### STATE / COUNTY CHAIR CAMPAIGN FINANCE REPORT

#### FORM SC C/OH COVER SHEET PG 1

The SC C/OH Instruct	tion Guide explains how to complete this form.	2 Total pages filed:	
3 CANDIDATE NAME	MS/MRS/MR FIRST MI SAMMY G	OFFICE USE ONLY	
	NICKNAME LAST J SUFFIX	Date Received	
	FARMER		
4 CANDIDATE ADDRESS	ADDRESS / PO BOX; JAPT / SUITE #; CITY; STATE; ZIP CODE 6108 JAIR WAY Dr.	FEB 2 8 2018	
	San Angelo TX 76904	0/0	
5 CANDIDATE	AREA CODE PHONE NUMBER EXTENSION		
PHONE	(325 3741810		
6 CAMPAIGN TREASURER	MS/MRS/MR FIRST MI	Date Hand-delivered or Date Postmarked	
NAME	Jeana M	Receipt # Amount \$	
	NICKNAME LAST SUFFIX	Date Processed	
	Farmer		
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; 5108 JAIRWAY Dr	ZIP CODE	
(Residence or Business)	SAN Angelo TX 76904		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION 3257 212 3886		
9 REPORT TYPE	January 15     30th day before convention / election	Runoft	
	July 15 Sth day before convention / election	Final report (Attach SC C/OH - FR)	
10 PERIOD COVERED	Month Day Year Month	Day Year   / 18	
11 CONVENTION/ ELECTION DATE	Month Day Year 12 OFFICE SOLIGHT 3 6 18 County Commisses Primary Pet 2 Jom the	COUNTY CHAIR COUNTY CHAIR COUNTY CHAIR COUNTY CHAIR	
13 POLITICAL PARTY	COUNTY (If Applicable)		
	Republican	-	
	GO TO PAGE 2		
Forms provided by Texas	Ethics Commission www.ethics.state.tx.us	Revised 9/8/201	

### **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT**

# FORM C/OH COVER SHEET PG 2

14 C/OH NAME MY, SA	mmu	Q. Farmer	15 Filer ID (Ethics Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S)	SUPPORT THE CAN	NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPE DIDATE / OFFICENCIDER. THESE EXPENDITURES MAY HAVE BEEN MAD ONSENT. CANDIDATES AND OFFICENCIDERS ARE REQUIRED TO REPORT URES.	E WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S
	COMMITTEE TYPE	COMMITTEE NAME COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
Additional Pages		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION TOTALS		L POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITE	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		
EXPENDITURE TOTALS		POLITICAL EXPENDITURES OF \$100 OR LESS, S ITEMIZED	\$ 0
	4. TOTAL	POLITICAL EXPENDITURES	\$ 13430.36 IST DAY \$ 2362.14
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LA CORTING PERIOD	ST DAY \$ 2362,14
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS C AY OF THE REPORTING PERIOD	DF THE \$
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.			
AFFIX NOTARY STAM			
Sworn to and subscr day of <u>Februa</u>	ribed before me, I	to certify which, witness my hand and seal of office	, this the $23.3$
<i>VOm Hudso</i> Signature of officer a	~	VONA HUDSC UD M L	
Forms provided by Texas Et	hics Commission	Comm. Co. 18	Revised 9/8/2015

r. <u>S'AMMY</u> <u>J.</u> <u>Harmer</u> 21. <u>SCHEDULE</u> <u>SUBTOTALS</u> <u>SUBTOT</u> NAME OF SCHEDULE	Summy       G. Harmer         21. Schedule subtofals       Subtofal         NAME OF SCHEdule       Subtofal         1.       SCHEdule A1: MONETARY POLITICAL CONTRIBUTIONS       \$ 103244.         2.       SCHEdule A1: MONETARY POLITICAL CONTRIBUTIONS       \$ -6         3.       SCHEdule A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS       \$ -6         3.       SCHEdule B: Pledged contributions       \$ -6         4.       SCHEdule E: LOANS       \$ -6         5.       SCHEdule F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS       \$ /3,430,3         6.       SCHEdule F2: UNPAID INCURRED OBLIGATIONS       \$ -6         7.       SCHEdule F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS       \$ -6         8.       SCHEdule F4: EXPENDITURES MADE BY CREDIT CARD       \$ -6         9.       SCHEdule F4: EXPENDITURES MADE FROM PERSONAL FUNDS       \$ -6         10.       SCHEdule H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH       \$ -6         11.       SCHEdule H: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS       \$ -6         11.       SCHEdule H: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS       \$ -6	s	UBTOTALS - SC C/OH	FORM SC C/OH COVER SHEET PG 3
21. SCHEDULE SUBTOTALS       SUBTOTALS         1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS       \$ 1037         2. SCHEDULE A1: MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS       \$ 1037         2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS       \$ 0         3. SCHEDULE B: PLEDGED CONTRIBUTIONS       \$ 0         4. SCHEDULE E: LOANS       \$ 0         5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS       \$ 13,431         6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS       \$ 0         7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS       \$ 0         8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD       \$ 0         9. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD       \$ 0         9. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD       \$ 0         9. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD       \$ 0         9. SCHEDULE F4: EXPENDITURES MADE FROM PERSONAL FUNDS       \$ 0         10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH       \$ 0         11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS       \$ 0         11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS       \$ 0         12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS       \$ 0	21. SCHEDULE SUBTOTALS       SUBTOTAL         21. SCHEDULE       SCHEDULE         1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS       \$ 10324,         2. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS       \$ 10324,         2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS       \$ -6         3. SCHEDULE B: PLEDGED CONTRIBUTIONS       \$ -6         4. SCHEDULE E: LOANS       \$ -6         5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS       \$ 13430, -5         6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS       \$ -6         7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS       \$ -6         8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD       \$ -6         9. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD       \$ -6         9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS       \$ -6         10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH       \$ -6         11. SCHEDULE H: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS       \$ -6         11. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS       \$ -6		CANDIDATE NAME Q. Farmer	20. Filer ID (Ethics Commission Filers)
2.       SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS       \$         3.       SCHEDULE B: PLEDGED CONTRIBUTIONS       \$         4.       SCHEDULE E: LOANS       \$         5.       SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS       \$/3,430         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 FUNDS       \$         10.       SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS       \$         11.       SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS       \$         12.       SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS       \$	2.       SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS       \$         3.       SCHEDULE B: PLEDGED CONTRIBUTIONS       \$         4.       SCHEDULE E: LOANS       \$         5.       SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS       \$/3,430,5         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 FUNDS       \$         10.       SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS       \$         11.       SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS       \$         11.       SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS       \$		SCHEDULE SUBTOTALS	
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9.       SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS       \$         10.       SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH       \$         11.       SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS       \$         12.       SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS       \$	9.       SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS         10.       SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH         11.       SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS         12.       SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL C	CONTRIBUTIONS \$
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11.       SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS       \$         12.       SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS       \$	11.     SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS     \$       12.     SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS     \$	9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUN	NDS \$ O-
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		12.		ions \$
		12.		IONS \$

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MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Scheduler A1:
2 FILER NAME 5 Sammy G. F-armer 4 Date 5 Full parme of contributor □ out-of-state PAC (ID#:)	3 Filer ID (Ethics Commission Filers)
4 Date 5 Full parme of contributor □out-of-state PAC (ID#: 1/27/18 Lincla D. Williams 6 Contributor address; City; State; Zip Code 1866 Calla Sendara 5an Hngelo TX 76904	7 Amount of contribution (\$) $$ 50^{00}$
8 Principal occupation / Job title (See Unstructions) 9 Employer (See Instructions)	tions)
Date Bruchard 1/27/18 Contributor address; 1/27/18 Contributor address; 1610 Stonelake Or SANANGE/0 TX 76904	Amount of contribution (\$) $\ddagger 100^{90}$
Principal occupation / Job title (See Instructions) Employer (See Instructions)	tions)
Date Full name of contributor I 27/18 Full name of contributor Elizabeth Givind Staff Contributor address; City; State; Zip Code III5 Live Oak San Angelo TX 76901 Principal occupation / Job title See Instructions) Employer (See Instructions)	Amount of contribution (\$) $$50^{00}$
Principal occupation / Job title (See Instructions) Employer (See Instructions)	tions)
Date Full name of contributor 1/27/18 Denise Smith contributor address; City: State: Zip Code 1718 Caletus Bluff SAN Antonio TX 78258	Amount of contribution $(\$)$ $\$350^{\circ\circ\circ}$
Principal occupation / Job title (See Instructions) Employer (See Instructions)	tions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS N If contributor is out-of-state PAC, please see instruction guide for additional	
Forms provided by Texas Ethics Commission www.ethics.state.tx.us	Revised 9/8/20

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME MV. SAMMY G. Farmer 4 Date 5 Full name or contributor aut-of-state PAC (ID#:) Part Harmony Harmony Contributor	3 Filer ID (Ethics Commission Filers)
127/18 6 Contributor address; City; State; Zip Code 6624 Pine hurst Dr. 541 Angelo TX 76904	7 Amount of contribution (\$) $$500^{00}$
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instruct	tions)
Date Full name of contributor out-of-state PAC (10#:) 1/27/18 Randqll ROSS Contributor address; 5510 Enclave Ct. Zip Code 5510 Enclave Ct. 76904	Amount of contribution (\$) $\ddagger 200, 00$
Principal occupation / Job title (See Instructions) Employer (See Instructions)	tions)
Date       Full name of contributor       Out-of-state PAC (ID#)         Charles & Carol ANN BONDS       Contributor address:       City; State; Zip Code         1/27/18       Contributor address:       City; State; Zip Code         5314       Beverly Dr.         56n       Angelo       7X         Principal occupation / Job title (See Instructions)       Employer (See Instructions)	Amount of contribution (\$) (100,00)
Date Full name of contributor [] out-of-state PAC (10#:) 1/27/18 Gerrit Dragt Contributor address: Sity: State: Zip Code 685 W. Rathiff Rd. SAN ANGELO TX 76904	Amount of contribution (\$) $$250^{00}$
Principal occupation / Job title (See Instructions) Employer (See Instructions)	stions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS N	EEDED
If contributor is out-of-state PAC, please see instruction guide for additiona	I reporting requirements.

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MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Gulde explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME My Sammy Q. Farmer	3 Filer ID (Ethics Commission Filers)
4 Date 5 Full name of contributorout-of-state PAC (ID#:)	7 Amount of contribution (\$)
1/27/18 Bob Crill 6 contributor address; 840 W, Hand St. City; State; Zip Code 540 Angelo Jx 7/6903	\$20000
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	tions)
Date Full name of contributor 🔲 out-of-state PAC (ID#:)	Amount of contribution (\$)
1/27/18 Tom Abbott contributor address; City: State; Zip Code 1514 Barbara Ave. EAN ANGELO TX 76904	\$ 100,00
Principal occupation / Job title (See Instructions) Employer (See Instructions)	tions)
Date Full name of contributor out-of-state PAC (ID#: JOHN DOVIS Contributor address: City: State: Zip Code P,O.BOX 888 ROCKSPCINGS TX 78880	Arrount of contribution (\$) $\frac{1}{2} / 00 = 00$
Principal occupation / Job title (See Instructions) Employer (See Instructions)	tions)
Date Full name of contributor out-of-state PAC (104:) Bill Kohutek Contributor address: Bluff Circle 2888 Red Bluff Circle San Angelo Tx	Amount of contribution (\$) $\overline{3000}$
Principal occupation / Job title (See Instructions) Employer (See Instructions)	tions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS N If contributor is out-of-state PAC, please see instruction guide for additiona	
Forms provided by Texas Ethics Commission www.ethics.state.tx.us	Revised 9/8/201

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MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Gulde explains how to complete this form.	1 Total pages Schedule A1
2 FILER NAME Sammy Q. Farmer	3 Filer ID (Ethics Commission Filers)
4 Date 5 Euli name of contributor Dout-of-state PAC (1D#:) 1/27/18 6 Contributor address; City; State; Zip Code 4206 Harmony Lane SAN HAGELO X 76904 8 Principal accuration ( lob title (See Instructions)	7 Amount of contribution $($)$
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instruc	tions)
Date Full name of contributor Dout-of-state PAC (ID#:] JOHN Stern 1/27/18 Contributor address; Qity: State; Zip Code 3645 Grand VIEW SAN ANGELO TX 76904	Amount of contribution (\$) $1900$
Principal occupation / Job title (See Instructions) Employer (See Instruc	tions)
Date Full name of contributor [] out-of-state PAC (ID#:) 1/27/18 Beverly Allen contributor address; City: State: Zip Code BOX 89 Rnickerbocker TX 76939	Amount of contribution $($)$
Principal occupation / Job title (See Instructions) Employer (See Instructions)	tions)
Date Full name of contributor 1 out-of-state PAC (10#:) HODERT HOUSE 1/27/18 Contributor address; Aity; State; Zip Code 3533 SULMM; H-LANE SHA ANGE/O TX 76904	Amount of contribution $(\$)$ 5000
Principal occupation / Job title (See Instructions) Employer (See Instructions)	tions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS N If contributor is out-of-state PAC, please see instruction guide for additiona	
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MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule AV: (5 0 10)
<sup>2</sup> Mr Sammy Q. Farmer	3 Filer ID (Ethics Commission Filers)
4 Date 5 Full name of contributor Jout-of-state PAC (ID#:) 1/27/18 6 Contributor address; City; State; Zip Code 1605 Stone Trail SAN ANGEIO TX 76904	7 Amount of contribution (\$) \$10000
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instruc	lions)
Date Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
1/27/18 Contributor address: City: State: Zip Code 1003 Ratl: FF Rd. 50 May	lo 10000
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date     Full name of contributor     I out-of-state PAC (ID#:)       I/27/18     I/27/18     Contributor address;     City; State; Zip Code       I/27/18     Z766     Dena Dr. San Angulo TX       Principal occupation / Job title (See Instructions)     Employer (See Instructions)	Amount of contribution $(\$)$ 1000
Principal occupation / Job title (See Instructions) Employer (See Instructions)	tions)
Date Full name of contributor out-of-state PAC (ID#:) HICCI Aller Contributor address; City; State; Zip Code BOX 89 Knickenbocker TX 769.39	Amount of contribution (\$) $\ddagger 10,00$
Principal occupation / Job title (See Instructions) Employer (See Instructions)	tions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS N If contributor is out-of-state PAC, please see instruction guide for additional	
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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 Mr SAMMY Q. Farmer	3 Filer ID (Ethics Commission Filers)
4 Date 5 Full name of contributor □ out-of-state PAC (ID#:) 1/30/18 AM MCFaughtur 6 Contributor address; Oity State; Zip Code P.O. BOX 1170 San Angelo TX 76902	7 Amount of contribution (\$) \$1000
8 Principal occupation / Job title (See(Instructions) 9 Employer (See Instruction	ons)
Date Full name of contributor out-of-state PAC (ID#) (alsey Barrett Contributor address; City; State; Zip Code 2132 Coyote Bend SAN ANDELO TX 76904	Amount of contribution (\$) \$1500
Principal occupation / Job title (See lostructions) Employer (See Instructions)	ons)
Date     Full name of contributor     I out-of-state PAC (ID#:)       J30/18     Contributor address;     City;     State;     Zip Code       3539     Shadyhill     Dr.       SAN     Angelo     TX     Magot       Principal occupation / Job title (See Instructions)     Employer (See Instructions)	Amount of contribution (\$)
Date       Full name of contributor       Out-of-state PAC (ID#:)         JONA       Childers         JONA       Childers         Contributor address:       City: State: Zip Code         JONA       DONTANCE         JONA       Contributor address:         Contributor address:       City: State: Zip Code         JONA       DONTANCE         Principal occupation / Job title (See Instructions)       Employer (See Instructions)	Amount of contribution (\$)
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MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILERNAME SAMMY Q. Farmer	3 Filer ID (Ethics Commission Filers)
4 Date       5 Follhame of contributor       I out-of-state PAC (ID#:)         1       30       18       6 Contributor address;       City; State; Zip Code         5301       01010       DY       76903         5401       Angelo       77       76903         8       Principal occupation / Job title (See Instructions)       9 Employer (See Instruction)	7 Amount of contribution $($)$ 1000
Date     Full name of contributor     □ out-of-state PAC (ID#:)       //30/18     MiKe     MiFChell       Contributor address;     City; State; Zip Code       2638     Kings Rd.       San Angelo     X 76904       Principal occupation / Job title (See Instructions)     Employer (See Instructions)	Amount of contribution (\$)
	•
Date Full name of contributor [] out-of-state PAC (1D#:) Rick Aumplu 1/2/2018 contributor address; City; State; Zip Code 202 Mest Blauregand State C San Au allo IX 16903	Arnount of contribution (\$) $\int OO OO$
Principal occupation / Job title (See Instructions) Employer (See Instructions)	ions)
Date Full name of contributor address; Deter Jumper 2/2/2018 Contributor address; City: State: Zip Code Suite 202 Hest Beauregoid Suite 300 Angelo TX 76903	Amount of contribution $($)$ 2 C $100^{99}$
Principal occupation / Job title (See Instructions) Employer (See Instructions)	ions)
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MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: (BOK 10)
2 FILER NAME Sammer G. Farmer	3 Filer ID (Ethics Commission Filers)
4 Date 3 Date 3 Date 5 Full frame of contributor 5 Full frame of contributor 6 Contributor address; 7 Full frame of contributor 6 Full frame of contributor 7 Full frame of contributo	7 Amount of contribution (\$) Ecal action
P.D. BOX 00476         Current TX         7X         7X         78         Principal occupation / Job title (See Instructions)         9         Employer (See Instructions)	54,000,00 tions)
Date Full name of contributor 🖸 out-oi-state PAC (iD#:)	Amount of contribution (\$)
2/2/18 Punce Miller contributor address; 3832 City: State; Zip Code P. O. 20X 3832	5000
Sun angelo     TX 76902       Principal occupation / Job title (See Instructions)     Employer (See Instructions)	tions)
Date Full name of contributor out-of-state PAC (ID#:) 2/5/18 VIC Choate Contributor address; City; State; Zip Code 38/8 Hill Crest Dr. Can angulo 1X 76904	Amount of contribution (\$) 500-00
Principal occupation / Job title (See Instructions) Employer (See Instructions)	tions)
Date Fyll name of contributor Dout-of-state PAC (ID#:) 2/5/18 Sen Stribling Contributor address: RCity: State: Zip Code 19 South IRVING St San anglo Sey 76903	Amount of contribution $(\$)$ 250.00
Principal occupation / Job title (See Instructions) Employer (See Instructions)	tions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS N If contributor is out-of-state PAC, please see instruction guide for additional	

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MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: (9 of 10)
2 FILERNAME SAMMY Q. Farmer	3 Filer ID (Ethics Commission Filers)
4 Date 5 Ful name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)
2/9/18 & Contributor address; City; State; Zip Code 5.0. BOX 3253 San Angelo TX 76902	250
8 Principal occupation / Job title (See (1) structions) 9 Employer (See Instru	actions)
Date Full name of contributor Out-of-state PAC (ID#:	Amount of contribution (\$)
216/18 Melance Ward Contributor address; City; State; Zip Code 2766 Dena Dr. San Ungelo;	100 ℃
Principal occupation / Job title (See Instructions) Employer (See Instru	g YOY
Date Full name of contributor	Amount of contribution (\$)
2116 Shawn Hoyd contributor address, div. State: Zip Code 3206 Breargrove Ln. San angelo TX 76904 Principal occupation / Job title (See Instructions) Employer (See Instru	200,00
Principal occupation / Job title (See Instructions) Employer (See Instru	
Date Full name of contributor Di out-of-state PAC (ID#: 2)16 Contributor address; City; State; Zip Code	Amount of contribution (\$) $200.00$
San angelo TX 76902	
Principal occupation / Job title (See Instructions) Employer (See Instru	uctions)
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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 SAMMY Q. Farmer	3 Filer ID (Ethics Commission Filers)			
4 Date 5 Full name of contributor aut-of-state PAC (10#:) 2)16/18 6 Contributor alloress; City: State: Zip Code 2868 W. Beauregard San angel D 7876901	7 Amount of contribution (\$) $\int_{\mathcal{A}} OOO \cdot OO$			
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	tions)			
Date Full name of contributor aut-of-state PAC (IDH:) 2/16/18 Ken Barrows Contributor address; City; State; Zip Code	Amount of contribution (\$)			
Date Full name of contributor Out-of-state PAC (ID# 2/16/18 Ken Barrow S Contributor address; City; State; Zip Code Principal occupation / Job title (See Instructions) Employer (See Instructions)	200, Ø			
Date Foll name of contributor pul-of-state PAC (ID#:)	Amount of contribution (\$)			
2/22/18 John R. Molen 3445 Sequeria City: State: Zip Code 3445 Sequeria CV. San Angelo TX 74904	100-00			
Principal occupation / Job title (See Instructions) Employer (See Instructions)	tions)			
Date Full name of contributor [] out-of-state PAC (ID#:)	Amount of contribution (\$)			
2/22/18 Contributor address; City: State:/ Zip Code 4750 South Chadbourne San angelo TX 76904	100 00			
Principal occupation / Job title (See Instructions) Employer (See Instructions)	tions)			
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### POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politics Cadi Card Payment	Food Food Y Gilt/	nt Expense s 1/Beverage Expense Awards/Memorials Expense al Services	Office Over Polling Exp Printing Exp		Transportation Travel in Distr Travel Out Of	
	Th	e instruction Guide expl	ains how to co	emplete this form.		
1 Total pages Schedule F1: 3(143)/11 4 Date 101/100/12	2 FILER NAME	ny g. F	<i>arm</i> e	21	3 Filer ID (	Ethics Commission Filers)
6 Amount (5)	7 Payee addres 4/5/ A	i city: state	Zip Code		<u>-</u>	
96.19	San AI	rgelo TX	1690	24		
8 PURPOSE OF EXPENDITURE	(a) Category (See EVEN: FOR FL	Categories listed at the top of the F EYPENS Und raiss	is schedule) L		utside of Texas. Gon n, TX, officetiolder	
9 Complete <u>QNLY</u> if direct expanditure to benefit C/OF		Officeholder name		Office sought		Office held
Date 1/26/2018	Payee name Muss	Hattie	's K	Lestera	unt	-
Amount (5) \$419,48	Payee addres 26 EA 5AN A	s; civ; state; st Conch nge/o T	$\begin{array}{c} z_{ip} c_{ode} \\ 0 \\ \overline{X} \\ \overline{X} \\ 7 \\ \end{array}$	2. 1903		
PURPOSE OF EXPENDITURE	EULA FOOD E FUNDIN	Categories listed at the top of the F EUPEN EXPENSE F AISEX	1		itside of Texas. Com I, TX, officeholder	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Officeholder name		Office sought		Office held
Date 1/29/2018	Payee name	it Elec	" a		191 <i>E</i> 6 A568	
Arrigunt (S) $277 \frac{06}{\times \times}$	Payee addres	s; City; State; OX 6604	0	allas T	TX 1	15266
PURPOSE OF EXPENDITURE	Category (see Renta for Sig Defosit	Categories listed at the top of the LEXPEN N HOVAGE 4 Bill	is schedule) 15C		naide of Texas. Com	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Officeholder name	_	Office sought		Office held
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SCHEDULE F1

POLITICAL	EXPEN	DITURES	MADE
FROM POL	ITICAL	CONTRI	BUTIONS

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made   Candidate/Officeholder/Politic	Fees Ottos Ove Food/Beverage Expense Politing Ex Made By Gitt/Awards/Memorials Expense Printing Ex		Office Overh Polling Expe Printing Exp		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a calegory not listed above)
Dredit Card Payment	The Instr	uction Guide explai	ins how to co	mpiete this form.	
1 Total pages Schedule F1 (20/3) 4 Date $4-P/8$	5 Payee name	J. Far Farr	mer		3 Filer ID (Ethics Commission Filers)
6 Amount (\$) 1,100 : 00	7 Payee address; 5108 Fai SAN ANG	rway gelo-	Dr. Dr. TX 7	6904	
8 PURPOSE OF EXPENDITURE	(a) Category (see Category Roan Regaym	edlisted at the top of this	: schedule)		ulside of Texas. Complete Schedule T. n, TX, officeholder Hving expense
9 Complete <u>QNLY</u> if direct expanditure to benefit C/C	Candidate / Officer	older name		Office sought	Office held
Date 1/30/18	Payee name Jeana	- Far	me	ſ	
$\frac{\text{Amount ($$)}}{900}$	Payee address; 5108 Fa San An	irway gelo		16904	
PURPOSE OF EXPENDITURE	Category (See Categori Ran Repaym	Alisted at the top of this fill it It	i schedule)		tside of Texas. Complete Schedule T. , TX, officeholder iiving expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeh H	older name		Office sought	Office held
Date 2/3/2018	Payee name Iractor	Supp	14		
Amount (\$) 12,63	2701 St San and	zelo T	zip Chde ST X 74	BIVD. 904	
PURPOSE OF EXPENDITURE	Category (see Categori adverte (t-prosts fe	te litered at the top of this sing Ext or Sign	schedule)		tside of Texas, Complete Schedule 7. , TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officel H	older name		Office sought	Office held
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### POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politic; Credi Card Payment	vertising         Expense         Loan Repayment/Reimbursement         Solicitation/Fundraising Expense           counting/Banking         Fees         Office Overhead/Rental Expense         Transportation Equipment & Related           nsulting Expense         Food/Beverage Expense         Polling Expense         Travel In District           ntributions/Donations Made By         Gitt/Awards/Memorials Expense         Printing Expense         Travel Out Of District           andidate/Officeholder/Political Committee         Legal Services         Salaries/Wages/Contract Labor         Other (enter a category not listed ab			
1 Jotal pages Schedule F1:	T	·	3 Filer ID (Ethics Commission Filers)	
$\begin{array}{c} \text{(30]} 3 \text{(30]} 3 \text{)} \\ \text{A Date} \\ \text{(30]} 3 \text{)} \\ \text{(30)} 3 \text{)} \text{(30)} 3 \text{)} \\ \text{(30)} 3 \text{)} \\ \text{(30)} 3 \text{)} \text{(30)} 3 \text{)} $	Mr. Sammy 5 Paxee name Mc Laugh	g. Farmer in Adverti.	Sing	
6 Amodent (8) 7 Payee address: City: State; Zip Code 115 South Park St. 10,685,00 San Angelo Tx 76901				
8	(a) Category (See Categories listed at the top of			
B PURPOSE OF EXPENDITURE	Advertising		side of Texas. Complete Schedule T. TX, officeholder living expense	
9 Complete <u>ONLY</u> 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	Check if travel outs	ide of Texas. Complete Schedule T. TX, officeholder living expense	
Complete <u>ONLY</u> 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 Categorie's listed at the top of	Check if travel outs	ide of Texas. Complete Schedule T. TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought	Office held	
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SCHEDULE F1

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