# 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:

**3 CANDIDATE / OFFICEHOLDER NAME**

MS / MRS / (MR) | FIRST: B RONSON | MI: T | NICKNAME | LAST: TUCKER | SUFFIX

**4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS**

☐ Change of Address

ADDRESS / PO BOX: PO Box 3594 | APT / SUITE #: | CITY: CEDAR PARK, TX | STATE: | ZIP CODE: 78630

**5 CANDIDATE/ OFFICEHOLDER PHONE**

AREA CODE: (512) | PHONE NUMBER: 763-2629 | EXTENSION:

**6 CAMPAIGN TREASURER NAME**

(MS) MRS / MR | FIRST: AMY | MI: L | NICKNAME | LAST: PARKER | SUFFIX

**7 CAMPAIGN TREASURER ADDRESS**
(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE): 4402 SPANISH GOLD LN | APT / SUITE #: | CITY: CEDARPARK, TX | STATE: | ZIP CODE: 78613

**8 CAMPAIGN TREASURER PHONE**

AREA CODE: (940) | PHONE NUMBER: 300-5486 | 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 / 18 THROUGH 1 / 25 / 18

**11 ELECTION**

ELECTION DATE: Month / Day / Year: 3 / 6 / 18

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

**12 OFFICE**

OFFICE HELD (if any):

**13** OFFICE SOUGHT (if known): JUSTICE OF THE PEACE WILLIAMSON CO., PCT 2

**OFFICE USE ONLY**

Date Received

RECEIVED
FEB - 5 2018
10:45am IP LM
WC ELECTIONS

Date Hand-delivered or Date Postmarked

Receipt # | Amount $

Date Processed

Date Imaged

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

**14** C/OH NAME: BRONSON TUCKER

**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 | $ |
| | **2.** | **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | $ 790 |
| EXPENDITURE TOTALS | 3. | TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED | $ 78.54 |
| | **4.** | **TOTAL POLITICAL EXPENDITURES** | $ 2169.26 |
| CONTRIBUTION BALANCE | 5. | TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD | $ 907.98 |
| 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 of Candidate or Officeholder

NOTARY PUBLIC STATE OF TEXAS
ALEETHEA L REITER
Notary ID # 126820564
My Commission Expires
February 27, 2021

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Bronson T. Tucker, this the 5 day of February 20 18, to certify which, witness my hand and seal of office.

Aleethea L. Reiter — Aleethea L. Reiter — 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) |
|---|---|
| BRONSON TUCKER | |

| 21 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | | SUBTOTAL AMOUNT |
|---|---|---|---|
| 1. | [X] | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | $ 790 |
| 2. | [ ] | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | $ |
| 3. | [ ] | SCHEDULE B: PLEDGED CONTRIBUTIONS | $ |
| 4. | [ ] | SCHEDULE E: LOANS | $ |
| 5. | [X] | SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | $ [redacted] 16555 |
| 6. | [ ] | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | $ |
| 7. | [ ] | SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS | $ |
| 8. | [X] | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | $ 509.26 |
| 9. | [ ] | SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS | $ |
| 10. | [ ] | SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | $ |
| 11. | [ ] | SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | $ |
| 12. | [ ] | 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: 2

**2** FILER NAME: BRANSON TUCKER

**3** Filer ID (Ethics Commission Filers):

| 4 Date | 5 Full name of contributor / 6 Contributor address; City; State; Zip Code | 7 Amount of contribution ($) |
|---|---|---|
| 1/3/18 | RENEE HALL<br>209 N GEARY AVE OKC, OK 73104 | $100 |

**8** Principal occupation / Job title (See Instructions):

**9** Employer (See Instructions):

| Date | Full name of contributor / Contributor address; City; State; Zip Code | Amount of contribution ($) |
|---|---|---|
| 1/3/18 | CASEY ROSS<br>13225 EASTVALLEY RD OKC, OK 73170 | $100 |

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

| Date | Full name of contributor / Contributor address; City; State; Zip Code | Amount of contribution ($) |
|---|---|---|
| 1/12/18 | DANIEL DAWSON<br>3245 RIVER WALK DR NASHVILLE TN 37214 | $100 |

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

| Date | Full name of contributor / Contributor address; City; State; Zip Code | Amount of contribution ($) |
|---|---|---|
| 1/12/18 | CAROLYN WADE<br>1923 NW 20 OKC, OK 73106 | $50 |

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.**

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

1 Total pages Schedule A1: 2

2 FILER NAME: BRONSON TUCKER

3 Filer ID (Ethics Commission Filers):

| 4 Date | 5 Full name of contributor / 6 Contributor address; City; State; Zip Code | 7 Amount of contribution ($) | 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
|---|---|---|---|---|
| 1/20 | MARILYN PARKER<br>2826 DOVE MEADOW DR GARLAND, TX 75043 | $250 | | |
| 1/20 | DOTTIE MCDONALD<br>6111-B SHADOW VALLEY DR AUSTIN, TX 78731 | $100 | | |
| 1/19 | NICKI ASHLEY<br>PO BOX 1721 MINERAL WELLS TX 76068 | $40 | | |
| 1/18 | JOSH KOMAREK<br>3806 PINE LAKE CT OWENSBORO KY 42303 | $50 | | |

# POLITICAL EXPENDITURES MADE 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: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
|---|---|---|
| 1 | BRANSON TUCKER | |

| 4 Date | 5 Payee name |
|---|---|
| 1/2/18 | CUSENIM BANK |

| 6 Amount ($) | 7 Payee address; City; State; Zip Code |
|---|---|
| 1600 | PO BOX 659450 SAN ANTONIO, TX 78265 |

| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | CREDIT CARD PAYMENT | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>PAYMENT TO CREDIT CARD |

| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
|---|---|---|---|

| Date | Payee name |
|---|---|
| 1/22 | AMERICAN EXPRESS |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| 55 | PO BOX 650448 DALLAS, TX 75265 |

| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) | Description |
|---|---|---|
| | CREDIT CARD PAYMENT | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>CREDIT CARD PAYMENT |

| 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.<br>☐ 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**

# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(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 |
| | 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 F4: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
|---|---|---|
| 1 [redacted] | BRONSON TUCKER | |
| **4** TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | | $ 78.54 |

| | |
|---|---|
| **5** Date: [redacted] 1/11 | **6** Payee name: LIBERTY HILL INDEPENDENT |
| **7** Amount ($): 160 | **8** Payee address; City; State; Zip Code: 14251 W SH 29, STE B. LIBERTY HILL, TX 78642 |
| **9** TYPE OF EXPENDITURE | ☒ Political ☐ Non-Political |
| **10** PURPOSE OF EXPENDITURE | **(a)** Category (See Categories listed at the top of this schedule): POLITICAL ADVERTISING EXPENSE<br>**(b)** Description: ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense<br>NEWSPAPER AD |
| **11** Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name: Office sought: Office held: |

| | |
|---|---|
| Date: 1/21 | Payee name: HOME DEPOT |
| Amount ($): 270.72 | Payee address; City; State; Zip Code: 2700 E. WHITESTONE CEDAR PARK TX 78613 |
| TYPE OF EXPENDITURE | ☒ Political ☐ Non-Political |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule): ADVERTISING EXPENSE<br>Description: ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense<br>SIGN SUPPLIES |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name: Office sought: Office held: |

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**