CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

		1 Filer ID (Ethics Commission Filers)	2 Total pages filed:	
The C/OH Instruction Gu	ide explains how to complete this form.		4	
3 CANDIDATE /- OFFICEHOLDER NAME	MS / MRS / MR FIRST Robert NICKNAME LAST	J SUFFIX	OFFICE USE ONLY Date Received	
	Smith	CITY: STATE; ZIP CODE	The second of th	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	address / PO BOX; APT / SUITE #; 310 Faircrest Drive	Garland TX 75040	JAN 1 1 2018	
Change of Address		EXTENSION	Contraction of	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (469) 223-4723		Date Hand-delivered or Date Postmarked O	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST April	MI M	Par Processed Tol8	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)		SUITE #; CITY; STATE; Garland TX	ZIP CODE 75040	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (214) 675-0256	EXTENSION		
9 REPORT TYPE	January 15 30th day before		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month Day Year 07 15 2017	THROUGH 01	Day Year 15 2018	
11 ELECTION	ELECTION DATE Month Day Year Prima 05 06 2017 Sense	Description		
12 OFFICE	OFFICE HELD (if any) Garland City Councilman Distr	ict 8	own)	
GO TO PAGE 2				

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

		15	Filer ID (Ethics Commission Filers)
14 C/OH NAME			,
	pert John Smith	TO THE PROPERTY OF THE PROPERT	JRES MADE BY POLITICAL COMMITTEES TO
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR N SUPPORT THE CAND KNOWLEDGE OR CO OF SUCH EXPENDIT	HOUT THE CANDIDATE'S OR OFFICEHOLDER'S INFORMATION ONLY IF THEY RECEIVE NOTICE	
	COMMITTEE TYPE	COMMITTEE NAME	
-			
	GENERAL		
		COMMITTEE ADDRESS	
	SPECIFIC		
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAN AIGH TIPE	
Additional Pages			
Additional Lages		COMMITTEE CAMPAIGN TREASURER ADDRESS	
		COMMITTEE CAMPAIGN THEAGONETY	
17 CONTRIBUTION TOTALS	1. TOTAL PLEDG	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ	AN ZED \$
	2. TOTA	L POLITICAL CONTRIBUTIONS R THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$
50 15 00 00	(OTHE	R THAN FLEDGES, LOANS, ON COMMITTEE OF THE STATE	
EXPENDITURE	3. TOTAL	POLITICAL EXPENDITURES OF \$100 OR LESS,	\$
TOTALS		SS ITEMIZED	Ψ
	4. TOTA	L POLITICAL EXPENDITURES	\$
CONTRIBUTION		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST	TDAY \$
BALANCE	OF RE	EPORTING PERIOD	
OUTSTANDING	e TOTA	L PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF	THE D TOOL OF
LOAN TOTALS	6. TOTAL	DAY OF THE REPORTING PERIOD	\$ 5001.00
18 AFFIDAVIT	MAYRA SULLIVAN	true and correct and includes all in under Title 15, Election Code.	perjury, that the accompanying report is formation required to be reported by me
	ary ID # 12680149)/
	Commission Expires ebruary 10, 2021		
STATE OF TEXAS	ebruary 10, 202.	Signature of Ca	ndidate or Officeholder
AFFIX NOTARY STA	MP/SEALABOVE	^ =====================================	i Ita
	il I l f - vo vo	a butho said by Laux + Sparit	this the
Sworn to and subs	10		,
day of panu	any, 20 18	_, to certify which, witness my hand and seal of office	e,
1()()	1	<i>l l l l</i>	1 1-35-1
V X win	Dallivan	a Mayora Dullivan (ouncil HSSiStant
Signature of officer	r administering oat	h Printed name of officer administering oath	Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	9 FILER NAME 20 Filer ID (Ethics Comm		mission Filers)		
	Robert John Smith				
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE		AMOUNT		
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$		
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$		
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$		
4.	SCHEDULE E: LOANS		\$ 5001.00		
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$		
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$		
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	CONTRIBUTIONS	\$		
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$		
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FU	INDS	\$		
10	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO	A BUSINESS OF C/OH	\$		
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL C	ONTRIBUTIONS	\$		
12	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBURETURNED TO FILER	TIONS	\$		

LOANS

SCHEDULE E

The I	Instruction Guide explains how to comple	ete this form.	1 Total pages Schedule E:
FILER NAME	3 Filer ID (Ethics Commission Filers)		
TOTAL OF UN	\$		
Date of loan	7 Name of lender		9 Loan Amount (\$)
Is lender a financial Institution?			10 Interest rate
Y N	,	11 Maturity date	
Principal occupati	ion / Job title (See Instructions)	13 Employer (See Instructions)	
14 Description of Collateral		15 Check if personal funds were account (See Instructions)	e deposited into political
GUARANTOR INFORMATION	17 Name of guarantor		19 Amount Guaranteed (\$)
_	To Guarantoi aderese,	State; Zip Code	•
not applicable	ation (See Instructions)	21 Employer (See Instructions)	
J Principal Occupa	dion (see mandations)		
Date of loan	Name of lender	PAC (ID#:)	Loan Amount (\$)
Is lender a financial	Lender address; City;	State; Zip Code	Interest rate
Institution?			Maturity date
	tion / Job title (See Instructions)	Employer (See Instructions)	
Description of Collateral		Check if personal funds wer account (See Instructions)	e deposited into political
GUARANTOR INFORMATION	Name of guarantor		Amount Guaranteed (\$)
	Guarantor address; City;	State; Zip Code	
not applicab		Employer (See Instructions)	
Principal Occupation (See Instructions)		Employer (See Instructions)	
		OPIES OF THIS SCHEDULE AS	NEEDED
	ATTACH ADDITIONAL C f lender is out-of-state PAC, please see	OFIES OF THIS SCHEDULE AS	ITEEDED