CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages file	ed:		
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST	MI	OFFICE	USE ONLY		
NAME	Christopher G.Taylor	Date Received				
	NICKNAME LAST	SUFFIX				
	Chris Taylor					
4 CANDIDATE / OFFICEHOLDER		CITY; STATE; ZIP CODE	JAN 1 3 2020			
MAILING ADDRESS	4209 Brook Hollow Lane					
Change of Address	San Angelo, Texas 76904					
5 CANDIDATE/	AREA CODE PHONE NUMBER	EXTENSION				
OFFICEHOLDER PHONE	(325) 656-0049	Date Hand-delivered or Date Postmarked				
6 CAMPAIGN	MS / MRS / MR FIRST	MI	Receipt #	Amount \$		
TREASURER NAME	Richard A	Date Processed				
	Rick McKiney	SUFFIX	Date Imaged			
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT / SU	JITE #; CITY;	STATE;	ZIP CODE		
TREASURER ADDRESS	36 W. Beauregard Ave., Suite 400					
(Residence or Business)	605					
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (325) 655-4104					
treasu				er campaign pointment r Only)		
	July 15 8th day before ele	ction Exceeded \$500 limit	Final Report	(Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year Month Day Year					
COVERED	07 /01 /2019 _{THROUGH} 12 /31 /2019					
11 ELECTION						
	Month Day Year Primary	Runoff Other Description				
	General	Special				
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)			
GO TO PAGE 2						
GO TO FAGE 2						

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME			15 Filer ID (Ethics Commission Filers)			
Christopher G. Taylor						
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 OF OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.					
	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL					
	COMMITTEE ADDRESS					
	SPECIFIC					
		COMMITTEE CAMPAIGN TREASURER NAME				
Additional Pages						
		COMMITTEE CAMPAIGN TREASURER ADDRESS				
17 CONTRIBUTION TOTALS	PLEDGI	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER T) ES, LOANS, OR GUARANTEES OF LOANS, OR IBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED	\$ 150.92			
		POLITICAL CONTRIBUTIONS				
	V-10/40 10 100 100 100 100 100 100 100 100 10	THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 15 0.92			
EXPENDITURE 3. TOTAL POLITICAL EXPENDITURES UNLESS ITEMIZED		POLITICAL EXPENDITURES OF \$100 OR LESS,	\$ 0.00			
	4. TOTAL POLITICAL EXPENDITURES		\$ 750.00			
CONTRIBUTION BALANCE	100 TO THE TOTAL TO	POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST ORTING PERIOD	\$ 49.82			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		THE \$ 0.00			
18 AFFIDAVIT						
	TEENA PIERC Notary Public STATE OF TEXAS ID # 231426-7 ly Comm. Exp. Nov. 18,	true and correct and includes all inf under Title 15, Election Code.	perjury, that the accompanying report is formation required to be reported by me			
		Signature of Car	ndidate or Officeholder			
AFFIX NOTARY STAM	P/SEALAROVE					
AFFIX NOTARY STAIN	FISCACADOVE	4	12			
Sworn to and subsc	m = 5 m m	by the said <u>CRTIS Taylor</u> to certify which, witness my hand and seal of office	, this the			
Luena Pièrce Teena lierce Office Mgr.						
Signature of officer a		Printed name of officer administering oath	Title of officer administering oath			

POLITICAL EXPENDITURES MADE 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
Gifl/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 c	complete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
1	Christopher G. Taylor			
4 Date	5 Payee name			
11-09-2019	Tom Green County Republican	n Party		
6 Amount (\$)	7 Payee address;	City;	State; Zip Code	
\$750.00	22 S. Abe, San Angelo, Texa	as 76903		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Fees	Filing Fee	e for ballot	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
Amount (\$)	Payee address;	City;	State; Zip Code	
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE				
OF EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		
Complete <u>QNLY</u> if direct expenditure to benefit C/Of	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
Amount (\$)	Payee address;	City;	State; Zip Code	
-	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought	Office held	
Anum	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEI	EDED	