CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to c	complete this form.	er ID	2 Total pages filed: 12
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Ginger	MI	OFFICE USE ONLY Date Receive ECEIVED
	NICKNAME	LAST Nelson	SUFFIX	JAN 15 2018 🗐
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; 301 S. Polk St., Ste.	COURSE IN CONTROL OF THE CONTROL OF	: ZIP CODE	Date Har Professor Secretary'S CITY OF AMARILLO Receipt # Amount
X Change of Address	Amarillo, TX 79101			Date Processed Date Imaged
5 CAMPAIGN TREASURER NAME	MS/MRS/MR Dr.	FIRST	MI	
s	NICKNAME	LAST Keister	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (N		APT / SUITE #; CITY; Suite 301 Ama	
7 CAMPAIGN TREASURER PHONE	AREA CODE (806)	PHONE NUMBER EXTEN 355-9741	ISION	
8 REPORT TYPE	X January 15 July 15	30th day before election		15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)
9 PERIOD COVERED	Month Day 1	rear THROUG	Month Day GH 12/30/201	Year L7
10 ELECTION	ELECTION DA Month Day 1 05/06/2017	TE /ear Primary X General	ELECTION TYPE Runoff Special	Other
11 OFFICE	OFFICE HELD (if any) Mayor		12 OFFICE SOUGHT Mayor	(if known)
		GO TO PA	AGE 2	

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 12

13 C / OH NAME	Nelson, Ginger		14 Filer ID						
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without d officeholders are required to report this information	the candidate's or officeh	older's knowledge or					
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME							
_	GENERAL								
	SPECIFIC	COMMITTEE ADDRESS							
	J. SPECIFIC								
		COMMITTEE CAMPAIGN TREASURER NAME							
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS						
16 CONTRIBUTION TOTALS		AL CONTRIBUTIONS OF \$50 OR LESS (OTHER TARANTEES OF LOANS), UNLESS ITEMIZED	THAN PLEDGES,	\$ 0.00					
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 500.00					
EXPENDITURE TOTALS	3. TOTAL POLITIC	\$ 0.00							
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 19,311.25					
CONTRIBUTION BALANCE		TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD							
OUTSTANDING LOAN TOTALS		6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD							
17 AFFADAVIT									
		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.	y of perjury, that the acco Il information required to	mpanying report is be reported by me					
My Comm	JAN SANDERS Early Public, State of The House	0 Signature of	Candidate or Officeholde	er					
Sworn to and subsc	cribed before me, by the s	aid	, this the/	/ ≛day					
Signature of office	er administering	Printed name of officer administering	ASST. (1. 14 Secretary Idministering oath					

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

		3 of 12
18 FILER NAME Nelson, Ginger	19 Filer ID	
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 500.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	IS	\$ 19,311.25
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

MONET	TARY POLITICAL CONTRIBUTI	ONS	SCHEDULE A1						
The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/12						
2 FILER NAME Nelson, Gin			3 Filer ID						
4 Date 09/12/2017	Full name of contributor	Perdue Brandon Fielder Collins & Mott LLP Contributor address; City; State; Zip Code							
9 Principal occu	Amarillo, TX 79105-9132	9 Employer (See Instructions							
Forms provided	by Texas Ethics Commission www.ethi	cs.state.tx.us	Version V1.0.505						

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ • all Cor	nmittee	Food/Beverage Expen Gift/Awards/Memorials Legal Services The Instruction G	s Expense		Expens Wages	se s/Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed ab	ove)
1	Total pages Schedule F1:	2	FILER NAME				-		3	Filer ID	
	Sch: 1/8 Rpt: 5/12		Nelson, Gir	nger							
4	Date	5	Payee name								
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6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	ode				
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			Amarillo, T	K 79102							
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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polining Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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 Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 3/8 Rpt: 7/12 Nelson, Ginger Date Payee name 07/19/2017 Norfleet Strategies, LLC 6 Amount (\$) Payee address; City; State; Zip Code \$1,000.00 807 Brazos Street, Suite 602 Austin, TX 78701 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense campaign services Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/22/2017 Norfleet Strategies, LLC Amount (\$) Payee address; City; State; Zip Code \$1,000.00 807 Brazos Street, Suite 602 Austin, TX 78701 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense campaign services Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/22/2017 Norfleet Strategies, LLC Payee address; Amount (\$) City; State; Zip Code \$1,000.00 807 Brazos Street, Suite 602 Austin, TX 78701 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense campaign services Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Food/Beverage Expense Gift/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor Travel Out of District
OTHER (enter a category not listed above) Candidate/Officeholder/Political Committee Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 4/8 Rpt: 8/12 Nelson, Ginger Date Payee name 10/23/2017 Norfleet Strategies, LLC 6 Amount (\$) Payee address; City; State; Zip Code \$1,000.00 807 Brazos Street, Suite 602 **Austin, TX 78701 PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Consulting Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense campaign services Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/21/2017 Norfleet Strategies, LLC Amount (\$) Payee address; State; Zip Code \$1,000.00 807 Brazos Street, Suite 602 Austin, TX 78701 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense campaign services Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name Norfleet Strategies, LLC 12/29/2017 Amount (\$) Payee address; City: State; Zip Code \$1,000.00 807 Brazos Street, Suite 602 Austin, TX 78701 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense campaign services Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services Polling Expense Printing Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.					Travel in District Travel Out of District OTHER (enter a category not listed above)				
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District

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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Polling Expense Travel in District Printing Expense
Salaries/Wages/Contract Labor Travel Out of District Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 7/8 Rpt: 11/12 Nelson, Ginger Date Payee name 07/05/2017 Paetzold, Carson (Mr.) 6 Amount (\$) Payee address; City; State; Zip Code \$139.74 22 Helium Rd. Amarillo, TX 79124 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. mileage **EXPENDITURE** Check if Austin, TX, officeholder living expense campaign sign pick up and mileage Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/15/2017 Ralph Duke Photography Amount (\$) Payee address; State; Zip Code \$378.88 3141 West 28th Ave. Amarillo, TX 79109 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. photography **EXPENDITURE** Check if Austin, TX, officeholder living expense photos Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/01/2017 Shack, Edward M. (Mr.) Amount (\$) Payee address; City; State; Zip Code \$630.00 814 San Jacinto Blvd., #202 Austin, TX 78701 **PURPOSE**

Forms provided by Texas Ethics Commission

OF

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

www.ethics.state.tx.us

Office sought

(b) Description

campaign services

Check if travel outside of Texas. Complete Schedule T.

Office held

Check if Austin, TX, officeholder living expense

(a) Category (See Categories listed at the top of this schedule)

Legal Services

Candidate/Officeholder name

Version V1.0.5051

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS EXPENDITURE CATEGORIES FOR BOX 8(a)**

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - d Comm	nittee	Food/Beverage Exp Gift/Awards/Memori Legal Services The Instruction	ense als Expense Guide explains I	_	ise es/Contract Labor	Trav	vel in District vel Out of District HER (enter a category not lis	ted above)
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