

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

<b>The C/OH Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) _____	<b>2</b> Total pages filed: <div style="font-size: 2em; text-align: center;">4</div>
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: <i>Mr.</i> FIRST: <i>Brent</i> MI: _____ NICKNAME: _____      LAST: <i>Chesney</i> SUFFIX: _____	<b>OFFICE USE ONLY</b>  Date Received  FILED FOR RECORD AT <i>1:18p</i> M  JAN 15 2019  BY: <i>KARA SANDS</i> CLERK, COUNTY CLERK, DECEASE COUNTY, TEXAS DEPUTY	
	<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address  ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <i>5366 Ardle Suite 104 CC, TX 78411</i>		
	<b>5</b> CANDIDATE / OFFICEHOLDER PHONE  AREA CODE      PHONE NUMBER      EXTENSION <i>(361) 992-9198</i>		
	<b>6</b> CAMPAIGN TREASURER NAME  MS / MRS / MR: <i>Mrs.</i> FIRST: <i>Ashley</i> MI: _____ NICKNAME: _____      LAST: <i>Chesney</i> SUFFIX: _____		
<b>7</b> CAMPAIGN TREASURER ADDRESS (Residence or Business)  STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <i>same as above</i>	Date Hand-delivered or Date Postmarked		Receipt #      Amount \$
<b>8</b> CAMPAIGN TREASURER PHONE  AREA CODE      PHONE NUMBER      EXTENSION <i>(361) 739-7422</i>	Date Processed		Date Imaged
<b>9</b> REPORT TYPE  <input checked="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)	<b>10</b> PERIOD COVERED  Month      Day      Year           Month      Day      Year <i>10 / 1 / 19      THROUGH      1 / 15 / 19</i>		
<b>11</b> ELECTION  ELECTION DATE Month      Day      Year /      /	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special		
<b>12</b> OFFICE  OFFICE HELD (if any) <i>Mexco County Commissioner Precinct 4</i>	<b>13</b> OFFICE SOUGHT (if known) _____		

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME Brent Chesney 15 Filer ID (Ethics Commission Filers) \_\_\_\_\_

16 NOTICE FROM POLITICAL COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE:  GENERAL  SPECIFIC

COMMITTEE NAME: \_\_\_\_\_

COMMITTEE ADDRESS: \_\_\_\_\_

COMMITTEE CAMPAIGN TREASURER NAME: \_\_\_\_\_

COMMITTEE CAMPAIGN TREASURER ADDRESS: \_\_\_\_\_


Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2000
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 0
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 128,163.11
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

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 15<sup>th</sup> day of January, 20 19, to certify which, witness my hand and seal of office.

Brinda Jones Signature of officer administering oath  
Brinda Jones Printed name of officer administering oath  
Notary Public Title of officer administering oath

# SUBTOTALS - C/OH

# FORM C/OH COVER SHEET PG 3

19 FILER NAME <i>Bret Chesney</i>		20 Filer ID (Ethics Commission Filers) <u>                    </u>
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>2000</i>
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 type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
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	\$