

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

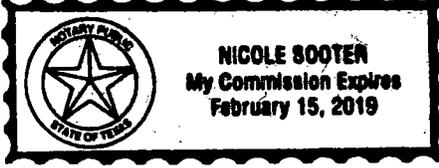
FORM C/OH
COVER SHEET PG 2

| | |
|-------------------------------------|--|
| 14 C/OH NAME TODD RADFORD | 15 Filer ID (Ethics Commission Filers) |
|-------------------------------------|--|

| | | |
|--|---|--------------------------------------|
| 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 TYPE COMMITTEE NAME |
| | | COMMITTEE ADDRESS |
| | | COMMITTEE CAMPAIGN TREASURER NAME |
| | | COMMITTEE CAMPAIGN TREASURER ADDRESS |

| | | |
|-------------------------|---|--------------------------|
| 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) | \$ 450. ⁰⁰ |
| EXPENDITURE TOTALS | 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED | \$ 43. ⁸⁹ |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 122. ⁸⁹ |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD <i>as of 1/21</i> | \$ 32,005. ⁴⁵ |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 0 |

18 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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.

Todd A Radford
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said TODD RADFORD, this the 1st day of February, 2016, to certify which, witness my hand and seal of office.

Nicole Sooter
Signature of officer administering oath

Nicole Sooter
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 TODD RADFORD | | 20 Filer ID (Ethics Commission Filers) |
|---|---|--|
| 21 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 450. ⁰⁰ |
| 2. | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ 0 |
| 3. | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ 0 |
| 4. | <input type="checkbox"/> SCHEDULE E: LOANS | \$ 0 |
| 5. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$ 122. ⁰⁰ |
| 6. | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ 0 |
| 7. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS | \$ 0 |
| 8. | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ 0 |
| 9. | <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS | \$ 0 |
| 10. | <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ 0 |
| 11. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$ 0 |
| 12. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ 0 |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

4 Date

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

7 Amount of contribution (\$)

1/2/16

SARA ALLARD

100.⁰⁰

6 Contributor address; City; State; Zip Code 78734

15089 BARRIE DR. AUSTIN

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

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

Amount of contribution (\$)

1/4/16

ROSE MARY & PHILIP PARKER

100.⁰⁰

Contributor address; City; State; Zip Code 78734

104 TAMARAC CT LAKEWAY

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

1/13/16

MIKE ARCHULETA

250.⁰⁰

Contributor address; City; State; Zip Code 78734

1100 LAKEWAY DR. LAKEWAY TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code

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 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.

| | | |
|----------------------------|-------------------------------------|---------------------------------------|
| 1 Total pages Schedule F1: | 2 FILER NAME TODD RADFORD | 3 Filer ID (Ethics Commission Filers) |
|----------------------------|-------------------------------------|---------------------------------------|

| | |
|-------------------------|---------------------------------|
| 4 Date 1/4/16 | 5 Payee name FACEBOOK |
|-------------------------|---------------------------------|

| | |
|--|--|
| 6 Amount (\$) 28.⁹⁰ | 7 Payee address; City; State; Zip Code 1 HACKER WAY, MENLO PARK, CA, 94025 |
|--|--|

| | | |
|------------------------------------|--|--|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) ADVERTISING | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense INTERNET ADS |
|------------------------------------|--|--|

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

| | |
|------------------------|--|
| Date 1/21/16 | Payee name TIME WARNER CABLE |
|------------------------|--|

| | |
|--|---|
| Amount (\$) 50.¹⁰ | Payee address; City; State; Zip Code 12012 N. MCPAC AUSTIN TX 78759 |
|--|---|

| | | |
|-------------------------------|---|--|
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) OFFICE OVERHEAD / RENTAL EXPENSE | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense INTERNET / CABLE |
|-------------------------------|---|--|

| | | | |
|--|-------------------------------|---------------|-------------|
| 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 this schedule) | 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 THIS SCHEDULE AS NEEDED

CODE OF FAIR CAMPAIGN PRACTICES

8749

FILED FOR RECORD
FORM CFCP
COVER SHEET
2016 FEB -1 PM 4:04

Pursuant to chapter 258 of the Election Code, every candidate and political committee is encouraged to subscribe to the Code of Fair Campaign Practices. The Code may be filed with the proper filing authority upon submission of a campaign treasurer appointment form. Candidates or political committees that already have a current campaign treasurer appointment on file as of September 1, 1997, may subscribe to the code at any time.

Subscription to the Code of Fair Campaign Practices is voluntary.

OFFICE USE ONLY

Date Received: *2/1/16*
 Travis County Texas

Date Hand-delivered or Postmarked

Date Processed

Date Imaged

| | | | |
|---|---|--|--|
| 1 ACCOUNT NUMBER <small>(Ethics Commission Filers)</small> | 2 TYPE OF FILER CANDIDATE <input checked="" type="checkbox"/> POLITICAL COMMITTEE <input type="checkbox"/> <i>If filing as a candidate, complete boxes 3 - 6, then read and sign page 2.</i> <i>If filing for a political committee, complete boxes 7 and 8, then read and sign page 2.</i> | | |
| 3 NAME OF CANDIDATE <small>(PLEASE TYPE OR PRINT)</small> | TITLE (Dr., Mr., Ms., etc.) FIRST MI NICKNAME LAST SUFFIX (SR., JR., III, etc.) IDOO RADFORD | | |
| 4 TELEPHONE NUMBER OF CANDIDATE <small>(PLEASE TYPE OR PRINT)</small> | AREA CODE PHONE NUMBER EXTENSION (512) 971-9196 | | |
| 5 ADDRESS OF CANDIDATE <small>(PLEASE TYPE OR PRINT)</small> | STREET / PO BOX; APT / SUITE#; CITY; STATE; ZIP CODE 301 MEADOWLARK AUSTIN TX 78734 | | |
| 6 OFFICE SOUGHT BY CANDIDATE <small>(PLEASE TYPE OR PRINT)</small> | TRAVIS C. SKELLEC | | |
| 7 NAME OF COMMITTEE <small>(PLEASE TYPE OR PRINT)</small> | | | |
| 8 NAME OF CAMPAIGN TREASURER <small>(PLEASE TYPE OR PRINT)</small> | TITLE (Dr., Mr., Ms., etc.) FIRST MI NICKNAME LAST SUFFIX (SR., JR., III, etc.) MARIKA LIMON | | |

GO TO PAGE 2

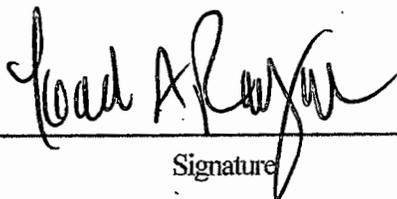
CODE OF FAIR CAMPAIGN PRACTICES

There are basic principles of decency, honesty, and fair play that every candidate and political committee in this state has a moral obligation to observe and uphold, in order that, after vigorously contested but fairly conducted campaigns, our citizens may exercise their constitutional rights to a free and untrammelled choice and the will of the people may be fully and clearly expressed on the issues.

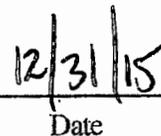
THEREFORE:

- (1) I will conduct the campaign openly and publicly and limit attacks on my opponent to legitimate challenges to my opponent's record and stated positions on issues.
- (2) I will not use or permit the use of character defamation, whispering campaigns, libel, slander, or scurrilous attacks on any candidate or the candidate's personal or family life.
- (3) I will not use or permit any appeal to negative prejudice based on race, sex, religion, or national origin.
- (4) I will not use campaign material of any sort that misrepresents, distorts, or otherwise falsifies the facts, nor will I use malicious or unfounded accusations that aim at creating or exploiting doubts, without justification, as to the personal integrity or patriotism of my opponent.
- (5) I will not undertake or condone any dishonest or unethical practice that tends to corrupt or undermine our system of free elections or that hampers or prevents the full and free expression of the will of the voters, including any activity aimed at intimidating voters or discouraging them from voting.
- (6) I will defend and uphold the right of every qualified voter to full and equal participation in the electoral process, and will not engage in any activity aimed at intimidating voters or discouraging them from voting.
- (7) I will immediately and publicly repudiate methods and tactics that may come from others that I have pledged not to use or condone. I shall take firm action against any subordinate who violates any provision of this code or the laws governing elections.

I, the undersigned, candidate for election to public office in the State of Texas or campaign treasurer of a political committee, hereby voluntarily endorse, subscribe to, and solemnly pledge myself to conduct the campaign in accordance with the above principles and practices.



Signature



Date