

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: <div style="text-align: center; font-size: 2em; color: blue;">10</div>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mr. Elisha L. <small>NICKNAME LAST SUFFIX</small> Demerson	OFFICE USE ONLY	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P. O. Box 7690 Amarillo, Texas 79114	Date Received <div style="font-size: 2em; color: blue; font-weight: bold;">RECEIVED</div> APR 28 2017 CITY SECRETARY'S CITY OF AMARILLO Date Hand-delivered or Date Postmarked	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (806) 881-5194	Receipt # Amount \$ Date Processed Date Imaged	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Donald E. <small>NICKNAME LAST SUFFIX</small> Powell	Date Hand-delivered or Date Postmarked	
7 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 7211 Versailles Amarillo, Texas 79121		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (703) 608-5941		
9 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)		
10 PERIOD COVERED	Month Day Year Month Day Year 04 / 01 / 2017 THROUGH 04 / 28 / 2017		
11 ELECTION	ELECTION DATE Month Day Year 05 / 06 / 2017	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) Amarillo City Council, Place 1	13 OFFICE SOUGHT (if known) Amarillo City Council, Place 1	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME
Elisha L. Demerson L. Demerson

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.

GENERAL
 SPECIFIC

COMMITTEE TYPE

COMMITTEE NAME
Elisha Demerson Reelection Campaign for Amarillo City Council, Place 1

COMMITTEE ADDRESS
P. O. Box 7690 Amarillo, Texas 79114

COMMITTEE CAMPAIGN TREASURER NAME
Donald E. Powell

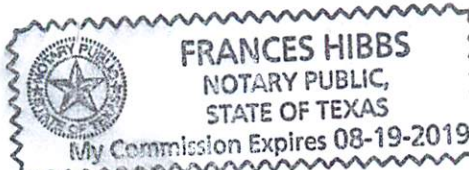
COMMITTEE CAMPAIGN TREASURER ADDRESS
7211 Versailles Amarillo, Texas 79121

Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 450.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 14,000.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 40.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 12,225.33
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 12,560.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 5,000.00

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.



Elisha L. Demerson
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Elisha Demerson, this the 28 day of April, 2017, to certify which, witness my hand and seal of office.

Frances Hibbs Frances Hibbs City Secretary
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Elisha L. Demerson L. Demerson (SEE ATTACHED)		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 6 Contributor address; City; State; Zip Code	7 Amount of contribution (\$)
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
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.

Dr. John B.	Bridwell	1300 S. Jackson St. Apt.1012	Amarillo, Texas 79101	\$	200.00	3/30/2017
Marvin N. & Wilda H.	Willis	5606 Granada	Amarillo, Texas 79109	\$	50.00	3/31/2017
J. Dean	Bedwell	8002 Monticello Ct.	Amarillo, Texas 79119	\$	100.00	3/31/2017
Bishop John C.	Brown	P. O. Box 30632	Amarillo, Texas 79120	\$	300.00	3/31/2017
Roushell and Tommie	Hamilton	606 Carnegie Place	Amarillo, Texas 79107	\$	300.00	3/31/2017
Richard or Eleanor	Woodson	6502 Fulton Drive	Amarillo, Texas 79109	\$	50.00	4/2/2017
Tom	Higley	3812 Paramount Blvd.	Amarillo, Texas 79109	\$	50.00	4/3/2017
Dusty	McGuire	6016 Dreyfuss Road	Amarillo, Texas 79106	\$	50.00	4/3/2017
Mrs. Judy	White	5600 Newt Dobbs Trl	Amarillo, Texas 79118	\$	50.00	4/6/2017
Byron and Vanessa	Miles	611 Carnegie Place	Amarillo, Texas 79107	\$	50.00	4/12/2017
Supt. Eddie	Heath	2000 Northwest 14th	Amarillo, Texas 79107	\$	50.00	4/13/2017
Mr. & Mrs. Jim	Cabbell, Sr.	7716 Whippoorwill	Amarillo, Texas 79121	\$	100.00	4/1/2017
Shirley	Heard	2028 South Austin, #303	Amarillo, Texas 79109	\$	100.00	4/10/2017
Mr. or Mrs. Barry D.	Bedwell	8003 New England Pkwy	Amarillo, Texas 79119	\$	100.00	4/13/2017
Bishop Warren D.	Coble	1308 Northwest 10th Street	Amarillo, Texas 79107	\$	150.00	4/7/2017
Sarah	Ray	6701 Briarwood Drive	Amarillo, Texas 79124	\$	150.00	4/20/2017
William	Attebury	3905 Bell	Amarillo, Texas 79109	\$	200.00	4/5/2017
Mary	Emeny	203 West 8th, Ste. 530	Amarillo, Texas 79101	\$	200.00	4/24/2017
John R. or Sally Birdsong	Skaggs	2601 South Bowie Street	Amarillo, Texas 79109	\$	250.00	4/6/2017
Bowden & Chrislyn	Jones	3713 Lewis Drive	Amarillo, Texas 79109	\$	250.00	4/5/2017
Mark	Bivins	P. O. Box 708	Amarillo, Texas 79105	\$	250.00	4/13/2017
Morris L.	Overstreet	P. O. Box 3576	Prairie View, Texas 77446	\$	500.00	4/1/2017
Mr. or Mrs. J. Pat	Hickman	150 Laural Leaf Lane	Canyon, Texas 79015	\$	500.00	4/7/2017
Janis	Thorne	2409 South Hughes	Amarillo, Texas 79109	\$	500.00	4/19/2017
Paul	Vang	3816 Southwest 6th	Amarillo, Texas 79106	\$	2,000.00	4/19/2017
Thomas W & Inez M	Nielsen	3320 Wentworth Way	Jamul, California 91935	\$	2,500.00	4/1/2017
Perry	Williams	P. O. Box 30206	Amarillo, Texas 79120	\$	2,500.00	4/1/2017
Jerry	Hodge	320 South Polk, Ste. 100	Amarillo, Texas 79101	\$	2,500.00	4/25/2017

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 1
2 FILER NAME Elisha L. Demerson L. Demerson		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ N/A
5 Date of loan 01/17/2017	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Amarillo National Bank	9 Loan Amount (\$) \$5,000.00
6 Is lender a financial institution? Y N	8 Lender address; City; State; Zip Code Amarillo National Bank Amarillo, Texas 79101	10 Interest rate 5.75%
		11 Maturity date 7/18/2017
12 Principal occupation / Job title (See Instructions) N/A		13 Employer (See Instructions) N/A
14 Description of Collateral <input checked="" type="checkbox"/> none		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	Loan Amount (\$)
Is lender a financial institution? Y N	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input type="checkbox"/> none		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

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

POLITICAL EXPENDITURES MADE 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: 4	2 FILER NAME Elisha L. Demerson	3 Filer ID (Ethics Commission Filers)
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4 Date 4/3/2017	5 Payee name Amarillo Globe News
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6 Amount (\$) \$2873.00	7 Payee address; City; State; Zip Code 900 South Harrison Amarillo, Tx 79101
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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
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Elisha L. Demerson	Office sought Amarillo City Council, Pl.1	Office held Amarillo City Council, Pl.1
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Date 4/3/2017	Payee name A. G. E. Graphics
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Amount (\$) \$1010.00	Payee address; City; State; Zip Code 52231 St. Rt 248 Long Bottom, OH 45743
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Elisha L. Demerson	Office sought Amarillo City Council, Pl.1	Office held Amarillo City Council, Pl.1
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Date 4/3/2017	Payee name Facebook
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Amount (\$) \$40.00	Payee address; City; State; Zip Code 1601 South California Palo Alto, CA. 94304
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Elisha L. Demerson	Office sought Amarillo City Council, Pl.1	Office held Amarillo City Council, Pl.1
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POLITICAL EXPENDITURES MADE 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:		2 FILER NAME Elisha L. Demerson		3 Filer ID (Ethics Commission Filers)	
4 Date 4/6/2017		5 Payee name C&B Marketing			
6 Amount (\$) \$ 729.88		7 Payee address; City; State; Zip Code 2400 Southwest 6th Street Amarillo, Tx 79106			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing 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	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Elisha L. Demerson		Office sought Amarillo City Council, PI.1	
Date 4/12/2017		Payee name Raycom Media (KFDA-TV)			
Amount (\$) \$ 2,371.50		Payee address; City; State; Zip Code RSA Tower, 20th Fl 201 Monroe St. Montgomery, AL 36104			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Elisha L. Demerson		Office sought Amarillo City Council, PI.1	
Date 4/13/2017		Payee name C&B Marketing			
Amount (\$) \$ 700.00		Payee address; City; State; Zip Code 2400 Southwest 6th Street Amarillo, Tx 79106			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Elisha L. Demerson		Office sought Amarillo City Council, PI.1	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE 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: 2 FILER NAME **Elisha L. Demerson** 3 Filer ID (Ethics Commission Filers)

4 Date **4/20/2017** 5 Payee name **KGNC Radio**

6 Amount (\$) **\$ 1,524.05** 7 Payee address; City; State; Zip Code **3505 Olsen Blvd. Ste 117 Amarillo, Tx 79109**

8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) **Advertising Expense** (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name **Elisha L. Demerson** Office sought **Amarillo City Council, PI.1** Office held **Amarillo City Council, PI.1**

Date **4/21/2017** Payee name **ABC-7**

Amount (\$) **\$ 1,970.00** Payee address; City; State; Zip Code **One Broadcast Center Amarillo, Tx 79101**

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) **Advertising Expense** Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name **Elisha L. Demerson** Office sought **Amarillo City Council, PI.1** Office held **Amarillo City Council, PI.1**

Date **4/21/2017** Payee name **Office Max**

Amount (\$) **\$ 116.90** Payee address; City; State; Zip Code **2912 Soncy Rd. Amarillo, Tx 79124**

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) **Other - office supplies** Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name **Elisha L. Demerson** Office sought **Amarillo City Council, PI.1** Office held **Amarillo City Council, PI.1**

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
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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:	2 FILER NAME Elisha L. Demerson	3 Filer ID (Ethics Commission Filers)			
4 Date 4/26/2017	5 Payee name Amarillo Globe News				
6 Amount (\$) \$ 890.00	7 Payee address; City; State; Zip Code 900 South Harrison Amarillo, Tx 79101				
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			
	<table border="0" style="width:100%;"> <tr> <td style="width:25%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name Elisha L. Demerson</td> <td style="width:25%;">Office sought Amarillo City Council, Pl.1</td> <td style="width:25%;">Office held Amarillo City Council, Pl.1</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Elisha L. Demerson	Office sought Amarillo City Council, Pl.1
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Date	Payee name				
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Date	Payee name				
Amount (\$)	Payee address; City; State; Zip Code				
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Date	Payee name				
Amount (\$)	Payee address; City; State; Zip Code				

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SUBTOTALS - C/OH

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

19 FILER NAME Elisha L. Demerson L. Demerson		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 14,000.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 5,000.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 12,225.33
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$