CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

8930

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:

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST STACY	MI L	**OFFICE USE ONLY**
	NICKNAME	LAST	SUFFIX	Date Received
		SUITS		

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ Change of Address

ADDRESS / PO BOX: APT / SUITE #;   CITY: STATE;   ZIP CODE

7807 DOWCASTER
AUSTIN, TX 78745

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE (512)   PHONE NUMBER 554-2710   EXTENSION

Date Hand-delivered or Date Postmarked

6 CAMPAIGN TREASURER NAME

MS / MRS / MR   FIRST STACY   MI L

NICKNAME   LAST   SUFFIX

SUITS

Receipt #   Amount $

Date Processed

Date Imaged

7 CAMPAIGN TREASURER ADDRESS

(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE):   APT / SUITE #;   CITY;   STATE;   ZIP CODE

7807 DONCASTER
AUSTIN, TX 78745

8 CAMPAIGN TREASURER PHONE

AREA CODE (512)   PHONE NUMBER 554-2710   EXTENSION

9 REPORT TYPE

☐ January 15   ☒ 30th day before election   ☐ Runoff   ☐ 15th day after campaign treasurer appointment (Officeholder Only)

☐ July 15   ☐ 8th day before election   ☐ Exceeded $500 limit   ☐ Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year
7 / 1 / 16   THROUGH   Month Day Year 9 / 29 / 16

11 ELECTION

ELECTION DATE

Month Day Year
11 / 8 / 16

ELECTION TYPE

☐ Primary   ☐ Runoff   ☐ Other Description

☒ General   ☐ Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

TRAVIS COUNTY CONSTABLE PCT. 3

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT

**FORM C/OH
COVER SHEET PG 2**

14 C/OH NAME	15 Fier 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	COMMITTEE NAME
	☐ GENERAL	
	☐ SPECIFIC	COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
☐ Additional Pages		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)	$ 600.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ 162.62
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 162.62
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 612.20
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 28,200.00

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.

Stacy L. Suits
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP/SEAL ABOVE

Sworn to and subscribed before me, by the said _Stacy L. Suits_ , this the _10th_ day of _October_ 20 _16_ , to certify which, witness my hand and seal of office.

Maria E. A.	_MARIA E. Gonzalez_	_Notary Public_
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:

2 FILER NAME STACH SUITS	3 Filer ID (Ethics Commission Filers)

4 Date 8/31/16	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) DON RIOS CAMPAIGN 6 Contributor address; City; State; Zip Code 78660 3928 BREAN DOWN, PFLUGRUILG TX	7 Amount of contribution ($) 500.00
8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)	

Date 9/26/16	Full name of contributor ☐ out-of-state PAC (ID#:_____) CIRCLE C DEMOCRATS Contributor address; City; State; Zip Code 9517 BUN LALOWE CN, AUSTIN TX 78749	Amount of contribution ($) 100.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) Contributor address; City; State; Zip Code	Amount of contribution ($)
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) Contributor address; City; State; Zip Code	Amount of contribution ($)
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.

SUBTOTALS - C/OH

19 FILER NAME	20 Filer ID (Ethics Commission Filers)
STACY L. SUIT)	

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$ 600.00
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	$
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 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 RETURNED TO FILER	$