

FORM COR-C/OH

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

8962

1 ACCOUNT #		2 Total pages filed: <b>9</b>		OFFICE USE ONLY		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	Date Received		
	NICKNAME	LAST	SUFFIX			
4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)	Date Hand-delivered or Postmarked		
	<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> Exceeded \$500 limit				
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after treasurer appointment (officeholder only)				
	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Final report				
	Receipt #..					Amount
5 ORIGINAL PERIOD COVERED	Month	Day	Year	Month	Day	Year
	01	01	2015	06	30	2015
	THROUGH					
Date Processed						
Date Imaged						

6 EXPLANATION OF CORRECTION

The July 15, 2015 report is being corrected because it did not include any political contributions, (Schedule A). The campaign treasurer forgot to input that data into that report. However, the campaign treasurer deposited \$8,695 on May 8, 2015, deposited \$525 on May 19, 2015, and deposited \$100 on June 4, 2015 in Comerica Bank.

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:

Semiannual reports: This report is an amendment/correction to a semiannual report due on or after September 1, 2011. If amendment/correction is filed on or after the eighth day after the original report was filed, I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports (excluding semiannual reports due on or after September 1, 2011): I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.



Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ron Davis, this the 17th day of November.

Signature of officer administering oath: Felicitas B. Chavez; Printed name of officer administering oath: Felicitas B. Chavez; Title of officer administering oath: Notary Public

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

13 C/OH NAME DAVIS, RON

14 ACCOUNT # (Ethics Commission filers)  
12312005

15 NOTICE FROM POLITICAL COMMITTEE(S)

... This box is for notice of political expenditures 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	COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> SPECIFIC		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

16 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	9,320.00
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
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4. TOTAL POLITICAL EXPENDITURES	\$	8,727.24
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CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00
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OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00
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17 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.



*Ron Davis*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ron Davis, this the 17th day of November, 2016, to certify which, witness my hand and seal of office.

*Felicitas B. Chavez*      Felicitas B. Chavez      Notary Public  
Signature of officer administering oath      Print name of officer administering oath      Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 1/7 Report: 3/20

2 FILER NAME DAVIS, RON

3 ACCOUNT # (Ethics Commission filers)  
12312005

4 Date: 05/06/2015  
5 Full name of contributor: Acevedo, Tanya  
 out-of-state PAC (ID# \_\_\_\_\_)  
6 Contributor address: 2407 Starford Dr. Austin, TX 78746  
City: State: Zip Code

7 Amount of contribution (\$): \$25.00  
8 In-kind contribution description (if applicable):  
  
(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions)

Date: 05/06/2015  
Full name of contributor: Armbrust & Brown, PLLC  
 out-of-state PAC (ID# \_\_\_\_\_)  
Contributor address: 100 Congress Ave., Suite 1300 Austin, TX 78701-2744  
City: State: Zip Code

Amount of contribution (\$): \$1,000.00  
In-kind contribution description (if applicable):  
  
(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date: 05/28/2015  
Full name of contributor: Beall, Jonathan M.  
 out-of-state PAC (ID# \_\_\_\_\_)  
Contributor address: 2001 Justin Lane Austin, TX 78757-2412  
City: State: Zip Code

Amount of contribution (\$): \$100.00  
In-kind contribution description (if applicable):  
  
(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date: 05/06/2015  
Full name of contributor: Britton, Deborah  
 out-of-state PAC (ID# \_\_\_\_\_)  
Contributor address: 2104 Ann Arbor Ave. Austin, TX 78704  
City: State: Zip Code

Amount of contribution (\$): \$25.00  
In-kind contribution description (if applicable):  
  
(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date: 05/06/2015  
Full name of contributor: Brockenbrough, Anne  
 out-of-state PAC (ID# \_\_\_\_\_)  
Contributor address: 11318 Jones Rd Manor, TX 78653  
City: State: Zip Code

Amount of contribution (\$): \$250.00  
In-kind contribution description (if applicable):  
  
(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

		<b>1</b> PAGE # Schedule: 2/7 Report: 4/20	
<b>2</b> FILER NAME DAVIS, RON		<b>3</b> ACCOUNT # (Ethics Commission filers) 12312005	
<b>4</b> Date 05/06/2015	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bunch, William	<b>7</b> Amount of contribution (\$) \$125.00	<b>8</b> In-kind contribution description (if applicable)
<b>6</b> Contributor address; City; State; Zip Code P.O. Box 684881 Austin, TX 78768		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
Date 05/06/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burton, Dorothy M.	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4601 Munson Austin, TX 78721		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/06/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Butler Family Partnersip, Ltd.	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. Box 9190 Austin, TX 78766		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/06/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Butts, Sally	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1807 Redlands St. Austin, TX 78757-2825		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/06/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dawson, Rhett M.	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4409 Sacred Arrow Dr. Austin, TX 78735-6363		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

**1 PAGE #**  
Schedule: 3/7 Report: 5/20

**2 FILER NAME** DAVIS, RON

**3 ACCOUNT #** (Ethics Commission filers)  
12312005

**4 Date**  
  
05/06/2015

**5 Full name of contributor**  out-of-state PAC (ID# \_\_\_\_\_)  
Doyle, John E.

**7 Amount of contribution (\$)**  
  
\$25.00

**8 In-kind contribution description (if applicable)**

**6 Contributor address; City; State; Zip Code**  
2012 Northridge Dr.  
Austin, TX 78723

(If travel outside of Texas, complete Schedule T)

**9 Principal occupation / Job title (See Instructions)**

**10 Employer (See Instructions)**

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Dwyer, Peter A.

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/06/2015

Contributor address; City; State; Zip Code  
9900 Hwy 290 East  
Manor, TX 78653-9720

\$500.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
El-Khoury, Roger & Claude

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/06/2015

Contributor address; City; State; Zip Code  
1036 Forest Bluff Tr.  
Round Rock, TX 78664

\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Fath, Shudde

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/06/2015

Contributor address; City; State; Zip Code  
1005 Bluebonnet Lane  
Austin, TX 78704-2003

\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Foreman, Perry & Brenda

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/06/2015

Contributor address; City; State; Zip Code  
6401 Bridgewater Dr.  
Austin, TX 78723

\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

**1 PAGE #**  
Schedule: 4/7 Report: 6/20

**2 FILER NAME** DAVIS, RON

**3 ACCOUNT #** (Ethics Commission filers)  
12312005

**4 Date** 05/06/2015  
**5 Full name of contributor**  out-of-state PAC (ID# \_\_\_\_\_)  
Gilliland, Douglas  
**6 Contributor address; City; State; Zip Code**  
55 Main Street, Unit 340  
Colleyville, TX 76034

**7 Amount of contribution (\$)** \$1,500.00  
**8 In-kind contribution description (if applicable)**  
  
(If travel outside of Texas, complete Schedule T)

**9 Principal occupation / Job title (See Instructions)**

**10 Employer (See Instructions)**

**Date** 05/28/2015  
**Full name of contributor**  out-of-state PAC (ID# \_\_\_\_\_)  
Graham, Charles W. (Dr.)  
**Contributor address; City; State; Zip Code**  
P.O. Box 468  
Elgin, TX 78621-4833

**Amount of contribution (\$)** \$500.00  
**In-kind contribution description (if applicable)**  
  
(If travel outside of Texas, complete Schedule T)

**Principal occupation / Job title (See Instructions)**

**Employer (See Instructions)**

**Date** 05/06/2015  
**Full name of contributor**  out-of-state PAC (ID# \_\_\_\_\_)  
Gregory, Bob & Kay  
**Contributor address; City; State; Zip Code**  
2939 Westlake Cove  
Austin, TX 78746

**Amount of contribution (\$)** \$1,000.00  
**In-kind contribution description (if applicable)**  
  
(If travel outside of Texas, complete Schedule T)

**Principal occupation / Job title (See Instructions)**

**Employer (See Instructions)**

**Date** 05/06/2015  
**Full name of contributor**  out-of-state PAC (ID# \_\_\_\_\_)  
Heiligenstein, Micheal L. & Lisa M.  
**Contributor address; City; State; Zip Code**  
1607 The High Road  
Austin, TX 78746

**Amount of contribution (\$)** \$200.00  
**In-kind contribution description (if applicable)**  
  
(If travel outside of Texas, complete Schedule T)

**Principal occupation / Job title (See Instructions)**

**Employer (See Instructions)**

**Date** 05/06/2015  
**Full name of contributor**  out-of-state PAC (ID# \_\_\_\_\_)  
Howard, Robert M.  
**Contributor address; City; State; Zip Code**  
2315 Westforest Dr.  
Austin, TX 78704

**Amount of contribution (\$)** \$25.00  
**In-kind contribution description (if applicable)**  
  
(If travel outside of Texas, complete Schedule T)

**Principal occupation / Job title (See Instructions)**

**Employer (See Instructions)**

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

**1** PAGE #

Schedule: 5/7 Report: 7/20

**2** FILER NAME DAVIS, RON

**3** ACCOUNT # (Ethics Commission filers)

12312005

**4** Date

05/06/2015

**5** Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Husch blackwell LLP

**6** Contributor address; City; State; Zip Code  
4801 Main Street, Suite 1000  
Kansas City, MO 64112

**7** Amount of contribution (\$)

\$1,000.00

**8** In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

**9** Principal occupation / Job title (See Instructions)

**10** Employer (See Instructions)

Date

05/06/2015

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Lan - PAC

Contributor address; City; State; Zip Code  
2925 Briarpark Drive, 4th Floor  
Houston, TX 77042

Amount of contribution (\$)

\$400.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/06/2015

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Meade, Nikelle

Contributor address; City; State; Zip Code  
5363 Austral Loop  
Austin, TX 78739

Amount of contribution (\$)

\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/08/2015

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Miller, Jerry & Christal

Contributor address; City; State; Zip Code  
1916B E. M. Franklin Ave.  
Austin, TX 78723

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/06/2015

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Nellis, Leroy W.

Contributor address; City; State; Zip Code  
3418 Zaddock Woods Dr.  
Austin, TX 78749

Amount of contribution (\$)

\$25.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/7 Report: 8/20	
2 FILER NAME DAVIS, RON		3 ACCOUNT # (Ethics Commission filers) 12312005	
4 Date  05/06/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Peruzzi, William A.  6 Contributor address; City; State; Zip Code 7931 Jenkin Rd. Cheltenham, PA 19012	7 Amount of contribution (\$)  \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date  05/06/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Salazar, David  Contributor address; City; State; Zip Code 236 Morrell Kyle, TX 78640	Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date  05/06/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sarah Echardt Campaign  Contributor address; City; State; Zip Code P.O. Box 301586 Austin, TX 78703	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date  05/06/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Satterwhite, CeCe  Contributor address; City; State; Zip Code 2206 Lear Ln. Austin, TX 78745	Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date  05/06/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sawyer, Jr., Charles D.  Contributor address; City; State; Zip Code 6800 Airport Blvd Austin, TX 78752	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/7 Report: 9/20	
2 FILER NAME DAVIS, RON		3 ACCOUNT # (Ethics Commission filers) 12312005	
4 Date 05/06/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Simms, Nikki C.	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code 7206 Lazy creek Dr. Austin, TX 78724		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/06/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Simms, Quinton r. & Theresa Scott	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 160 hidden oak Road dale, TX 78616-9791		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/06/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, David N.	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code P.O. Box 537 Austin, TX 78767		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/06/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Timberlake, Walter & Lucille	Amount of contribution (\$) \$30.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 2006 Bouldin Ave. Austin, TX 78704		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/06/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Weiss, Nathan	Amount of contribution (\$) \$40.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 210 Circle St. Apt. #1 Alamo Heights, TX, TX 78209-5358		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	