## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	iuide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:		
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS (MR) MR, FIRST Chap	eles MIN.	OFFICE USE ONLY		
IVAIVIE	NICKNAME Chuck Taylor	SUFFIX JR.	Date Received		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #: CO	ETTY; STATE: ZIP CODE E, ELASO, TX 19924			
Change of Address			Malin & a		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (9/5) 757-233	EXTENSION 5	Date Hand-delivered or Date Postmarked		
6 CAMPAIGN TREASURER	MS / MRS (MA) MR FIRST CHAR	eles MIN	Receipt # Amount \$		
NAME	NICKNAME LAST Chuck TAYLOR,	SUFFIX  JR.	Date imaged 7		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SL 4501 CROTON CIPCLE & P.O., BOX 4443 E	=1 PASO TX . 799	ZIP CODE 324 OR 314		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (915) 757-2335	EXTENSION			
9 REPORT TYPE	January 15 30th day before ele	C Successive description	15th day after campaign treasurer appointment (Officeholder Only)  Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year 01/30/2017	THROUGH Month	Day Year / 07/2017		
11 ELECTION	ELECTION DATE  Month Day Year Primary  OS 06 / 2617  General	ELECTION TYPE Runoff Other Description Special			
12 OFFICE	OFFICE HELD (I ANY) TRUSTEE, SINGLE-MEM DISTRICT #5 El PASO I El PASO, TEXAS	1 ber Trustee SI TSD, #5 EIPASO	igle-MemberDistrict ISU, ElPASO, TX		
GO TO PAGE 2					

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

14 C/OH NAME  LARLES W. Chuck TAYLOR, IR. 15 Filer ID (Ethics Commission Filers)						
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.					
//	COMMITTEE TYPE					
MA	GENERAL					
	SPECIFIC					
		COMMITTEE CAMPAIGN TREASURER NAME				
Additional Pages						
		COMMITTEE CAMPAIGN TREASURER ADDRESS				
17 CONTRIBUTION		COLUMN CONTRIBUTIONS OF ARE OR LEGG (OTHER THAN				
TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ -0-			
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ -0-			
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$			
	4. TOTAL	POLITICAL EXPENDITURES	\$ -0-			
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY     OF REPORTING PERIOD					
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 53.54					
18 AFFIDAVIT						
		I swear, or affirm, under penalty of perjury, true and correct and includes all informatio				
OTARY A	ve)	under Title 15, Election Code.	Trequired to be reported by the			
MELISSA TORRES My Commission Expires						
September 19, 2018  Norman Market Committee Co						
Signature of Candidate of Officeholder						
AFFIX NOTARY STAMP / SEAL ABOVE						
Sworn to and subscribed before me, by the said Charles Taylor Jr , this the 10						
day of <u>Deril</u> , 20 17, to certify which, witness my hand and seal of office.						
reformed noting						
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath						

### SUBTOTALS - C/OH

### FORM C/OH

Co	OVER SHEET PG 3
19 FILERNAME (Chuck / TAylor, Ja. 20 Filer ID	(Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ .
4. SCHEDULE E: LOANS	\$53,54
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTION	vs \$
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUT	rions \$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH., \$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTION	ns \$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

LOANS			SCHEDULE E		
The Instruction Guide e	1 Total pages Schedule E:				
2 FILER NAME  CHARLES N. C	3 Filer ID (Ethics Commission Filers)				
4 TOTAL OF UNITEMIZED LOA	\$ 53,54				
5 Date of loan 7 Name of lender, Out-of-state PAC (ID#:)  MARCH, 2013 Charles N. Churk Taylor, JR			9 Loan Amount (\$) 53,54 IEFT IN 2013 CAMPAIN Account that REMAINEL OF		
Is lender a financial Institution?  Y N  8 Lender address; City; State; Zip Code  450   Croton Circle, Ellaso, Tx 79924			10 Interest rate  11 Maturity date		
12 Principal occupation, Job title (See In:	structions)	13 Employer (See Instructions)	-		
14 Description of Collateral		15 Check if personal funds were account (See Instructions)	deposited into politicaTP Morgan 1ASE BANK, NA DIOS		
16 GUARANTOR 17 Name of guaran	itor	7 4 4 000000000000000000000000000000000	19 Amount Guaranteed (\$)		
not applicable	ress; City; S	State; Zip Code	. He		
20 Principal Occupation (See Instructions)	)	21 Employer (See Instructions)	4		
Date of loan Name of lender out-of-state PAC (ID#:)		Loan Amount (\$)			
a financial	Lender address; City; State; Zip Code		Interestrate		
Institution? Y N			Maturity date		
Principal occupation / Job title (See In:	structions)	Employer (See Instructions)			
Description of Collateral		Check if personal funds were account (See Instructions)	deposited into political		
GUARANTOR Name of guaran	tor		Amount Guaranteed (\$)		
Guarantor address; City; State; Zip Code					
Principal Occupation (See Instructions)		Employer (See Instructions)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED  If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.					