

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	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%; font-size: small;">MS / MRS / MR</td> <td style="width:40%; font-size: small;">FIRST</td> <td style="width:30%; font-size: small;">MI</td> </tr> <tr> <td>Mr.</td> <td>Bill</td> <td></td> </tr> <tr> <td style="font-size: x-small;">NICKNAME</td> <td style="font-size: x-small;">LAST</td> <td style="font-size: x-small;">SUFFIX</td> </tr> <tr> <td colspan="3" style="text-align: center; padding-top: 10px;">Waybourn</td> </tr> </table>	MS / MRS / MR	FIRST	MI	Mr.	Bill		NICKNAME	LAST	SUFFIX	Waybourn			<div style="border: 1px solid black; padding: 5px;"> <p style="text-align: center; margin: 0;">OFFICE USE ONLY</p> <p style="font-size: x-small; margin: 0;">Date Received</p> <p style="font-size: x-small; margin: 0;">Date Hand-delivered or Date Postmarked</p> <table style="width:100%; border-collapse: collapse; font-size: x-small;"> <tr> <td style="width:50%;">Receipt #</td> <td style="width:50%;">Amount \$</td> </tr> <tr> <td colspan="2">Date Processed</td> </tr> <tr> <td colspan="2">Date Imaged</td> </tr> </table> </div>		Receipt #	Amount \$	Date Processed		Date Imaged	
MS / MRS / MR	FIRST	MI																			
Mr.	Bill																				
NICKNAME	LAST	SUFFIX																			
Waybourn																					
Receipt #	Amount \$																				
Date Processed																					
Date Imaged																					
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	<table style="width:100%; border-collapse: collapse; font-size: x-small;"> <tr> <td>ADDRESS / PO BOX;</td> <td>APT / SUITE #;</td> <td>CITY;</td> <td>STATE;</td> <td>ZIP CODE</td> </tr> </table> <input type="checkbox"/> Change of Address			ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE													
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5 CANDIDATE / OFFICEHOLDER PHONE	<table style="width:100%; border-collapse: collapse; font-size: x-small;"> <tr> <td>AREA CODE</td> <td>PHONE NUMBER</td> <td>EXTENSION</td> </tr> </table>			AREA CODE	PHONE NUMBER	EXTENSION															
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6 CAMPAIGN TREASURER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%; font-size: small;">MS / MRS / MR</td> <td style="width:40%; font-size: small;">FIRST</td> <td style="width:30%; font-size: small;">MI</td> </tr> <tr> <td>Mrs.</td> <td>Taya</td> <td></td> </tr> <tr> <td style="font-size: x-small;">NICKNAME</td> <td style="font-size: x-small;">LAST</td> <td style="font-size: x-small;">SUFFIX</td> </tr> <tr> <td colspan="3" style="text-align: center; padding-top: 10px;">Kyle</td> </tr> </table>	MS / MRS / MR	FIRST	MI	Mrs.	Taya		NICKNAME	LAST	SUFFIX	Kyle			<table style="width:100%; border-collapse: collapse; font-size: x-small;"> <tr> <td style="width:50%;">Receipt #</td> <td style="width:50%;">Amount \$</td> </tr> <tr> <td colspan="2">Date Processed</td> </tr> <tr> <td colspan="2">Date Imaged</td> </tr> </table>		Receipt #	Amount \$	Date Processed		Date Imaged	
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Date Processed																					
Date Imaged																					
7 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	<table style="width:100%; border-collapse: collapse; font-size: x-small;"> <tr> <td>STREET ADDRESS (NO PO BOX PLEASE);</td> <td>APT / SUITE #;</td> <td>CITY;</td> <td>STATE;</td> <td>ZIP CODE</td> </tr> </table>			STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE;	ZIP CODE													
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9 REPORT TYPE	<table style="width:100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input checked="" type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded \$500 limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table>			<input type="checkbox"/> January 15	<input 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 checked="" type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)										
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10 PERIOD COVERED	<table style="width:100%; border-collapse: collapse; font-size: x-small;"> <tr> <td style="text-align: center;">Month</td> <td style="text-align: center;">Day</td> <td style="text-align: center;">Year</td> <td style="text-align: center;">THROUGH</td> <td style="text-align: center;">Month</td> <td style="text-align: center;">Day</td> <td style="text-align: center;">Year</td> </tr> <tr> <td style="text-align: center;">09</td> <td style="text-align: center;">/ 30</td> <td style="text-align: center;">/ 2016</td> <td></td> <td style="text-align: center;">10</td> <td style="text-align: center;">/ 30</td> <td style="text-align: center;">/ 2016</td> </tr> </table>			Month	Day	Year	THROUGH	Month	Day	Year	09	/ 30	/ 2016		10	/ 30	/ 2016				
Month	Day	Year	THROUGH	Month	Day	Year															
09	/ 30	/ 2016		10	/ 30	/ 2016															
11 ELECTION	<table style="width:100%; border-collapse: collapse; font-size: x-small;"> <tr> <td colspan="3" style="text-align: center;">ELECTION DATE</td> </tr> <tr> <td style="text-align: center;">Month</td> <td style="text-align: center;">Day</td> <td style="text-align: center;">Year</td> </tr> <tr> <td style="text-align: center;">11</td> <td style="text-align: center;">/ 8</td> <td style="text-align: center;">/ 2016</td> </tr> </table>	ELECTION DATE			Month	Day	Year	11	/ 8	/ 2016	<table style="width:100%; border-collapse: collapse; font-size: x-small;"> <tr> <td colspan="3" style="text-align: center;">ELECTION TYPE</td> </tr> <tr> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> Other Description</td> </tr> <tr> <td><input checked="" type="checkbox"/> General</td> <td><input type="checkbox"/> Special</td> <td></td> </tr> </table>		ELECTION TYPE			<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special	
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<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) None	13 OFFICE SOUGHT (if known) Sheriff																			

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

14 C/OH NAME

Bill Waybourn

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

COMMITTEE NAME

GENERAL

SPECIFIC

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 \$ 779.25

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 21183.05

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 0.00

4. TOTAL POLITICAL EXPENDITURES \$ 8,290.31

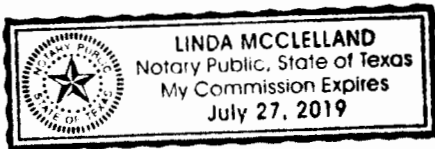
CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 41,934.02

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$

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.

Bill Waybourn
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Bill Waybourn, this the 31st day of October, 20 16, to certify which, witness my hand and seal of office.

Linda McClelland
Signature of officer administering oath

Linda McClelland
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)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 20,403.80
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. <input type="checkbox"/> SCHEDULE E: LOANS		\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 8290.31
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		\$

FILED
 2016 OCT 31 PM 3:53
 CLERK OF COURTS
 COUNTY CLERK
 COUNTY CLERK

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Bill Waybourn

3 Filer ID (Ethics Commission Filers)

4 Date

10/4/2016

5 Full name of contributor

Rice Tilley

out-of-state PAC (ID# _____)

7 Amount of contribution (\$)

\$250.00

6 Contributor address;

City; State; Zip Code

1301 Throckmorton Street #2602 Fort Worth TX

8 Principal occupation / Job title (See Instructions)

Retired

9 Employer (See Instructions)

Retired

4 Date

10/5/2016

5 Full name of contributor

Randy Cundiff

out-of-state PAC (ID# _____)

7 Amount of contribution (\$)

\$250.00

6 Contributor address;

City; State; Zip Code

7000 San Antonio Drive Fort Worth TX 76121

8 Principal occupation / Job title (See Instructions)

Police Officer

9 Employer (See Instructions)

TCSO

4 Date

10/6/2016

5 Full name of contributor

Don Cosby

out-of-state PAC (ID# _____)

7 Amount of contribution (\$)

\$100.00

6 Contributor address;

City; State; Zip Code

6725 Trinity Landing Dr. N. Fort Worth TX 76132

8 Principal occupation / Job title (See Instructions)

Judge

9 Employer (See Instructions)

State of Texas

4 Date

10/7/2016

5 Full name of contributor

James Ashby

out-of-state PAC (ID# _____)

7 Amount of contribution (\$)

\$100.00

6 Contributor address;

City; State; Zip Code

604 W. Harwood Rd. Euless TX 76039

8 Principal occupation / Job title (See Instructions)

Retired

9 Employer (See Instructions)

Retired

FILED
 2016 OCT 31 PM 3:53
 TARRANT COUNTY
 CLERK OF COUNTY CLERK
 ETHICS COMMISSION

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 FILER NAME Bill Waybourn		3 Filer ID (Ethics Commission Filers)
4 Date 10/10/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Olcott 6 Contributor address; City; State; Zip Code P.O. Box 26996 Fort Worth TX 76126	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
4 Date 10/10/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brett & Diane Zeigler 6 Contributor address; City; State; Zip Code 4906 Sierra Vista Court Arlington TX 76017	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Physical Therapist		9 Employer (See Instructions) Accelerated Care Plus
4 Date 10/10/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shanda Perkins 6 Contributor address; City; State; Zip Code 120 Sunny Meadows Dr. Burleson TX 76028	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) J. Wales Enterprises
4 Date 10/11/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kevin Brown 6 Contributor address; City; State; Zip Code 4719 Spring Creek Rd. Arlington TX 76017	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Investigator		9 Employer (See Instructions) Tarrant County
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		FILED TARRANT COUNTY 2016 OCT 31 PM 3:53 PUBLIC INFORMATION DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Bill Waybourn

3 Filer ID (Ethics Commission Filers)

4 Date

10/12/2016

5 Full name of contributor

Donna Moody

out-of-state PAC (ID# _____)

7 Amount of contribution (\$)

\$150.00

6 Contributor address;

City; State; Zip Code

1463 Sonoma Kennedale TX 76060

8 Principal occupation / Job title (See Instructions)

Business Development

9 Employer (See Instructions)

Trinity Title

4 Date

10/13/2016

5 Full name of contributor

Kirk Wilson

out-of-state PAC (ID# _____)

7 Amount of contribution (\$)

\$1,000.00

6 Contributor address;

City; State; Zip Code

4418 Brookview Drive Dallas TX 75220

8 Principal occupation / Job title (See Instructions)

President

9 Employer (See Instructions)

T. Wilson Associates

4 Date

10/13/2016

5 Full name of contributor

Ronald Van Der Weert

out-of-state PAC (ID# _____)

7 Amount of contribution (\$)

\$100.00

6 Contributor address;

City; State; Zip Code

5012 Lake Valley Court Fort Worth TX 76123

8 Principal occupation / Job title (See Instructions)

Detention Officer

9 Employer (See Instructions)

TCSO

4 Date

10/16/2016

5 Full name of contributor

Margaret Borchert

out-of-state PAC (ID# _____)

7 Amount of contribution (\$)

\$50.00

6 Contributor address;

City; State; Zip Code

7129 Norma Street Fort Worth TX 76112

8 Principal occupation / Job title (See Instructions)

Retired

9 Employer (See Instructions)

Retired

FILED
 TARRANT COUNTY
 2016 OCT 31 PM 3:53
 CLERK OF COUNTY CLERK
 COUNTY CLERK

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Bill Waybourn		3 Filer ID (Ethics Commission Filers)
4 Date 10/17/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Dillard 6 Contributor address; City; State; Zip Code 4905 Canyon Trl. N. #2616 Euless TX 76040	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Director of Adv. Tech.		9 Employer (See Instructions) Advanced Concepts Timeshare
4 Date 10/17/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jack McMurry 6 Contributor address; City; State; Zip Code 964 Turner Way Mansfield TX 76063	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
4 Date 10/17/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Nelson 6 Contributor address; City; State; Zip Code 3604 Andover Dr. Bedford TX 76021	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Nuclear Equipment Op.		9 Employer (See Instructions) Luminance
4 Date 10/19/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Neaves 6 Contributor address; City; State; Zip Code 419 Southmoor Dr. Arlington TX 76010	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Law Enforcement		9 Employer (See Instructions) TCSO

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 OCT 31 2015
 PM 3:53
 TARRANT COUNTY, TEXAS
 CLERK OF COURTS
 DEPARTMENT OF STATE SERVICES

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 FILER NAME

Bill Waybourn

3 Filer ID (Ethics Commission Filers)

4 Date

10/19/2016

5 Full name of contributor

John Garris

out-of-state PAC (ID# _____)

7 Amount of contribution (\$)

\$50.00

6 Contributor address;

City; State; Zip Code

5144 Breeze Hollow Ct. Fort Worth TX 76179

8 Principal occupation / Job title (See Instructions)

Confinement Officer

9 Employer (See Instructions)

TCSO

4 Date

10/20/2016

5 Full name of contributor

Marlene Powers

out-of-state PAC (ID# _____)

7 Amount of contribution (\$)

\$500.00

6 Contributor address;

City; State; Zip Code

5312 Hidden Trail Dr. Arlington TX 76017

8 Principal occupation / Job title (See Instructions)

Retired

9 Employer (See Instructions)

Retired

4 Date

10/20/2016

5 Full name of contributor

Rebekah Skeete

out-of-state PAC (ID# _____)

7 Amount of contribution (\$)

\$50.00

6 Contributor address;

City; State; Zip Code

1100 E. Lamar Blvd. Arlington TX 76011

8 Principal occupation / Job title (See Instructions)

Mail Attendant

9 Employer (See Instructions)

Texas Rangers

4 Date

10/20/2016

5 Full name of contributor

Maria Alvarado

out-of-state PAC (ID# _____)

7 Amount of contribution (\$)

\$50.00

6 Contributor address;

City; State; Zip Code

3101 Lake Park Drive Grapevine TX 76051

8 Principal occupation / Job title (See Instructions)

Retired

9 Employer (See Instructions)

Retired

RECEIVED
 ETHICS COMMISSION
 2016 OCT 31 PM 3:53
 WARRANT UNIT

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Bill Waybourn		3 Filer ID (Ethics Commission Filers)
4 Date 10/21/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rey & Kaye Moreno 6 Contributor address; City; State; Zip Code 1213 Kelpie Court Fort Worth TX 76111	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Writer/Editor		9 Employer (See Instructions) Self
4 Date 10/21/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benjamin Clark 6 Contributor address; City; State; Zip Code 4403 Holly Hock Court Arlington TX 76001	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Division CFO		9 Employer (See Instructions) DR Horton
4 Date 10/21/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christina Wommack 6 Contributor address; City; State; Zip Code 907 Moore Road Mansfield TX 76063	7 Amount of contribution (\$) \$3.80
8 Principal occupation / Job title (See Instructions) Branch Manager		9 Employer (See Instructions) Service First Mortate
4 Date 10/21/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Hill 6 Contributor address; City; State; Zip Code 1604 Lillian Ave. Arlington TX 76013	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired

2016 OCT 01 PM 3:53
 STATE ETHICS COMMISSION
 MAIL ROOM

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Bill Waybourn

3 Filer ID (Ethics Commission Filers)

4 Date

10/21/2016

5 Full name of contributor

Howard LaMunion

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$50.00

6 Contributor address;

City; State; Zip Code

10304 Rasberry Road McKinney TX 75075

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

4 Date

10/21/2016

5 Full name of contributor

Janet Woody

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$150.00

6 Contributor address;

City; State; Zip Code

1427 Highland Court Roanoke TX 76262

8 Principal occupation / Job title (See Instructions)

Ministry

9 Employer (See Instructions)

Self

4 Date

10/21/2016

5 Full name of contributor

Ashley Basnett

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$50.00

6 Contributor address;

City; State; Zip Code

777 Main Street Fort Worth TX 76102

8 Principal occupation / Job title (See Instructions)

Attorney

9 Employer (See Instructions)

Reeve, Augustine, Alrakhia

4 Date

10/21/2016

5 Full name of contributor

Justin Gustafson

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$100.00

6 Contributor address;

City; State; Zip Code

9316 Moon River Drive Arlington TX 76002

8 Principal occupation / Job title (See Instructions)

Sales

9 Employer (See Instructions)

BSN Sports

FILED
 OCT 31 PM 3:53
 2015
 CLERK OF COURTS
 TARRANT COUNTY, TEXAS

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Bill Waybourn		3 Filer ID (Ethics Commission Filers)
4 Date 10/22/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mona Bailey 6 Contributor address; City; State; Zip Code 6200 Lake Way North Richland Hills TX 76180	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
4 Date 10/23/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gene Payne 6 Contributor address; City; State; Zip Code 6167 Greenwood Rd. Millsap TX 76066	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 10/24/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angela Moore 6 Contributor address; City; State; Zip Code 2501 Royal Glen Ct. Arlington TX 76012	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) MD		9 Employer (See Instructions) Arlington Center for Derm.
4 Date 10/24/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tamara Tull 6 Contributor address; City; State; Zip Code 1001 Abigail Drive Arlington TX 76002	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) TELC

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 MONETARY CONTRIBUTIONS
 2016 OCT 31 PM 3:53
 BY: _____

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 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 FILER NAME

Bill Waybourn

3 Filer ID (Ethics Commission Filers)

4 Date

10/24/2016

5 Full name of contributor out-of-state PAC (ID# _____)

Chelsey Williams

7 Amount of contribution (\$)

\$50.00

6 Contributor address; City; State; Zip Code

1219 E. Woodlin Blvd. Dallas TX 75216

8 Principal occupation / Job title (See Instructions)

Professor

9 Employer (See Instructions)

Dallas County

4 Date

10/25/2016

5 Full name of contributor out-of-state PAC (ID# _____)

Heather Gilbert

7 Amount of contribution (\$)

\$50.00

6 Contributor address; City; State; Zip Code

2629 Riveroaks Dr. Arlington TX 76006

8 Principal occupation / Job title (See Instructions)

Consulting

9 Employer (See Instructions)

Self

4 Date

10/26/2016

5 Full name of contributor out-of-state PAC (ID# _____)

Charles Tangney

7 Amount of contribution (\$)

\$100.00

6 Contributor address; City; State; Zip Code

10625 Flamewood Fort Worth TX 76140

8 Principal occupation / Job title (See Instructions)

Investigator

9 Employer (See Instructions)

Self

4 Date

10/28/2016

5 Full name of contributor out-of-state PAC (ID# _____)

Jamal Qaddura

7 Amount of contribution (\$)

\$50.00

6 Contributor address; City; State; Zip Code

400 E. Weatherford Fort Worth TX 76102

8 Principal occupation / Job title (See Instructions)

Bondsman

9 Employer (See Instructions)

AAA Professional Bail Bonds

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 TARRANT COUNTY
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 ETHICS COMMISSION ADMINISTRATOR

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Bill Waybourn		3 Filer ID (Ethics Commission Filers)
4 Date 10/20/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharen Wilson 6 Contributor address; City; State; Zip Code P.O. Box 282 Fort Worth TX 76101	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) District Attorney		9 Employer (See Instructions) Tarrant County
4 Date 10/20/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mike & Rosie Moncrief 6 Contributor address; City; State; Zip Code 777 Taylor Street, Suite 1030 Fort Worth TX 76102	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 10/16/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kent Beasley 6 Contributor address; City; State; Zip Code 2800 California Ln. Arlington TX 76015	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 10/17/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeff Kearney 6 Contributor address; City; State; Zip Code 3100 W. 7th St. #420 Fort Worth TX 76107	7 Amount of contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Kearney Wynn

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Bill Waybourn

3 Filer ID (Ethics Commission Filers)

4 Date

10/13/2016

5 Full name of contributor out-of-state PAC (ID# _____)

Betsy Price Campaign

7 Amount of contribution (\$)

\$250.00

6 Contributor address; City; State; Zip Code

P.O. Box 100066 Fort Worth TX 76185

8 Principal occupation / Job title (See Instructions)

Mayor

9 Employer (See Instructions)

City of Fort Worth

4 Date

10/18/2016

5 Full name of contributor out-of-state PAC (ID# _____)

Steve Flowers

7 Amount of contribution (\$)

\$500.00

6 Contributor address; City; State; Zip Code

1001 Heritage Pkwy. Mansfield TX 76063

8 Principal occupation / Job title (See Instructions)

Self

9 Employer (See Instructions)

Self

4 Date

10/12/2016

5 Full name of contributor out-of-state PAC (ID# _____)

Roy & Janette Kurban

7 Amount of contribution (\$)

\$500.00

6 Contributor address; City; State; Zip Code

101 Hideaway #5 Strawn TX 76475

8 Principal occupation / Job title (See Instructions)

Retired

9 Employer (See Instructions)

Retired

4 Date

10/17/2016

5 Full name of contributor out-of-state PAC (ID# _____)

J.D. Johnson

7 Amount of contribution (\$)

\$500.00

6 Contributor address; City; State; Zip Code

P.O. Box 136021 Fort Worth TX 76136

8 Principal occupation / Job title (See Instructions)

County Commissioner

9 Employer (See Instructions)

Tarrant County

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 TARRANT COUNTY

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Bill Waybourn		3 Filer ID (Ethics Commission Filers)
4 Date 10/18/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martin & Brenda Ross	7 Amount of contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 2 Gregory Ct. Pantego TX 76013		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
4 Date 10/16/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sharon & Dennis Cox	7 Amount of contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 8008 Woodcreek Cir. Argyle TX 76226		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 10/17/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Deloris Pell	7 Amount of contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 3703 Dustin Trail Arlington TX 76016		
8 Principal occupation / Job title (See Instructions) Electrotech Systems		9 Employer (See Instructions) Owner
4 Date 10/17/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) David Sargent	7 Amount of contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code 2714 Sherman Grand Prairie TX 75051		
8 Principal occupation / Job title (See Instructions) Sargent Investments		9 Employer (See Instructions) Owner

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 TARRANT COUNTY
 CLERK OF COURTS
 ETHICS COMMISSION

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Bill Waybourn

3 Filer ID (Ethics Commission Filers)

4 Date

10/27/2016

5 Full name of contributor

Terry Munford

out-of-state PAC (ID# _____)

7 Amount of contribution (\$)

\$250.00

6 Contributor address;

City: State: Zip Code

5758 Blueridge Dr. Fort Worth TX 76112

8 Principal occupation / Job title (See Instructions)

Lockheed Martin

9 Employer (See Instructions)

Supply Chain

4 Date

10/24/2016

5 Full name of contributor

Lamont and Kathy Frawley

out-of-state PAC (ID# _____)

7 Amount of contribution (\$)

\$250.00

6 Contributor address;

City: State: Zip Code

3216 S. Bowen Rd. Arlington TX 76015

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

4 Date

10/24/2016

5 Full name of contributor

Dr. Mark Hanson

out-of-state PAC (ID# _____)

7 Amount of contribution (\$)

\$50.00

6 Contributor address;

City: State: Zip Code

2705 Butler Dr. Arlington TX 76012

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

4 Date

10/24/2016

5 Full name of contributor

Ralph Clemons

out-of-state PAC (ID# _____)

7 Amount of contribution (\$)

\$100.00

6 Contributor address;

City: State: Zip Code

203 N. Rambling Fork Weatherford TX 76087

8 Principal occupation / Job title (See Instructions)

Law Enforcement

9 Employer (See Instructions)

Tarrant County

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 TARRANT COUNTY
 2015 OCT 31 PM 3:54
 CLERK OF COURTS
 TARRANT COUNTY

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME
Bill Waybourn

3 Filer ID (Ethics Commission Filers)

4 Date
10/24/2016

5 Full name of contributor out-of-state PAC (ID#: _____)
Wilma & Horace May

7 Amount of contribution (\$)
\$100.00

6 Contributor address; City; State; Zip Code
2324 Bay Lakes Court Arlington TX 76016

8 Principal occupation / Job title (See Instructions)
Lawyer

9 Employer (See Instructions)

4 Date
10/24/2016

5 Full name of contributor out-of-state PAC (ID#: _____)
Howard Zuckerbrow

7 Amount of contribution (\$)
\$2,500.00

6 Contributor address; City; State; Zip Code
2804 Katherine Court Arlington TX 76016

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

4 Date
10/24/2016

5 Full name of contributor out-of-state PAC (ID#: _____)
Wanda Neubauer

7 Amount of contribution (\$)
\$100.00

6 Contributor address; City; State; Zip Code
4716 Catalina Court North Richland Hills TX 76180

8 Principal occupation / Job title (See Instructions)
Retired

9 Employer (See Instructions)
Retired

4 Date
10/24/2016

5 Full name of contributor out-of-state PAC (ID#: _____)
Thomas Wilder

7 Amount of contribution (\$)
\$100.00

6 Contributor address; City; State; Zip Code
209 West Second St. Fort Worth TX 76102

8 Principal occupation / Job title (See Instructions)
District Clerk

9 Employer (See Instructions)
Tarrant County

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 CONTRIBUTOR

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Bill Waybourn		3 Filer ID (Ethics Commission Filers)
4 Date 10/24/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ryan Gruber 6 Contributor address; City; State; Zip Code 2806 Katherine Court DWG TX 76016	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date 10/24/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stephen Atwell 6 Contributor address; City; State; Zip Code 4805 Park Bend Dr. Fort Worth TX 76137	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Geologist		9 Employer (See Instructions) Self
4 Date 10/24/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Paul Schuder 6 Contributor address; City; State; Zip Code 3816 Wharton Dr. Fort Worth TX 76133	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) PCS Bail Bonds		9 Employer (See Instructions) Bondsman
4 Date 10/24/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stephen Johnson 6 Contributor address; City; State; Zip Code 7228 Church Park Drive Fort Worth TX 76133	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) T.I.S.		9 Employer (See Instructions) Guard

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 ETHICS COMMISSION
 CONTRIBUTOR DISTRIBUTOR

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Bill Waybourn

3 Filer ID (Ethics Commission Filers)

4 Date

10/24/2016

5 Full name of contributor

Michael Pettke

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$500.00

6 Contributor address;

City; State; Zip Code

2315A Roosevelt Drive Arlington TX 76016

8 Principal occupation / Job title (See Instructions)

CPA

9 Employer (See Instructions)

4 Date

10/24/2016

5 Full name of contributor

TCLEA

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$1,000.00

6 Contributor address;

City; State; Zip Code

904 Collier Street Fort Worth TX 76102

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

4 Date

10/24/2016

5 Full name of contributor

Anne Coker

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$50.00

6 Contributor address;

City; State; Zip Code

2716 Margaret Drive Arlington TX 76012

8 Principal occupation / Job title (See Instructions)

Self

9 Employer (See Instructions)

Self

4 Date

10/24/2016

5 Full name of contributor

David Wylie

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$100.00

6 Contributor address;

City; State; Zip Code

5712 Cherrywood Ln. Arlington TX 76016

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

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 ADMINISTRATOR

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Bill Waybourn

3 Filer ID (Ethics Commission Filers)

4 Date

10/24/2016

5 Full name of contributor

John White

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$50.00

6 Contributor address;

City: State: Zip Code

4722 Sausalito Drive Arlington TX 76016

8 Principal occupation / Job title (See Instructions)

Attorney

9 Employer (See Instructions)

Self

4 Date

10/24/2016

5 Full name of contributor

Richard Jones

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$50.00

6 Contributor address;

City: State: Zip Code

2204 South Branch Dr. Arlington TX 76001

8 Principal occupation / Job title (See Instructions)

Retired

9 Employer (See Instructions)

Retired

4 Date

10/24/2016

5 Full name of contributor

Tony Pack

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$250.00

6 Contributor address;

City: State: Zip Code

940 N. Peytonville Ave. Southlake TX 76092

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

4 Date

5 Full name of contributor

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

6 Contributor address;

City: State: Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

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 APPRAISAL DIVISION
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 TEXAS ETHICS COMMISSION
 OFFICE ADMINISTRATOR

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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 Bill Waybourn	3 Filer ID (Ethics Commission Filers)
4 Date 10/3/2016	5 Payee name Constant Contact	
6 Amount (\$) 47.88	7 Payee address; City; State; Zip Code www.constantcontact.com	
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
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date 10/4/2016	5 Payee name Murphy Nasica	
6 Amount (\$) 2,574.81	7 Payee address; City; State; Zip Code 815-A Brazos Austin TX 78701	
8 PURPOSE OF EXPENDITURE	(b) Category (See Categories listed at the top of this schedule) Event 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	Office sought Office held
4 Date 10/20/2016	5 Payee name Bunni Pounds & Assoc.	
6 Amount (\$) 1,040.00	7 Payee address; City; State; Zip Code 620 W. State St. Garland TX 75040	
8 PURPOSE OF EXPENDITURE	(c) Category (See Categories listed at the top of this schedule) Consultant Fee	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	Office sought Office held

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 CLERK OF COURTS
 COUNTY OF TARRANT
 TEXAS
 DEPARTMENT OF INFORMATION SYSTEMS
 ADMINISTRATOR

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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 Bill Waybourn		3 Filer ID (Ethics Commission Filers)	
4 Date 10/25/2016		5 Payee name Universal Health Resources			
6 Amount (\$) 400.00		7 Payee address; City; State; Zip Code			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Donation Made By Candidate		(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		Office sought Office held	
4 Date 10/25/2016		5 Payee name Joe T. Garcia's			
6 Amount (\$) 3,798.86		7 Payee address; City; State; Zip Code 2201 N. Commerce St. Fort Worth TX 76164			
8 PURPOSE OF EXPENDITURE		(b) Category (See Categories listed at the top of this schedule) Event 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		Office sought Office held	
4 Date 10/27/2016		5 Payee name Vista Print			
6 Amount (\$) 76.21		7 Payee address; City; State; Zip Code www.VistaPrint.com			
8 PURPOSE OF EXPENDITURE		(c) 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		Office sought Office held	

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 COUNTY CLERK
 TARRANT COUNTY
 TEXAS

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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 Bill Waybourn	3 Filer ID (Ethics Commission Filers)			
4 Date 10/27/2016	5 Payee name Anedot				
6 Amount (\$) 352.55	7 Payee address; City; State; Zip Code www.Anedot.com				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(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:50%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:12.5%;">Office sought</td> <td style="width:12.5%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
4 Date	5 Payee name				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
8 PURPOSE OF EXPENDITURE	(b) Category (See Categories listed at the top of this schedule)	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:50%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:12.5%;">Office sought</td> <td style="width:12.5%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
4 Date	5 Payee name				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
8 PURPOSE OF EXPENDITURE	(c) Category (See Categories listed at the top of this schedule)	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:50%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:12.5%;">Office sought</td> <td style="width:12.5%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		

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 TARRANT COUNTY
 TEXAS

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