

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

9698

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 7
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mike	OFFICE USE ONLY Date Received 2020 JUL 15 AM 9:01 FILED FOR RECORD DANN D. BEAUDOIR COUNTY CLERK TRAVIS COUNTY TEXAS	
	NICKNAME LAST SUFFIX Denton		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 9727 FM 1826 Unit 18 Austin, TX 78737	Date and delivery or Date Postmarked	Amount
		Date Processed	Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ann	OFFICE USE ONLY	
	NICKNAME LAST SUFFIX Denton		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 9727 FM 1826 Unit 18 Austin TX 78737		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION 512-865-8151		
8 REPORT TYPE	<input 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 checked="" 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 THROUGH Month Day Year 02/23/2020 06/30/2020		
10 ELECTION	ELECTION DATE Month Day Year 03/03/2020	ELECTION TYPE <input checked="" 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)	12 OFFICE SOUGHT (if known) Travis County Attorney	

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**
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13 C / OH NAME Denton, Mike	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S)
 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
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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)	\$ 456.75
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 147.64
	4. TOTAL POLITICAL EXPENDITURES	\$ 41,413.06
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 350.38
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 15,000.00

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.

[Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Michael Denton, this the 14 day of July, 2020, to certify which, witness my hand and seal of office

<i>[Signature]</i> Signature of officer administering	seal of office JUAN CARLOS HAYWARD Notary Public STATE OF TEXAS ID#129930324 My Comm. Exp. 01/08/2022	<i>[Signature]</i> Printed name of officer administering Title of officer administering oath: <u>Public</u>
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SUBTOTALS - C/OH

18 FILER NAME Denton, Mike	19 Filer ID
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20 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 456.75
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 41,413.06
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
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 checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.12

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/7
2 FILER NAME Denton, Mike		3 Filer ID
4 Date 02/27/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeLong, Lisa	7 Amount of Contribution (\$) \$103.00
6 Contributor address; City; State; Zip Code 108 E Norton St Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/26/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez, Margaret	Amount of Contribution (\$) \$125.00
Contributor address; City; State; Zip Code 1802 Romford Dr Austin, TX 78704		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/26/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taniguchi, Keith	Amount of Contribution (\$) \$128.75
Contributor address; City; State; Zip Code 2818 Wooldridge Dr Austin, TX 78703		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zachos, Susan	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1202 Front St Oxford, MS 38655		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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: 1/2 Rpt: 5/7		2 FILER NAME Denton, Mike		3 Filer ID	
4 Date 03/04/2020		5 Payee name Alfred Stanley & Associates			
6 Amount (\$) \$1,500.00		7 Payee address; City; State; Zip Code PO Box 5674 Austin, TX 78763			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting 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 Fundraising consulting and services	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 02/26/2020		Payee name Allen, Bob			
Amount (\$) \$1,100.00		Payee address; City; State; Zip Code 8905 Pointer Ln Austin, TX 78758			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Voter contact at polling places	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 02/28/2020		Payee name Austin Chronicle Corp			
Amount (\$) \$1,545.00		Payee address; City; State; Zip Code 4000 N IH 35 Austin, TX 78701			
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 Newspaper ad	
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: 2/2 Rpt: 6/7		2 FILER NAME Denton, Mike		3 Filer ID	
4 Date 03/02/2020		5 Payee name BMO Harris Bank, NA			
6 Amount (\$) \$264.42		7 Payee address; City; State; Zip Code 17822 E 17th St Ste 412 Tustin, CA 92780			
8 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 Credit-card processing fees	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/26/2020		Payee name D. L. DeAngelo Consulting			
Amount (\$) \$3,000.00		Payee address; City; State; Zip Code 12325 Zeller Ln Austin, TX 78753			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting 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 Campaign management	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/25/2020		Payee name Jeff Crosby Direct Mail			
Amount (\$) \$33,856.00		Payee address; City; State; Zip Code 505 W 7th St Unit 108 Austin, TX 78701			
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 Campaign direct-mail piece including postage	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:
Sch: 1/1 Rpt: 7/7

2 FILER NAME
Denton, Mike

3 Filer ID

4 Date
03/12/2020

5 Name of person from whom amount is received
Frost Bank

8 Amount (\$)
\$0.12

6 Address of person from whom amount is received; City; State; Zip Code
111 W Houston St Ste 100

San Antonio, TX 78205

7 Purpose for which amount is received
Interest on campaign checking account

Check if political contribution returned to filer