

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed: 23
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Brent	MI
	NICKNAME	LAST Chesney	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX; 250 Cape May	APT / SUITE #;	CITY; STATE; ZIP CODE Corpus Christi, TX 78412
	5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (361)	PHONE NUMBER 334-1253
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs.	FIRST Ashley	MI
	NICKNAME	LAST Chesney	SUFFIX
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY; STATE; ZIP CODE 250 Cape May Corpus Christi, TX 78412
8 CAMPAIGN TREASURER PHONE	AREA CODE (361)	PHONE NUMBER 334-1253	EXTENSION
9 REPORT TYPE	<input checked="" 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 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 12	Day 3	Year 2013
11 ELECTION	Month 3	Day 4	Year 2014
	ELECTION DATE		
12 OFFICE	OFFICE HELD (if any) Judge, Nueces County Court 5		13 OFFICE SOUGHT (if known) Nueces County Commissioner Precinct 4
	<p style="text-align: center;">GO TO PAGE 2</p> <p style="text-align: right; font-size: 2em;">2014-034</p>		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME <u>Brent Chesney</u>	15 ACCOUNT # (Ethics Commission Filers)
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16 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> additional pages	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.	
	<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME <hr/> COMMITTEE ADDRESS <hr/> COMMITTEE CAMPAIGN TREASURER NAME <hr/> COMMITTEE CAMPAIGN TREASURER ADDRESS
	<hr/>	
	<hr/>	
	<hr/>	

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 38,500
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 250
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 38,500 37,250
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2,000

18 AFFIDAVIT

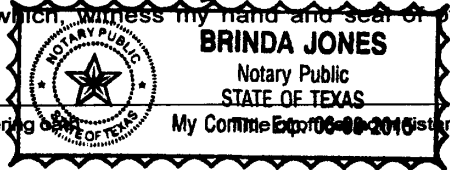
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Brent Chesney
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Brent Chesney, this the 14th day of January, 20 14, to certify which, witness my hand and seal of office.

Brinda Jones Brinda Jones
Signature of officer administering oath Printed name of officer administering oath



**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 11	
2 FILER NAME Brent Chesney		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12-3-13	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mike: Connie Scott	7 Amount of contribution (\$) 5,000	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 5548 CR 81 Robstown, TX 78380		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 12-3-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sam L: Catherine Susser	Amount of contribution (\$) 1,000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3861 Ocean Dr. CC, TX 78411		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12-13-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sico, White, Hoelscher & Braugh LLP	Amount of contribution (\$) 1,000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 802 N. Carancahua # 900 CC, TX 78401		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12-13-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bronca: Ed Baker	Amount of contribution (\$) 1,000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5350 S. Staples #106 CC, TX 78411		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12-13-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindsay Browne	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 802 N. Carancahua Suite 2100 CC, TX 78401		(If travel outside of Texas, complete Schedule T)	
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.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 11	
2 FILER NAME Brent Chesney		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12-13-13	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Cathryn: Alon Wilson	7 Amount of contribution (\$) 250	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 445 Delaine CC, TX 78411		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 12-14-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Charlie Forbes	Amount of contribution (\$) 2,500	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code PO Box 3529 Alice, TX 78333		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12-14-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Denise: Matt Mosser	Amount of contribution (\$) 1,000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code PO Box 145 Aulcark Alice, TX 78333		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12-14-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Pat: Shannon Wilde	Amount of contribution (\$) 1,000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 433 Cape Henry CC TX 78412		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12-14-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Louise: Michael Mintz	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3344 Ocean Dr CC, TX 78411		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 11	
2 FILER NAME Brent Chesney		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12-16-13	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ann: David Engel	7 Amount of contribution (\$) 1,000	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 220 Amistad Cir TX 78404		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 12-16-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellen: Gore Seaman	Amount of contribution (\$) 1,000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 55 Lake Shore Dr CC, TX 78413		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12-16-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patricia: Hank Huss	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 225 Bayridge CC, TX 78411		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12-16-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ron Ranz	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4639 Corona #100 CC, TX 78411		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12-18-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawreen: Mike Pedrotti	Amount of contribution (\$) 1,000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3901 Roscher Rd CC, TX 78418		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 11	
2 FILER NAME Boon Chesney		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12-18-13	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Luis Gutierrez	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 4937 Gaster Dr CC TX 78415		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 12-19-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Lena: Bart Helms	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 418 Cape Henry CC, TX 78412		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12-19-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Carol: Larry Childers	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 14330 Bluefish CC, TX 78418		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12-20-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Amy: Kevin Hives	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 123 Del Mar Blvd CC, TX 78404		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12-20-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Anneliese: Terry Arnold	Amount of contribution (\$) 150.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 245 Circle Dr CC, TX 78411		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 11

2 FILER NAME

Brent Chesney

3 ACCOUNT # (Ethics Commission Filers)

4 Date

12-20-13

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

Brenda: Tom Medary

6 Contributor address; City; State; Zip Code

8145 Marseille Dr CC 78414

7 Amount of contribution (\$)

500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

12-23-13

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

Anne: David Coover

Contributor address; City; State; Zip Code

921 N. Chapparal CC, TX 78401

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12-23-13

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

Amy: Chad Allen

Contributor address; City; State; Zip Code

525 Doddridge CC TX 78411

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12-26-13

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

Marshall: Mark Stockerth

Contributor address; City; State; Zip Code

PO Box 60407 CC, TX 78466

Amount of contribution (\$)

1,000

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12-26-13

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

Gary Ramirez

Contributor address; City; State; Zip Code

802 N. Carancahua # 2000, CC TX 78410

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

11

2 FILER NAME

Brent Chesney

3 ACCOUNT # (Ethics Commission Filers)

4 Date

12-30-13

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

Realty: Jerry Hatcher

6 Contributor address; City; State; Zip Code

4707 Everhart #106 CC TX 78411

7 Amount of contribution (\$)
500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

12-30-13

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

Bill Thau

Contributor address; City; State; Zip Code

9108 S.P. 1D #101 CC, TX 78418

Amount of contribution (\$)
250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12-30-13

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

Tim Longe

Contributor address; City; State; Zip Code

Po Box 260790 CC TX 78426

Amount of contribution (\$)
2,500

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12-30-13

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

Anne Buting

Contributor address; City; State; Zip Code

500 N. Shoreline #307 CC, TX 78411

Amount of contribution (\$)
500

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12-30-13

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

Jeff Ilseng

Contributor address; City; State; Zip Code

11430 Beal CC, TX 78410

Amount of contribution (\$)
500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 11	
2 FILER NAME Brant Chesney		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 1-6-14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindsey Bourque	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 1-6-14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Susan Barclay	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 921 Ayers St Cel, TX 78404		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1-6-14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brad Cordtz	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 401 N. Tancanna Cel, TX 78401		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1-8-14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry Garrett	Amount of contribution (\$) 300.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6226 Gorden Ct. Corpus Christi, TX 78414		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1-8-14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gil Hernandez	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4414 Lake Superior Cel, TX 78413		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 11	
2 FILER NAME Brent Chesney		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 1-8-14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Al Jones	7 Amount of contribution (\$) 1,000	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 3420 Ocean Cir TX 78411		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 1-8-14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Carlson	Amount of contribution (\$) 300.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5250 St. Andrews Cir TX 78413		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1-8-14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fran: Joe Felter	Amount of contribution (\$) 1,000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 48 Lakeshore, CE, TX 78413		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1-9-14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ben Guzman	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6129 Hastings Dr. CE, TX 78414		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1-9-14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parrell Berger	Amount of contribution (\$) 1,000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3103 Winton Rd Houston, TX 77005		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 11	
2 FILER NAME Brett Chesney		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 1-9-14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bob Parker	7 Amount of contribution (\$) 1,000	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code PO Box 9609 CE TX 78409		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 1-9-14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whigginer Rumbly	Amount of contribution (\$) 1,000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 123 N. Camino CE TX 78401		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1-9-14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gene Garcia	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 8095. Post, CE TX 78405		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1-9-14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee Stockseth	Amount of contribution (\$) 1,000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 8022 Marselle Dr. CE TX 78414		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 1-9-14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dee Deborah: Kristy Wilbur	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 802 N. Carancahua #1270 CE TX 78410		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <u>11</u>	
2 FILER NAME <u>Brent Chesney</u>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <u>1-10-14</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Scott Lemanski</u>	7 Amount of contribution (\$) <u>250.00</u>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <u>400 Mann St Cel TX 78401</u>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <u>1-10-14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Alan Storer</u>	Amount of contribution (\$) <u>500.00</u>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <u>242 Cape May Cel TX 78412</u>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <u>1-13-14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Cindy & Jason Ferguson</u>	Amount of contribution (\$) <u>500.00</u>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <u>4949 Cherry Hills Cel TX 78413</u>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <u>1-13-14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>John Taylor</u>	Amount of contribution (\$) <u>750.00</u>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <u>Po Box 210965 Cel TX 78427</u>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <u>1-13-14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Patti John Flood</u>	Amount of contribution (\$) <u>250.00</u>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <u>802 N. Carancahua #900 Cel TX 78401</u>		(If travel outside of Texas, complete Schedule T)	
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.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 11

2 FILER NAME

Bret Chesney

3 ACCOUNT # (Ethics Commission Filers)

4 Date

1-13-14

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

Crystal & Glenn Lyons

6 Contributor address; City; State; Zip Code

13901 Cabana North Cir TX 78418

7 Amount of contribution (\$)

500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1-13-14

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

John & Sofia Legeria

Contributor address; City; State; Zip Code

704 Louisiana, CC TX 78404

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1-13-14

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

Amy Reagan Brown

Contributor address; City; State; Zip Code

Cape May CC TX 78412

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

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.

PLEGGED CONTRIBUTIONS



SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:

8

2 FILER NAME

Boout Chesney

3 ACCOUNT # (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED PLEDGES:

\$

5 Date

6 Full name of pledgor out-of-state PAC (ID#)

8 Amount of pledge (\$)

9 In-kind description (if applicable)

~~12-10-13~~
12-6-2013

Katherine Daniel Pain

7 Pledgor address; City; State; Zip Code

4759 Ocean, CC TX 78415

500.00

(If travel outside of Texas, complete Schedule T)

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

Date

Full name of pledgor out-of-state PAC (ID#)

Amount of pledge (\$)

In-kind description (if applicable)

~~12-10-13~~
12-6-2013

Harold Sheckley

Pledgor address; City; State; Zip Code

221 S. Sterling Corpus Christi, TX 78401

1,000

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor out-of-state PAC (ID#)

Amount of pledge (\$)

In-kind description (if applicable)

12-2013
6

Marshall: Kristy Willerson

Pledgor address; City; State; Zip Code

802 N. Caranawa #1270 CC TX 78470

500.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor out-of-state PAC (ID#)

Amount of pledge (\$)

In-kind description (if applicable)

12-2013
-8

Willard: Carol Hammonds

Pledgor address; City; State; Zip Code

4418 Ocean 78412

1,000

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor out-of-state PAC (ID#)

Amount of pledge (\$)

In-kind description (if applicable)

12-10-13

Todd Robinson

Pledgor address; City; State; Zip Code

102 North Steeles 78411

500.00

(If travel outside of Texas, complete Schedule T)

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.

* - dates are approximate but no sooner than reported time.

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:

8

2 FILER NAME

Brent Chesney

3 ACCOUNT # (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED PLEDGES: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨

\$

5 Date

6 Full name of pledgor out-of-state PAC (ID# _____)

8 Amount of pledge (\$)

9 In-kind description (if applicable)

12-2014

Allison: Rob Webster
7 Pledgor address; City; State; Zip Code

500.00

402 Mcrammer
CC, TX 78411

(If travel outside of Texas, complete Schedule T)

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

Date

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

Amount of pledge (\$)

In-kind description (if applicable)

12-10
2013

Beth: Jeff Schlimmer
Pledgor address; City; State; Zip Code

250.00

8106 Valdemerillo
CC, TX 78414

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of pledge (\$)

In-kind description (if applicable)

12-10
2013

Stephanie: John Martinez
Pledgor address; City; State; Zip Code

1,000

719 S. Shervline Suite 500
CC, TX 78401

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of pledge (\$)

In-kind description (if applicable)

12-10
2013

Scott Meares
Pledgor address; City; State; Zip Code

250.00

433 Cape Cod, CC, TX
78412

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of pledge (\$)

In-kind description (if applicable)

12-10
2013

Helen: Dutch Wool
Pledgor address; City; State; Zip Code

1,000

301 Cape Fear, CC, TX
78412

fundraiser
expenses

(If travel outside of Texas, complete Schedule T)

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.

PLEGGED CONTRIBUTIONS



SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B: **8**

2 FILER NAME
Brent Cherry

3 ACCOUNT # (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED PLEDGES: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨

\$

5 Date 12-12-13	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Bill Richmond	8 Amount of pledge (\$) 500	9 In-kind description (if applicable)
	7 Pledgor address; City; State; Zip Code 5109 Richmond, CC, TX 78412	(If travel outside of Texas, complete Schedule T)	

10 Principal occupation / Job title (See Instructions)	11 Employer (See Instructions)
--	--------------------------------

Date 12-12-13	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Gregg Silverman	Amount of pledge (\$) 500.00	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code 613 Elizabeth CC, TX 78404	(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
---	-----------------------------

Date 12-12-13	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Gary Hall	Amount of pledge (\$) 500.00	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code 400 Mann #700 CC, TX 78401	(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
---	-----------------------------

Date 12-12-13	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Les Cassidy	Amount of pledge (\$) 250.00	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code 814 Leopard, CC, TX 78401	(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
---	-----------------------------

Date 12-15-13	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Richard Crews	Amount of pledge (\$) 500.00	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code 800 # Shoreline Suf 2000 CC, TX 78401	(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
---	-----------------------------

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:

8

2 FILER NAME

Boat Chesney

3 ACCOUNT # (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED PLEDGES: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨

\$

5 Date

6 Full name of pledgor out-of-state PAC (ID# _____)

8 Amount of pledge (\$)

9 In-kind description (if applicable)

12-15-13

Chris Walker
7 Pledgor address; City; State; Zip Code

250.00

400 Mann Suite 700
CC-TX 78401

(If travel outside of Texas, complete Schedule T)

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

Date

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

Amount of pledge (\$)

In-kind description (if applicable)

12-15-13

Evon: Bill Kelly
Pledgor address; City; State; Zip Code

500.00

1402 W Chapperal
CC-TX 78401

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of pledge (\$)

In-kind description (if applicable)

12-15-13

Bhakti: Kevin Madkarni
Pledgor address; City; State; Zip Code

1,000

P.O. Box 9094
CC-TX 78469

reception

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of pledge (\$)

In-kind description (if applicable)

12-15-13

Roy Gonzalez
Pledgor address; City; State; Zip Code

250.00

600 W Carreha Suite 807
CC-TX 78401

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of pledge (\$)

In-kind description (if applicable)

12-15-13

Bonnie: Dennis Berry
Pledgor address; City; State; Zip Code

1,000

1414 Colero Way
CC-TX 78409

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

PLEGGED CONTRIBUTIONS

A

SCHEDULE B

The Instruction Guide explains how to complete this form. 1 Total pages Schedule B: **8**

2 FILER NAME: **Brent Chesney** 3 ACCOUNT # (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED PLEDGES: $\Rightarrow \Rightarrow \Rightarrow \Rightarrow \Rightarrow \Rightarrow$ \$

5 Date 12-15-13	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard Leshin	8 Amount of pledge (\$) 500.00	9 In-kind description (if applicable)
	7 Pledgor address; City; State; Zip Code 800 W Shoreline CC, TX Suite 300H 78401	(If travel outside of Texas, complete Schedule T)	

10 Principal occupation / Job title (See Instructions) 11 Employer (See Instructions)

Date 12-15-13	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeff Rank	Amount of pledge (\$) 250.00	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code 10235 S PFD, CC, TX 78418	(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date 12-15-13	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rich Underhale	Amount of pledge (\$) 250.00	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code 800 W Shoreline Suite 200 CC, TX 78401	(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date 12-15-13	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Debbie Rodriguez	Amount of pledge (\$) >50.00	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code 713 Aves, CC, TX 78404	(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date 12-15-13	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amanda: Steve McClure	Amount of pledge (\$) 250.00	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code PO Box 39434 Beaton CC, TX 784163	(If travel outside of Texas, complete Schedule T)	

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.

PLEGGED CONTRIBUTIONS

8

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:

8

2 FILER NAME

Brent Chesney

3 ACCOUNT # (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED PLEDGES:

⇒ ⇒ ⇒ ⇒ ⇒ ⇒

\$

5 Date

12-15-13

6 Full name of pledgor out-of-state PAC (ID#: _____)

Gwendolyn Jerry Moore

7 Pledgor address; City; State; Zip Code

*35 Hewitt CC TX
78404*

8 Amount of pledge (\$)

1,000

9 In-kind description (if applicable)

(If travel outside of Texas, complete Schedule T)

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

Date

12-15-13

Full name of pledgor out-of-state PAC (ID#: _____)

Liana Arnold Gonzalez, Jr.

Pledgor address; City; State; Zip Code

*4609 Grand Lake Drive
CC TX 78416*

Amount of pledge (\$)

500.00

In-kind description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

~~*12-15-13*~~
1-7-13

Full name of pledgor out-of-state PAC (ID#: _____)

Edouard Anastasi

Pledgor address; City; State; Zip Code

*P.O. Box 331308
CC TX 78416*

Amount of pledge (\$)

1,000

In-kind description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

~~*12-15-13*~~
1-7-13

Full name of pledgor out-of-state PAC (ID#: _____)

Sandra Alex Azeli

Pledgor address; City; State; Zip Code

*P.O. Box 8155
2505 Windholten
78414
78468*

Amount of pledge (\$)

500

In-kind description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

~~*12-15-13*~~
1-7-13

Full name of pledgor out-of-state PAC (ID#: _____)

Avinash Peggy Ahuja

Pledgor address; City; State; Zip Code

*6217 Lost Creek
78413*

Amount of pledge (\$)

1,000

In-kind description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

PLEGGED CONTRIBUTIONS

0 8

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B: **8**

2 FILER NAME

3 ACCOUNT # (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED PLEDGES: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨

\$

5 Date

6 Full name of pledgor out-of-state PAC (ID# _____)

8 Amount of pledge (\$)

9 In-kind description (if applicable)

1-7-14

Loan: Jerry Crawford

7 Pledgor address; City; State; Zip Code

250.00

*5133 Cape Ann
CC, TX 78412*

(If travel outside of Texas, complete Schedule T)

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

Date

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

Amount of pledge (\$)

In-kind description (if applicable)

1-7-14

Char: Cliff Atwood

Pledgor address; City; State; Zip Code

250.00

*358 University CC, TX
78412*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of pledge (\$)

In-kind description (if applicable)

1-7-14

Chris: Robert Adler

Pledgor address; City; State; Zip Code

250.00

*106 Rainbow Lane
CC, TX 78411*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of pledge (\$)

In-kind description (if applicable)

1-7-14

Loan: Mark Herndon

Pledgor address; City; State; Zip Code

750

*101 Seabird, Port Aransas, TX
78373*

reception

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of pledge (\$)

In-kind description (if applicable)

1-7-14

S. Harner: Bryan Gulley

Pledgor address; City; State; Zip Code

750

*14202 Playa Del Rey CC, TX
78418*

reception

(If travel outside of Texas, complete Schedule T)

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.

PLEGGED CONTRIBUTIONS



SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:

8

2 FILER NAME

Brent Chesney

3 ACCOUNT # (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED PLEDGES:

⇒ ⇒ ⇒ ⇒ ⇒ ⇒

\$

5 Date

1-7-14

6 Full name of pledgor

out-of-state PAC (ID# _____)

Rebecca Gray Hansen

7 Pledgor address; City; State; Zip Code

1002 Anselope Street
CE TX 78401

8 Amount of pledge (\$)

9 In-kind description (if applicable)

500.00
reception

(If travel outside of Texas, complete Schedule T)

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

Date

Full name of pledgor

out-of-state PAC (ID# _____)

Pledgor address; City; State; Zip Code

Amount of pledge (\$)

In-kind description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor

out-of-state PAC (ID# _____)

Pledgor address; City; State; Zip Code

Amount of pledge (\$)

In-kind description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor

out-of-state PAC (ID# _____)

Pledgor address; City; State; Zip Code

Amount of pledge (\$)

In-kind description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor

out-of-state PAC (ID# _____)

Pledgor address; City; State; Zip Code

Amount of pledge (\$)

In-kind description (if applicable)

(If travel outside of Texas, complete Schedule T)

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.

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form. 1 Total pages Schedule E:
1

2 FILER NAME **Brent Chesney** 3 ACCOUNT # (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS: ⇒ ⇒ ⇒ ⇒ ⇒ ⇒ \$

5 Date of loan **12-3-13** 7 Name of lender **Brent Chesney** out-of-state PAC (ID#: _____) 9 Loan Amount (\$) **2,000**

6 Is lender a financial institution? **Y** **N** 8 Lender address; City; State; Zip Code **250 Cape May, Corpus Christi, TX 78412** 10 Interest rate **1%**

11 Maturity date **3-4-14**

12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions)

14 Description of Collateral none 15 Check if personal funds were deposited into political account

16 GUARANTOR INFORMATION 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 out-of-state PAC (ID#: _____) Loan Amount (\$)

Is lender a financial institution? Lender address; City; State; Zip Code Interest rate

Y N Maturity date

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Description of Collateral none Check if personal funds were deposited into political account

GUARANTOR INFORMATION 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

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME Brent Chesney	3 ACCOUNT # (Ethics Commission Filers)
----------------------------------	--------------------------------------	---

4 Date 12-3-13	5 Payee name NCRP
--------------------------	-----------------------------

6 Amount (\$) 1,250	7 Payee address; City; State; Zip Code 4639 Corona Corpus Christi TX 78411
-------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) Filing fee
---------------------------------	--	---

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

Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
-------------	--------------------------------------

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
------------------------	--	---

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

Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
-------------	--------------------------------------

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
------------------------	--	---

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

Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
-------------	--------------------------------------

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
------------------------	--	---

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED