |
| 2 FILER NAME Johnson, Constance | | 3 Filer ID | |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ | |
| 5 Date 01/14/2018 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Familes, Escalante & Villafranca | 8 Amount of contribution (\$) \$950.00 | 9 In-kind contribution description Use of The Club Westerner for BBQ Fundraiser |
| | 7 Contributor address; City; State; Zip Code 1005 W. Constitution Victoria, TX 77901 | | |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Banker / Attorneys | | 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) | | | |

Check if travel outside of Texas. Complete Schedule T.

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 1/9 Rpt: 10/19 | 2 FILER NAME Johnson, Constance | 3 Filer ID |
| 4 Date 01/16/2018 | 5 Payee name Academy | |
| 6 Amount (\$) \$86.59 | 7 Payee address; City; State; Zip Code 8903 N. Navarro Victoria, TX 77904 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event 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 Ice chests and coolers for BBQ event |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/19/2018 | Payee name Cantu, Matt | |
| Amount (\$) \$66.00 | Payee address; City; State; Zip Code 2319 Gin Rd Inez, TX 77968 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event 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 Dehydrated potatoes for BBQ event |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/08/2018 | Payee name Frances Marie's Restaurant | |
| Amount (\$) \$64.96 | Payee address; City; State; Zip Code 2505 Houston Highway Victoria, TX 77901 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Sign Crew |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 2/9 Rpt: 11/19 | 2 FILER NAME Johnson, Constance | 3 Filer ID |
| 4 Date 01/16/2018 | 5 Payee name Gulf Coast Paper Company | |
| 6 Amount (\$) \$224.21 | 7 Payee address; City; State; Zip Code 3705 Houston Highway Victoria, TX 77901 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event 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 Paper goods for BBQ event |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| | Candidate/Officeholder name | Office sought Office held |
| Date 01/12/2018 | Payee name HEB | |
| Amount (\$) \$61.10 | Payee address; City; State; Zip Code 6106 N. Navarro Victoria, TX 77904 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event 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 Groceries for BBQ |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| | Candidate/Officeholder name | Office sought Office held |
| Date 01/16/2018 | Payee name HEB | |
| Amount (\$) \$101.36 | Payee address; City; State; Zip Code 6106 N. Navarro Victoria, TX 77904 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event 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 Groceries for BBQ |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 3/9 Rpt: 12/19 | 2 FILER NAME Johnson, Constance | 3 Filer ID |
| 4 Date 01/12/2018 | 5 Payee name Habitat for Humanity | |
| 6 Amount (\$) \$100.00 | 7 Payee address; City; State; Zip Code 207 N. Glass Victoria, TX 77901 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) 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 Electronic billboard rental |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/02/2018 | Payee name Habitat for Humanity | |
| Amount (\$) \$162.48 | Payee address; City; State; Zip Code 207 N. Glass Victoria, TX 77901 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Annual Fundraiser |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/16/2018 | Payee name Halepaska's Bakery | |
| Amount (\$) \$104.00 | Payee address; City; State; Zip Code 5805 John Stockbauer Dr. Victoria, TX 77904 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event 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 Cakes for BBQ event |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 4/9 Rpt: 13/19 | 2 FILER NAME Johnson, Constance | 3 Filer ID |
| 4 Date 01/16/2018 | 5 Payee name Hobby Lobby | |
| 6 Amount (\$) \$103.84 | 7 Payee address; City; State; Zip Code 8404 N. Navarro Victoria, TX 77904 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event 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 Decorations and supplies for BBQ event |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| | Candidate/Officeholder name | Office sought Office held |
| Date 01/19/2018 | Payee name Industrial Education Foundation | |
| Amount (\$) \$250.00 | Payee address; City; State; Zip Code P.O. Box 369 Vanderbilt, TX 77991 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Maroon Ball Sponsorship |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| | Candidate/Officeholder name | Office sought Office held |
| Date 01/25/2018 | Payee name Multiple entities | |
| Amount (\$) \$255.12 | Payee address; City; State; Zip Code Victoria, TX 77901 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) 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 Multiple unitemized campaign expenses totaling less than \$50 each. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 5/9 Rpt: 14/19 | 2 FILER NAME Johnson, Constance | 3 Filer ID |
| 4 Date 01/19/2018 | 5 Payee name Rapid Printing & Designs | |
| 6 Amount (\$) \$2,976.88 | 7 Payee address; City; State; Zip Code 1708 N. Navarro, Ste. 300 Victoria, TX 77901 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) 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 Road signs |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/22/2018 | Payee name Rapid Printing & Designs | |
| Amount (\$) \$54.13 | Payee address; City; State; Zip Code 1708 N. Navarro, Ste. 300 Victoria, TX 77901 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) 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 Metal posts for yard signs |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/03/2018 | Payee name Rapid Printing & Designs | |
| Amount (\$) \$3,247.50 | Payee address; City; State; Zip Code 1708 N. Navarro, Ste. 300 Victoria, TX 77901 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) 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 Road signs |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Expense |
| 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) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 6/9 Rpt: 15/19 | 2 FILER NAME Johnson, Constance | 3 Filer ID |
| 4 Date 01/04/2018 | 5 Payee name Revista de Victoria | |
| 6 Amount (\$) \$135.00 | 7 Payee address; City; State; Zip Code 2001 E. Sabine Victoria, TX 77901 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) 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 Ad |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/12/2018 | Payee name Sam's Club | |
| Amount (\$) \$779.86 | Payee address; City; State; Zip Code 9202 N. Navarro Victoria, TX 77904 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event 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 Groceries for BBQ |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/04/2018 | Payee name The GOP Store | |
| Amount (\$) \$1,810.60 | Payee address; City; State; Zip Code 404 IH-35 Huntsville, TX 77488 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) 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 Yard signs |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 7/9 Rpt: 16/19 | 2 FILER NAME Johnson, Constance | 3 Filer ID |
| 4 Date 01/08/2018 | 5 Payee name Tractor Supply Company | |
| 6 Amount (\$) \$105.98 | 7 Payee address; City; State; Zip Code 9505 N. Navarro Victoria, TX 77904 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) 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 Supplies: t-posts and driver, zip ties, etc... |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/11/2018 | Payee name Tractor Supply Company | |
| Amount (\$) \$204.68 | Payee address; City; State; Zip Code 9505 N. Navarro Victoria, TX 77904 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) 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 t-posts |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/22/2018 | Payee name University of Houston-Victoria | |
| Amount (\$) \$90.00 | Payee address; City; State; Zip Code 3007 N. Ben Wilson Victoria, TX 77901 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Jaguar Athletics Fundraiser |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 8/9 Rpt: 17/19 | 2 FILER NAME Johnson, Constance | 3 Filer ID |
| 4 Date 01/12/2018 | 5 Payee name Victoria County Health Dept. | |
| 6 Amount (\$) \$100.00 | 7 Payee address; City; State; Zip Code 2805 N. Navarro Victoria, TX 77901 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event 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 Food Permit |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/17/2018 | Payee name Victoria Livestock Show | |
| Amount (\$) \$325.00 | Payee address; City; State; Zip Code P.O. Box 2255 Victoria, TX 77902 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) 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 Booth Rental |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/09/2018 | Payee name Vistaprint | |
| Amount (\$) \$189.98 | Payee address; City; State; Zip Code P.O. Box 842882 Boston, MA 02284-2284 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) 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 Car Magnets |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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 Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 9/9 Rpt: 18/19 | 2 FILER NAME Johnson, Constance | 3 Filer ID |
| 4 Date 01/09/2018 | 5 Payee name Vistaprint | |
| 6 Amount (\$) \$182.70 | 7 Payee address; City; State; Zip Code P.O. Box 842882 Boston, MA 02284-2284 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) 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 Door Hangers |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

TEXT ANNOTATION

Sch: 1/1 Rpt: 19/19

FILER NAME

Johnson, Constance

Filer ID

Schedule

A1

Information entered by filer as a memo:

\$3310: Multiple individual unitemized donations of less than \$50 (BBQ plates sales, etc...)