

# 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:  6																					
3 CANDIDATE / OFFICEHOLDER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; font-size: small;">MS / MRS / MR</td> <td style="width:25%; font-size: small;">FIRST</td> <td style="width:25%; font-size: small;">MI</td> <td style="width:25%;"></td> </tr> <tr> <td>Mr.</td> <td>Samuel</td> <td>Loyd</td> <td></td> </tr> <tr> <td style="font-size: small;">NICKNAME</td> <td style="font-size: small;">LAST</td> <td style="font-size: small;">SUFFIX</td> <td></td> </tr> <tr> <td>Loyd</td> <td>Neal</td> <td>Jr.</td> <td></td> </tr> </table>	MS / MRS / MR	FIRST	MI		Mr.	Samuel	Loyd		NICKNAME	LAST	SUFFIX		Loyd	Neal	Jr.		<div style="border: 1px solid black; padding: 5px;"> <p style="text-align: center; margin: 0;"><b>OFFICE USE ONLY</b></p> <p style="font-size: x-small; margin: 0;">Date Received</p> <p style="text-align: center; margin: 5px 0;">FILED FOR RECORD AT 11:55 AM JUL 13 2017</p> <p style="text-align: center; font-size: x-small; margin: 0;">KARA SANDS CLERK COUNTY SEAL HILLES COUNTY TEXAS BY <u>Deidre</u> DEPUTY <u>Syamen</u></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%; border-bottom: 1px solid black;">Receipt #</td> <td style="width:50%; border-bottom: 1px solid black;">Amount \$</td> </tr> <tr> <td colspan="2" style="border-bottom: 1px solid black;">Date Processed</td> </tr> <tr> <td colspan="2" style="border-bottom: 1px solid black;">Date Imaged</td> </tr> </table> </div>	Receipt #	Amount \$	Date Processed		Date Imaged	
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4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; font-size: small;">ADDRESS / PO BOX;</td> <td style="width:25%; font-size: small;">APT / SUITE #;</td> <td style="width:25%; font-size: small;">CITY;</td> <td style="width:25%; font-size: small;">STATE;</td> <td style="width:25%; font-size: small;">ZIP CODE</td> </tr> <tr> <td colspan="5">P. O. Box 8347 Corpus Christi, Texas 78468-8347</td> </tr> </table>			ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	P. O. Box 8347 Corpus Christi, Texas 78468-8347															
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10 PERIOD COVERED	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; text-align: center; font-size: x-small;"> Month    Day    Year  01 / 01 / 2017 </td> <td style="width:10%; text-align: center; font-size: x-small;">THROUGH</td> <td style="width:40%; text-align: center; font-size: x-small;"> Month    Day    Year  06 / 30 / 2017 </td> </tr> </table>			Month    Day    Year 01 / 01 / 2017	THROUGH	Month    Day    Year 06 / 30 / 2017																		
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12 OFFICE	OFFICE HELD (if any)  County Judge	13 OFFICE SOUGHT (if known)																						

**GO TO PAGE 2**

#2017-047

# SUBTOTALS - C/OH

# FORM C/OH COVER SHEET PG 3

19 FILER NAME  Samuel L. Neal, Jr.		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
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	\$ 5,263.05
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	\$

# 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.

<b>1</b> Total pages Schedule F1: 3	<b>2</b> FILER NAME Samuel L. Neal, Jr.	<b>3</b> Filer ID (Ethics Commission Filers) <b>RECEIVED</b>
<b>4</b> Date 1-10-17	<b>5</b> Payee name Port Aransas Community Theatre	
<b>6</b> Amount (\$) \$ 450.00	<b>7</b> Payee address; City; State; Zip Code P. O. Box 835 Port Aransas, Texas 78373	<b>JUL 13 2017</b> KARA SANDS CLERK OF THE COUNTY COURT NUECES COUNTY, TEXAS
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) advertising	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense. FILED FOR RECORD 11:55 AM JUL 13 2017
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held KARA SANDS CLERK OF THE COUNTY COURT, NUECES COUNTY, TEXAS
Date 1-10-17	Payee name Dr. Hector P Garcia Memorial Foundation	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code P. O. Box 10307 Corpus Christi, Texas 78460-0307	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising expense - sponsor table of 10 & 1/2 page in program 1-17-17	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 2-28-17	Payee name PAGA, c/o Cefe Valenzuela	
Amount (\$) \$ 100.00	Payee address; City; State; Zip Code 5948 High Meadow Corpus Christi, Texas 78413	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) advertising - Christmas goodie bag for students	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

ATTACH ADDITIONAL COPIES OF

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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<b>4</b> Date 2-28-17	<b>5</b> Payee name Mike Pusley				
<b>6</b> Amount (\$) \$ 653.73	<b>7</b> Payee address; City; State; Zip Code 4958 Castle River Corpus Christi, Texas 78410				
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) advertising - 1/2 table sponsor for 3-9-17 Lincoln-Reagan dinner	<b>(b)</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 style="width:100%; border:none;"> <tr> <td style="width:50%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%; border:none;">Candidate / Officeholder name</td> <td style="width:25%; border:none;">Office sought</td> <td style="width:25%; border:none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
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Date 2-28-17	Payee name Nueces County Junior Livestock Show				
Amount (\$) \$ 800.00	Payee address; City; State; Zip Code P. O. Box 260968 Corpus Christi, Texas 78413				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) gift/award/memorial expense Eight (8) add ons to students	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
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Date 5-8-17	Payee name United CC Chamber of Commerce				
Amount (\$) \$ 600.00	Payee address; City; State; Zip Code 602 N. Staples, Suite 150 Corpus Christi, Texas 78401				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) advertising expense - sponsor table of 8 for 3-29 State of the County	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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<b>4</b> Date 5-8-17	<b>5</b> Payee name Nueces County A&M Club				
<b>6</b> Amount (\$) \$ 275.00 <sup>(1)</sup>	<b>7</b> Payee address; City; State; Zip Code 3714 Berkeley Corpus Christi, Texas 78414				
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) advertising expense - sponsor for 6-9 golf tournament	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
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Date 6-16-17	Payee name Claudia Lobell				
Amount (\$) \$ 884.32	Payee address; City; State; Zip Code 6409 Clearlake Circle Corpus Christi, Texas 78413				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) travel to state convention solicitation/fundraising food/beverage expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
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