

**JUDICIAL CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**FORM JC/OH
8997 COVER SHEET PG 1**

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 24
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Guy	MI	OFFICE USE ONLY Date Received
	NICKNAME LAST Herman	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 1000 Guadalupe Street Room 217 Austin, TX 78701		ZIP CODE
	Date Hand-delivered or Date Postmarked		Receipt #
	Date Processed		Amount
	Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR MS	FIRST MARTHA	MI S
	NICKNAME DICKIE	LAST	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2301 S. CAPITAL OF TEXAS HWY, BLDG H, AUSTIN, TX 78746-7700		
7 CAMPAIGN TREASURER PHONE	AREA CODE 512	PHONE NUMBER 474-9486	EXTENSION
8 REPORT TYPE	<input 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)		
9 PERIOD COVERED	Month Day Year 07/01/2016	THROUGH	Month Day Year 12/31/2016
10 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE
			<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any) Statutory Probate Judge, Travis County	12 OFFICE SOUGHT (if known) None	

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2
2 of 24

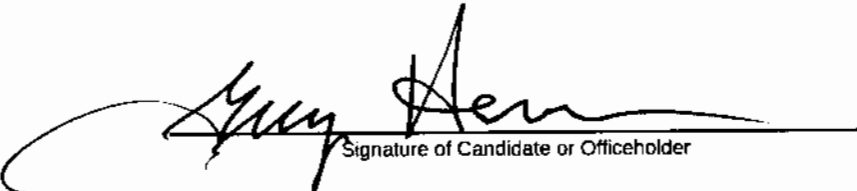
13 C / OH NAME Herman, Guy	14 Filer ID
-------------------------------	-------------

15 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. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> 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	

16 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$	14,665.20
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	59,520.30
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

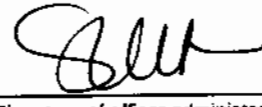
17 AFFADAVIT

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.

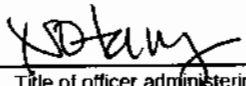

 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Guy Herman, this the 17 day of Jan, 2017, to certify which, witness my hand and seal of office.


 Signature of officer administering oath

Susan Poodiack
 Printed name of officer administering oath


 Title of officer administering oath

SUBTOTALS - JC/OH

18 FILER NAME Herman, Guy		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 12,986.59
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 393.68
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 1,284.93
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/18 Rpt: 4/24	2 FILER NAME Herman, Guy	3 Filer ID
--	------------------------------------	-------------------

4 Date 08/03/2016	5 Payee name Austin AFL-CIO Council
-----------------------------	---

6 Amount (\$) \$310.00	7 Payee address; City; State; Zip Code P.O. Box 301074 Austin, TX 78703
----------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Half-page ad, AFL-CIO Labor Day Fish Fry program
---------------------------------	---	---

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

Date 10/10/2016	Payee name Austin Bar Association
--------------------	--------------------------------------

Amount (\$) \$1,725.00	Payee address; City; State; Zip Code 816 Congress Avenue Suite 700 Austin, TX 78701
---------------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Annual Bar and Section membership for all judges and attorneys at the Probate Court (7 total)
------------------------	--	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 11/18/2016	Payee name Austin Bar Association
--------------------	--------------------------------------

Amount (\$) \$80.00	Payee address; City; State; Zip Code 816 Congress Avenue Suite 700 Austin, TX 78701
------------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CLE & lunch	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Estate Planning & Probate Section CLE & lunch for 4 Court attorneys & student Law Clerks
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

POLITICAL EXPENDITURES 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: Sch: 2/18 Rpt: 5/24	2 FILER NAME Herman, Guy	3 Filer ID
4 Date 11/18/2016	5 Payee name Austin Bar Association	
6 Amount (\$) \$20.00	7 Payee address; City; State; Zip Code 816 Congress Avenue Suite 700 Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CLE & lunch	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Estate Planning & Probate Section CLE & lunch for 1 Court student Law Clerk
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 12/30/2016	Payee name Austin Bar Association	
Amount (\$) \$240.00	Payee address; City; State; Zip Code 816 Congress Avenue Suite 700 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Austin Bar Association & Estate Planning membership for new Court attorney Chris Larson
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 09/23/2016	Payee name Blue Star Kitchen & Bar	
Amount (\$) \$310.00	Payee address; City; State; Zip Code 4800 Burnet Road Suite C-300 Austin, TX 78756	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office goodbye lunch for Emily Meisgeier, Law Clerk to Judge Herman 2014-2016
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES 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: Sch: 3/18 Rpt: 6/24		2 FILER NAME Herman, Guy		3 Filer ID	
4 Date 12/10/2016		5 Payee name Central Market			
6 Amount (\$) \$420.00		7 Payee address; City; State; Zip Code 4001 N. Lamar Blvd. Austin, TX 78756			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Court holiday party catering	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 12/16/2016		Payee name Cotton, Jana (Ms.)			
Amount (\$) \$200.00		Payee address; City; State; Zip Code 9826 Mandeville Circle Austin, TX 78750			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Holiday gift (given to all regular Court employees)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 12/28/2016		Payee name Cotton, Jana (Ms.)			
Amount (\$) \$182.31		Payee address; City; State; Zip Code 9826 Mandeville Circle Austin, TX 78750			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for punch & supplies for Court's goodbye, Court Coordinator & Social Worker	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES 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: Sch: 4/18 Rpt: 7/24		2 FILER NAME Herman, Guy		3 Filer ID	
4 Date 09/20/2016		5 Payee name Equal Justice Center			
6 Amount (\$) \$500.00		7 Payee address; City; State; Zip Code 510 South Congress Avenue Suite 206 Austin, TX 78704			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to Equal Justice Center's Peter Pan Mini-Golf Fundraiser	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 12/16/2016		Payee name Ferrell, Melissa (Ms.)			
Amount (\$) \$200.00		Payee address; City; State; Zip Code 2604 Wooldridge Dr. Austin, TX 78703			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Holiday gift (given to all regular Court employees)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/13/2016		Payee name Gianotti, Michael (Mr.)			
Amount (\$) \$91.34		Payee address; City; State; Zip Code 902 Harvard Dr. Pflugerville, TX 78660			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for staff meeting lunch (Jason's Deli)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES 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: Sch: 5/18 Rpt: 8/24	2 FILER NAME Herman, Guy	3 Filer ID
4 Date 11/01/2016	5 Payee name Gianotti, Michael (Mr.)	
6 Amount (\$) \$93.16	7 Payee address; City; State; Zip Code 902 Harvard Dr. Pflugerville, TX 78660	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for staff meeting lunch (Jason's Deli)
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 11/04/2016	Payee name Gianotti, Michael (Mr.)	
Amount (\$) \$39.14	Payee address; City; State; Zip Code 902 Harvard Dr. Pflugerville, TX 78660	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for Torchy's; staff breakfast tacos.
	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 11/07/2016	Payee name Gianotti, Michael (Mr.)	
Amount (\$) \$62.60	Payee address; City; State; Zip Code 902 Harvard Dr. Pflugerville, TX 78660	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for Court's celebration of Judge Prashner's birthday (Whole Foods)
	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES 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: Sch: 6/18 Rpt: 9/24		2 FILER NAME Herman, Guy		3 Filer ID	
4 Date 12/09/2016		5 Payee name Gianotti, Michael (Mr.)			
6 Amount (\$) \$382.54		7 Payee address; City; State; Zip Code 902 Harvard Dr. Pflugerville, TX 78660			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for Austin State Supported Living Center holiday gifts (multiple stores)	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 12/06/2016		Payee name Gianotti, Michael (Mr.)			
Amount (\$) \$68.85		Payee address; City; State; Zip Code 902 Harvard Dr. Pflugerville, TX 78660			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for staff meeting lunch (Jason's Deli)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 12/16/2016		Payee name Gianotti, Michael (Mr.)			
Amount (\$) \$200.00		Payee address; City; State; Zip Code 902 Harvard Dr. Pflugerville, TX 78660			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Holiday gift (given to all regular Court employees)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES 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: Sch: 7/18 Rpt: 10/24	2 FILER NAME Herman, Guy	3 Filer ID
---	------------------------------------	-------------------

4 Date 07/05/2016	5 Payee name Henderson, Alesia (Ms.)
-----------------------------	--

6 Amount (\$) \$69.96	7 Payee address; City; State; Zip Code 19300 Mangan Way Pflugerville, TX 78660
---------------------------------	---

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement, office coffee (Sam's)
---------------------------------	--	--

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

Date 08/01/2016	Payee name Henderson, Alesia (Ms.)
--------------------	---------------------------------------

Amount (\$) \$69.96	Payee address; City; State; Zip Code 19300 Mangan Way Pflugerville, TX 78660
------------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for office coffee (Sam's)
-------------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 09/06/2016	Payee name Henderson, Alesia (Ms.)
--------------------	---------------------------------------

Amount (\$) \$76.65	Payee address; City; State; Zip Code 19300 Mangan Way Pflugerville, TX 78660
------------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement office coffee & supplies (Sam's)
-------------------------------	--	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

POLITICAL EXPENDITURES 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: Sch: 8/18 Rpt: 11/24		2 FILER NAME Herman, Guy		3 Filer ID	
4 Date 10/04/2016		5 Payee name Henderson, Alesia (Ms.)			
6 Amount (\$) \$55.41		7 Payee address; City; State; Zip Code 19300 Mangan Way Pflugerville, TX 78660			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement, office coffee & supplies (Sam's)	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 11/14/2016		Payee name Henderson, Alesia (Ms.)			
Amount (\$) \$90.96		Payee address; City; State; Zip Code 19300 Mangan Way Pflugerville, TX 78660			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for office coffee & cocoa	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 12/13/2016		Payee name Henderson, Alesia (Ms.)			
Amount (\$) \$104.05		Payee address; City; State; Zip Code 19300 Mangan Way Pflugerville, TX 78660			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for holiday gifts for Court's 4 student workers (Starbucks & Kohl's)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES 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: Sch: 9/18 Rpt: 12/24	2 FILER NAME Herman, Guy	3 Filer ID
4 Date 12/16/2016	5 Payee name Henderson, Alesia (Ms.)	
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 19300 Mangan Way Pflugerville, TX 78660	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Holiday gift (given to all regular Court employees)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/28/2016	Payee name Henderson, Alesia (Ms.)	
Amount (\$) \$101.76	Payee address; City; State; Zip Code 19300 Mangan Way Pflugerville, TX 78660	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for cake for Court's goodbye, Court Coordinator & Social Worker (Sam's)
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/21/2016	Payee name Herman, Guy (Judge)	
Amount (\$) \$1,284.93	Payee address; City; State; Zip Code 3215 Fairfax Walk Austin, TX 78705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for purchase of office iPad, keyboard, and extended warranty
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES 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: Sch: 10/18 Rpt: 13/24	2 FILER NAME Herman, Guy	3 Filer ID
4 Date 12/10/2016	5 Payee name Hicks, Renea (Mr.)	
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code P. O. Box 303187 Austin, TX 78703-0504	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Brief to AG on Bexar County mental health issues; implications for all statutory probate judges
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/22/2016	Payee name Jason's Deli	
Amount (\$) \$90.00	Payee address; City; State; Zip Code 1000 E 41st St Suite 940 Austin, TX 78751	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lunch with Shoal Creek Hospital staff
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/21/2016	Payee name Kerr, Stan (Mr.)	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 1412 Springdale Rd. Austin, TX 78721	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Holiday gift (given to all regular Court employees)
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES 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: Sch: 11/18 Rpt: 14/24	2 FILER NAME Herman, Guy	3 Filer ID
4 Date 11/15/2016	5 Payee name Larson, Christine (Ms.)	
6 Amount (\$) \$28.96	7 Payee address; City; State; Zip Code 4185 Travis Country Circle Austin, TX 78735	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for celebration of November Court birthdays (Central Market)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/16/2016	Payee name Larson, Christine (Ms.)	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 4185 Travis Country Circle Austin, TX 78735	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Holiday gift (given to all regular Court employees)
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/16/2016	Payee name Limon, Monica (Ms.)	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 3207 Goodwin Ave. Austin, TX 78702	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Holiday gift (given to all regular Court employees)
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 6(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: Sch: 12/18 Rpt: 15/24	2 FILER NAME Herman, Guy	3 Filer ID
--	------------------------------------	-------------------

4 Date 12/09/2016	5 Payee name Nisbett, Christy (Ms.)
-----------------------------	---

6 Amount (\$) \$161.01	7 Payee address; City; State; Zip Code 4317 Scales St. Austin, TX 78723
--------------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for Austin State Supported Living Center holiday gifts (Amazon)
---------------------------------	---	---

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

Date 12/09/2016	Payee name Nisbett, Christy (Ms.)
--------------------	--------------------------------------

Amount (\$) \$96.34	Payee address; City; State; Zip Code 4317 Scales St. Austin, TX 78723
----------------------------	---

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement--purchase of table for guardians' use in Guardianship Legal Assistant's office; Amazon
------------------------	---	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 12/09/2016	Payee name Nisbett, Christy (Ms.)
--------------------	--------------------------------------

Amount (\$) \$247.05	Payee address; City; State; Zip Code 4317 Scales St. Austin, TX 78723
-----------------------------	---

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for Court Coordinator's retirement party award & gifts (Crown Awards, Zazzle, Kellies)
------------------------	--	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

POLITICAL EXPENDITURES 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: Sch: 13/18 Rpt: 16/24	2 FILER NAME Herman, Guy	3 Filer ID
4 Date 12/06/2016	5 Payee name Nisbett, Christy (Ms.)	
6 Amount (\$) \$22.04	7 Payee address; City; State; Zip Code 4317 Scales St. Austin, TX 78723	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for candy prizes for Court CLE "Quiz Show" (HEB)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/28/2016	Payee name Nisbett, Christy (Ms.)	
Amount (\$) \$188.45	Payee address; City; State; Zip Code 4317 Scales St. Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement court goodbye lunch for Court Coordinator & Social Worker (EZ Cater/Modern Mrkt)
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/16/2016	Payee name Nisbett, Christy (Ms.)	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 4317 Scales St. Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Holiday gift (given to all regular Court employees)
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES 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: Sch: 14/18 Rpt: 17/24	2 FILER NAME Herman, Guy	3 Filer ID
4 Date 12/16/2016	5 Payee name Prashner, Daniel (Judge)	
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 4518 Avenue D Austin, TX 78751	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Holiday gift (given to all regular Court employees)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/16/2016	Payee name Ruffner, Tom (Mr.)	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 6106 Ginita Lane Austin, TX 78739	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Holiday gift (given to all regular Court employees)
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/19/2016	Payee name Scanlon, Tanya (Ms.)	
Amount (\$) \$27.00	Payee address; City; State; Zip Code 11512 Tin Cup Dr. #109 Austin, TX 78750	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for office cinnamon rolls (Upper Crust)
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES 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: Sch: 15/18 Rpt: 18/24	2 FILER NAME Herman, Guy	3 Filer ID
--	------------------------------------	-------------------

4 Date 12/16/2016	5 Payee name Scanlon, Tanya (Ms.)
-----------------------------	---

6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 11512 Tin Cup Dr. #109 Austin, TX 78750
----------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Holiday gift (given to all regular Court employees)
---------------------------------	--	---

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

Date 11/15/2016	Payee name Schlesinger, Madeline (Ms.)
--------------------	---

Amount (\$) \$35.94	Payee address; City; State; Zip Code 3301 Speedway Unit 2013 Austin, TX 78705
------------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for food for Court's celebration of November Court birthdays (Whole Foods)
-------------------------------	--	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 12/16/2016	Payee name Schlesinger, Madeline (Ms.)
--------------------	---

Amount (\$) \$200.00	Payee address; City; State; Zip Code 3301 Speedway Unit 2013 Austin, TX 78705
-------------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Holiday gift (given to all regular Court employees)
-------------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

POLITICAL EXPENDITURES 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: Sch: 16/18 Rpt: 19/24	2 FILER NAME Herman, Guy	3 Filer ID
4 Date 09/28/2016	5 Payee name Tramonte, Sam (Mr.)	
6 Amount (\$) \$195.00	7 Payee address; City; State; Zip Code 8904 McMean's Trail Austin, TX 78737	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Spanish tutoring	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Spanish tutoring, 9/15, 9/20, 9/22
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/06/2016	Payee name Tramonte, Sam (Mr.)	
Amount (\$) \$260.00	Payee address; City; State; Zip Code 8904 McMean's Trail Austin, TX 78737	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Spanish tutoring	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Spanish tutoring, 9/27, 9/29, 10/4, 10/6
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/20/2016	Payee name Tramonte, Sam (Mr.)	
Amount (\$) \$260.00	Payee address; City; State; Zip Code 8904 McMean's Trail Austin, TX 78737	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Spanish tutoring	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Spanish tutoring 10/11, 10/13, 10/18, 10/20
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES 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: Sch: 17/18 Rpt: 20/24	2 FILER NAME Herman, Guy	3 Filer ID
4 Date 11/08/2016	5 Payee name Tramonte, Sam (Mr.)	
6 Amount (\$) \$260.00	7 Payee address; City; State; Zip Code 8904 McMean's Trail Austin, TX 78737	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Spanish tutoring	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Spanish tutoring 10/24, 10/25, 11/1, 11/3
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 11/17/2016	Payee name Tramonte, Sam (Mr.)	
Amount (\$) \$195.00	Payee address; City; State; Zip Code 8904 McMean's Trail Austin, TX 78737	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Spanish tutoring	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Spanish tutoring 11/8, 11/10, 11/17
	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 12/15/2016	Payee name Tramonte, Sam (Mr.)	
Amount (\$) \$325.00	Payee address; City; State; Zip Code 8904 McMean's Trail Austin, TX 78737	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Spanish tutoring	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Spanish tutoring 11/29, 12/1, 12/6, 12/8, 12/15
	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES 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: Sch: 18/18 Rpt: 21/24	2 FILER NAME Herman, Guy	3 Filer ID
4 Date 10/06/2016	5 Payee name Voigt, Melissa (Ms.)	
6 Amount (\$) \$36.00	7 Payee address; City; State; Zip Code P.O. Box 96 Red Rock, TX 78662	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for intern share of office water, July/August/September (Ozarka)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/02/2016	Payee name Voigt, Melissa (Ms.)	
Amount (\$) \$80.18	Payee address; City; State; Zip Code P.O. Box 96 Red Rock, TX 78662	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for office water (Ozarka)
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/16/2016	Payee name Voigt, Melissa (Ms.)	
Amount (\$) \$200.00	Payee address; City; State; Zip Code P.O. Box 96 Red Rock, TX 78662	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Holiday gift (given to all regular Court employees)
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 1/1 Rpt: 22/24	2 FILER NAME Herman, Guy	3 Filer ID
--	------------------------------------	-------------------

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
--	----

5 Date 12/27/2016	6 Payee name Aeromexico
-----------------------------	-----------------------------------

7 Amount (\$) \$393.68	8 Payee address; City; State; Zip Code 3663 N. Sam Houston Parkway E. Suite #500 Houston, TX 77032
----------------------------------	--

9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Airfare. Trip to Oxaca. Spanish refresher.
----------------------------------	---	---

11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

--	--	--	--

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Printing Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/1 Rpt: 23/24		2 FILER NAME Herman, Guy		3 Filer ID	
4 Date 09/14/2016		5 Payee name Apple the Domain			
6 Amount (\$) \$1,284.93		7 Payee address; City; State; Zip Code 11410 Century Oaks Terrace Suite 120 Austin, TX 78758			
<input checked="" type="checkbox"/> Reimbursement from political contributions intended		8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	
				(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense iPad, case, keyboard, extended warranty	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
		Candidate/Officeholder name		Office sought	
				Office held	

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.		1 Total pages Schedule T: Sch: 1/1 Rpt: 24/24
2 FILER NAME Herman, Guy		3 Filer ID
4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Aeromexico		
5 Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input checked="" type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B - SS		
6 Dates of Travel 01/01/2017 01/01/2017	7 Name of person(s) traveling Herman, Guy (Judge)	
	8 Departure city or name of departure location Austin, Texas	
	9 Destination city or name of destination location Oxaca, Mexico	
10 Means of transportation Commercial Airplane	11 Purpose of travel (including name of conference, seminar, or other event) Spanish refresher.	
Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Aeromexico		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input checked="" type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B - SS		
Dates of Travel 01/13/2017 01/13/2017	Name of person(s) traveling Herman, Guy (Judge)	
	Departure city or name of departure location Oxaca, Mexico	
	Destination city or name of destination location Austin, Texas	
Means of transportation Commercial Airplane	Purpose of travel (including name of conference, seminar, or other event) Return from Spanish refresher.	