FORM C/OH CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. MS/MRS/MR **FIRST** CANDIDATE / MI **OFFICEHOLDER** Clarence Thomas "Tom" NAME Date Received APR 25 2019 NICKNAME SUFFIX LAST Warren II CITY SECRETARY'S Date Hand-liel Wered of ate known and LO CANDIDATE / ADDRESS / PO BOX: APT / SUITE #: CITY: ZIP CODE **OFFICEHOLDER** 1620 S. Johnson MAILING Receipt # Amount **ADDRESS** Change of Address Amarillo, TX 79102 Date Processed Date Imaged CAMPAIGN MS/MRS/MR FIRST MI **TREASURER** NAME **NICKNAME** SUFFIX STREET ADDRESS (NO PO BOX PLEASE); CAMPAIGN APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER ADDRESS** 3401 SN 6th Ave Amarillo Tx 79106 (Residence or Business) PHONE NUMBER CAMPAIGN AREA CODE **EXTENSION TREASURER** PHONE 8 REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff appointment (officeholder only) 8th day before election Exceeded \$500 limit Final Report (Attach C/OH-FR) July 15 PERIOD Month Day Year Month Day Year COVERED 03/31/2019 THROUGH 04/24/2019 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Year Primary Runoff Other 05/04/2019 X General Special 11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) Place City Counci District Place 3

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

(Marine 1997)	ST. Married Annual Married Married St.				2 of 11	
13 C / OH NAME	Warren II, Clarence T	homas "Tom"	14 Filer ID			
15 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.					
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	X GENERAL	Teamsters Local D.R.I.V.E. 577				
	I SENERAL	COMMITTEE ADDRESS				
	SPECIFIC	201 N. Johnson				
		Amarillo, TX 79107				
		COMMITTEE CAMPAIGN TREASURER NAME				
		Brian, Ahearn				
	8	COMMITTEE CAMPAIGN TREASURER ADDRE	SS			
		TX				
16 CONTRIBUTION TOTALS						
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 4,825.0					
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 0.00				0.00	
	4. TOTAL POLITICAL EXPENDITURES \$ 5,764.18					
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 584.32					
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 2,000.00					
17 AFFADAVIT						
FRANCES HIBBS NOTARY PUBLIC, STATE OF TEXAS I/iy Commission Expires 08-19-2019 Signature of Candidate or Officeholder						
AFFIX NOTARY STAMP / SEAL ABOVE						
Sworn to and subscribed before me, by the said TCH L. STELL , this the, this the, day of, 20, to certify which, witness my hand and seal of office.						
Frances Helds Frances Hibbs City Georetary Signature of officer administering Printed name of officer administering Title of officer administering oath						

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 11 18 FILER NAME 19 Filer ID Warren II, Clarence Thomas "Tom" 20 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE 1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 3.025.00 \$ 2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 1,800.00 \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ SCHEDULE E: LOANS \$ \mathbf{X} SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 5,764.18 \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ 9. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ 10. 11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 30.27 12. X \$ TO FILER

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MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDU	LE A1
The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/11	
2 FILER NAME			3 Filer ID	· · · · · · ·
Warren II, C	larence Thomas "Tom"			
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
04/03/2019	Churchman, Ray		\$25.00	
	6 Contributor address; City; State; Zip Code			
	7804 Bayswater Road			
	Amarillo, TX 79119			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	
o i imolpai occa	passivi see also (esse insusedants)	2 Employer (odd moddodono	•	
Date	Full name of contributor)	Amount of Contribution (\$)	;;;
04/08/2019	McDowell, Roy		•••	\$200.00
	Contributor address; City; State; Zip Code			
	13020 WANDERING RD			
	Assaille TV 70110			
Bringing con	Amarillo, TX 79118 pation / Job title (See Instructions)			
Principal occu	pation 7 300 title (See Histractions)	Employer (See Instructions Self	,	
Date	Full name of contributor ut-of-state PAC (ID#:)	Amount of Contribution (\$)	
04/02/2019	Teamsters Local 577 D.R.I.V.E. Fund			\$2,500.00
	Contributor address; City; State; Zip Code			
	201 N. Buchanan			
	Amarillo, TX 79107			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
Date	Full name of contributor ut-of-state PAC (ID#	Amount of Contribution (\$)	\$200.00	
04/09/2019	Walker, Len			
	Contributor address; City; State; Zip Code			
	3401 SW 6th Ave			
	Amarillo, TX 79106			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
Attorney		Self		
Date	Fuil name of contributor ut-of-state PAC (ID#		Amount of Contribution (\$)	
04/07/2019	Warren III, Thomas		\$100.00	
	Contributor address; City; State; Zip Code			
	1620 S. Johnson			
	Amarillo, TX 79109			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	
Editor	· · · · · · · · · · · · · · · · · · ·			
				· · · · · · · · · · · · · · · · · · ·

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 5/11 2 FILER NAME 3 Filer ID Warren II. Clarence Thomas "Tom" \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 6 Full name of contributor out-of-state PAC (ID#: 8 Amount of 9 In-kind contribution contribution (\$) description 04/22/2019 El Dorado Strategies \$1,750.00 General Consulting 7 Contributor address; City; State; Zip Code PO Box 1582 Amarillo, TX 79105 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 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) In-kind contribution Date Full name of contributor Amount of ut-of-state PAC (ID#: contribution (\$) description 04/24/2019 Warren III, Thomas \$50.00 i Advertising Contributor address; City; State; Zip Code 1620 S. Johnson Amarillo, TX 79109 Check if travel outside of Texas. Complete Schedule T. Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions) Amarillo Pioneer Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Version V1.1.39f8039c

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POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

l	Advertising Expense Accounting/Banking	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense			
١	Consulting Expense	Food/Beverage Expense Polling Expense	Travel in District Travel Out of District			
	Contributions/ Donations Made By Candidate/Officeholder/Politica		OTHER (enter a category not listed above)			
	Credit Card Payment	The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	ges Schedule F1: 2 FILER NAME 3 Filer ID				
	Sch: 1/5 Rpt: 6/11	Warren II, Clarence Thomas "Tom"				
4	Date	5 Payee name				
_	04/08/2019	A.G.E. Graphics				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$275.00	678 Collins Road				
		Little Hocking, OH 45742				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
ĺ	OF EXPENDITURE	Advertising Expense	el outside of Texas. Complete Schedule T.			
	DATE ENDITIONE	I I I I	tin, TX, officeholder living expense			
		Yard Signs				
L						
9		Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/O					
Г	Date	Payee name				
	04/04/2019	A.G.E. Graphics				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$340.00	678 Collins Road				
		Little Hocking, OH 45742				
Ļ						
1	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
į	EXPENDITURE	rieveriesing experies	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense			
		Yard Signs	an, 17, once load living expense			
		raid digits				
┡	Complete ONI V if direct	Candidate/Officeholder name Office sought	Office hold			
l	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held			
L						
	Date	Payee name				
	04/04/2019	A.G.E. Graphics				
Г	Amount (\$)	Payee address; City; State; Zip Code				
	\$150.00 678 Collins Road					
		Little Hocking, OH 45742				
┝	PURPOSE					
1	OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if trav	el outside of Texas. Complete Schedule T.			
	EXPENDITURE Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
	Yard Signs					
-	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/OI					
\vdash						
l						

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense		Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense			Transportation Equipment & Related Expense Travel in District		
	Candidate/Officeholder/Political Committee		Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor			Travel Out of District OTHER (enter a category not listed above)		
Credit Card Payment			The Instruction Guide explains	-				
1	Total pages Schedule F1:	2 FILER NAMI	=			3 Filer ID		
L	Sch: 2/5 Rpt: 7/11		Clarence Thomas "Tom"	,				
4		5 Payee name						
	04/10/2019	Alpha Medi	a LLC	· · · · · · · · · · · · · · · · · · ·				
6	Amount (\$)	7 Payee addre	•	; Zip Code				
	\$696.15	3505 Olser	Blvd. Suite 117					
L		Amarillo, T						
8	PURPOSE OF		ee Categories listed at the top of this sch	nedute) (b	Description	outside of Tayes Complete Schedule T		
	EXPENDITURE	Advertising	Expense		<u></u>	outside of Texas. Complete Schedule T. , TX, officeholder living expense		
					Radio Ads			
I								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		iceholder name (Office sough	t	Office held		
F	Date	Payee name	 				- 	
	04/24/2019	Callfire						
Г	Amount (\$)	Payee address; City; State; Zip Code						
	\$2.00	\$2.00 1410 2nd St Suite #200						
		Santa Mon	ica, CA 90401					
	PURPOSE OF		See Categories listed at the top of this sci	hedule) (b) Description			
	OF EXPENDITURE	Advertising	Expense			outside of Texas. Complete Schedule T. TX. officeholder living expense		
	Check if Austin, TX, officeholder living expense Voter Contact							
T	Complete ONLY if direct		iceholder name	Office sough	t	Office held		
L	expenditure to benefit C/OI	7 						
Γ	Date	Payee name)					
	04/24/2019	Callfire						
Г	Amount (\$)	Payee addre		; Zip Code	}			
	\$299.00	1410 2nd S	St Suite #200					
L		Santa Mon	ica, CA 90401					
	PURPOSE OF		See Categories listed at the top of this sci	hedule) (b	Description	autids of Taura Complete Colored *		
	EXPENDITURE	Advertising	Expense			outside of Texas. Complete Schedule T. I, TX, officeholder living expense		
					Voter Contac			
1								
Γ	Complete ONLY if direct		ficeholder name	Office sough	it	Office held		
	expenditure to benefit C/O	Η						
Γ								

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	Fees Office Overhear Food/Beverage Expense Politing Expense Gilt/Awards/Memorials Expense Printing Expens		rhead pense quensi /ages/	d/Rental Expense Transporte Travel in Se Travel O OTHER		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2 EII ED NAME					3 1	Filer ID
•	Sch: 3/5 Rpt: 8/11		· Clarence Thomas "Tom"				,	
4	· · · · · · · · · · · · · · · · · · ·	5 Payee name						
•	04/05/2019	Click2Mail						
6	Amount (\$)	7 Payee addre	ss; City; State	; Zip Co	de			
	\$198.96	-	ST N, Suite 201					
			·					
		Arlington, V	A 22201					
8	PURPOSE	(a) Category (S	ee Categories listed at the top of this sci	nedule)	(b)	Description		
	OF EXPENDITURE	Advertising		l		=		e of Texas. Complete Schedule T.
į						Printing Expe		officeholder living expense
				i				
9	Complete ONLY if direct expenditure to benefit C/OI		ceholder name	Office sou	ght			Office held
								
	Date 04/08/2019	Payee name Warren , Ta	mara					
				. Zin Co	-			
	Amount (\$) \$87.00	Payee addre 1620 S. Joh	•	; Zip Co	ue			
	Ψ01.00	1020 3. 301						
		Amarillo, T	(79102					
	PURPOSE	(a) Category (S	ee Categories listed at the top of this sci	hedule)	(b)	Description		
	OF EXPENDITURE	Loan Repay	ment/Reimbursement			ليسا		e of Texas. Complete Schedule T. officeholder living expense
						Reimbursem		- ·
				1				
	Complete ONLY if direct expenditure to benefit C/OI		ceholder name	Office sou	ght			Office held
_	Date	Bayos samo						
	04/23/2019	Payee name Warren , Ta						
	Amount (\$)	Payee addre		; Zip Co	de	· · · · · · · · · · · · · · · · · · ·		
	\$50.00	1620 S. Jol	•					
	, , , , , , , , , , , , , , , , , , , ,							
		Amarillo, T	X 79102					
	PURPOSE		ee Categories listed at the top of this sc	hedule)	(b)	Description		0-1-1-0-1-1-0-1-1
l	OF EXPENDITURE	Loan Repa	yment/Reimbursement			ليسا		le of Texas. Complete Schedule T. officeholder living expense
						لبا		dvertising Expense
		!						
	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office sou	ight			Office held
\vdash				<u></u>				
ĺ								

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 **CONTRIBUTIONS EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Fees Transportation Equipment & Related Expense Travel in District Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense 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: 4/5 Rpt: 9/11 Warren II, Clarence Thomas "Tom" Date Payee name 04/23/2019 Warren, Tamara 6 Amount (\$) Payee address; City; State; Zip Code \$250.00 1620 S. Johnson St. Amarillo, TX 79102 PURPOSE (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas, Complete Schedule T. Loan Repayment/Reimbursement **EXPENDITURE** Check if Austin, TX, officeholder living expense Reimbursement for purchase of t-posts for large yard signs Candidate/Officeholder name Office held Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name 04/18/2019 Whitney Russell Printers Payee address; City: State; Zip Code Amount (\$) \$1,862.00 **Box 664** Amarillo, TX 79105 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Flyers and Mailings Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name Whitney Russell Printers 04/01/2019 State; Zip Code Payee address; City; Amount (\$) \$430.00 Box 664 Amarillo, TX 79105 (b) Description **PURPOSE** (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. OF **Advertising Expense** EXPENDITURE Check if Austin, TX, officeholder living expense **Printing** Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS **EXPENDITURE CATEGORIES FOR BOX 8(a)** Solicitation/Fundraising Expense Transportation Equipment & Related Expense Advertising Expense Accounting/Banking Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee Polling Expense Printing Expense Salaries/Wages/Contract Labor Food/Beverage Expense Gift/Awards/Memorials 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 Warren II, Clarence Thomas "Tom" Sch: 5/5 Rpt: 10/11 4 Date Payee name 04/01/2019 Whitney Russell Printers Amount (\$) Payee address; State; Zip Code \$273.81 Box 664 Amarillo, TX 79105 PURPOSE (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. **Advertising Expense EXPENDITURE** Check if Austin, TX, officeholder living expense **Mailing Service** Candidate/Officeholder name Office held Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name 04/01/2019 Whitney Russell Printers Payee address; City; State; Zip Code Amount (\$) Box 664 \$850.26 Amarillo, TX 79105 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Postage Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K CONTRIBUTIONS RETURNED TO FILER 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 11/11 3 Filer ID 2 FILER NAME Warren II, Clarence Thomas "Tom" 8 Amount (\$) 4 Date 5 Name of person from whom amount is received \$30.00 04/15/2019 **AGE Graphics** 6 Address of person from whom amount is received; City; State; Zip Code 678 Collins Rd Little Hocking, OH 45742 Purpose for which amount is received Check if political contribution returned to filer Refund on Printing Error Name of person from whom amount is received Amount (\$) Date \$0.26 04/01/2019 Texas Plains Federal Credit Union Address of person from whom amount is received; City; State; Zip Code 804 South Madison Amarillo, TX 79101 Check if political contribution returned to filer Purpose for which amount is received Return on Banking Fees Amount (\$) Date Name of person from whom amount is received \$0.01 04/01/2019 Texas Plains Federal Credit Union Address of person from whom amount is received; City; State; Zip Code 804 South Madison Amarillo, TX 79101 Purpose for which amount is received Check if political contribution returned to filer **Return on Banking Fees**

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