| | | CEHOLDER CE REPORT | | | FORM C/OH COVER SHEET PG 1 |
|---|--------------------------------|-------------------------------------|---|-------------------------------------|--|
| The C/OH Instruction | Guide explains | how to complete this for | m. 1 Filer ID | | 2 Total pages filed: |
| 6 04 IDID 4 TE / | Tuo (upo (i | ID FIDOT | | | 10 |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS/MRS/N | IR FIRST Stephanr | ne | МІ | OFFICE-USE ONLY |
| | NICKNAME | LAST Davenpo | rt | SUFFIX | FEB 05 2018 |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS | ADDRESS / P 409 S. River | O BOX; APT / SUITE #; shire | CITY; | ZIP CODE | Bate Hane-delivered or gate Restmates Receipt Amount |
| Change of Address | Conroe, TX | 77304 | | | Date Processed |
| | | | | | Date Imaged |
| 5 CAMPAIGN TREASURER NAME | MS/MRS/M | R FIRST | <i>)</i> | MI | - |
| | NICKNAME | LAST | *************************************** | SUFFIX | |
| | | hodriqu | uez | | 55 |
| 6 CAMPAIGN TREASURER ADDRESS | | RESS (NO PO BOX PLEAS | , | T/SUITE#; CITY; | |
| (Residence or Business) | 23 | Veranda 1 | hidge " | The Was | dlands 77382 |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE | PHONE NUMBER | EXTENSION | | |
| 8 REPORT TYPE | January 1 | <u> </u> | before election | Runoff Exceeded \$500 limit | 15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR) |
| 9 PERIOD COVERED | Month Day 01/01/20 | | THROUGH | Month Day 01/25/201 | Year 8 |
| 10 ELECTION | ELECT Month Day 03/06/20 | 1 1 | X Primary General | ELECTION TYPE Runoff Special | Other . |
| 11 OFFICE | OFFICE HELD | (if any) surer Place Texas Montg | gomery | 12 OFFICE SOUGHT County Treasure | |
| | | | | | |
| | | G | GO TO PAGE 2 | _ | |
| orms provided by Te | xas Ethics Cor | nmission ww | w.ethics.state.tx.u | S | Version V1.0.552 |

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

| | | | | | | 2 of 10 | | | |
|--|--|---|--|---------------------------|-------------------------|-------------------------|--|--|--|
| 13 C / OH NAME | Davenport, | Stephann | е | 14 Filer ID | .,, | · | | | |
| 15 NOTICE FROM POLITICAL COMMITTEE(S) | candidate / of | ox is for notice of political contributions accepted or political expenditures made by political committees to support the late / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or nt. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. | | | | | | | |
| Additional Pages | COMMITTE | | COMMITTEE NAME | | | | | | |
| | SPECIFI | ic | COMMITTEE ADDRESS | | | | | | |
| | | | COMMITTEE CAMPAIGN TREASURER NAME | | | | | | |
| | | | COMMITTEE CAMPAIGN TREASURER ADDRES | ss | | | | | |
| 16 CONTRIBUTION TOTALS | 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 | | | | | 8,263.32 | | | |
| CONTRIBUTION BALANCE | REPO | RTING PE | | \$ | 43,886.36 | | | | |
| OUTSTANDING LOAN TOTALS | 6. TOTAI OF TH | PRINCIP. E REPOR | AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD | \$ | 69,485.00 | | | | |
| 17 AFFADAVIT | | | l swear, or affirm, under penalty true and correct and includes all under Title 15, Election Code. | of perjury, that the acco | ompanying be reporte | g report is ed by me | | | |
| Sworn to and subso | AROLYN J. B otary ID #120 y Commissio March 21, TARY STAMP? cribed before me | ENNET 645696-7 n Expires 2020 SEAL ABO e, by the sa | Signature of | Candidate or Officehold | ŧ | day | | | |
| Signature of office | Oxfor | mott | Cardun Themett Printed name of officer administering | Title of officer | \ | ing oath | | | |

FORM C/OH SUBTOTALS - C/OH **COVER SHEET PG 3** 18 FILER NAME 19 Filer ID Davenport, Stephanne 20 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS 3. \$ SCHEDULE E: LOANS \$ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS X \$ 8,263.32 SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ 7. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ 9. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ 10. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 11. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED \$ 12. TO FILER

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Travel Out of District Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 1/7 Rpt: 4/10 Davenport, Stephanne 4 Date Payee name 01/25/2018 American Screen Graphic 6 Amount (\$) Payee address; City; State; Zip Code \$587.00 1701 Northpark DR Kingwood, TX 77339 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas, Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Advertising Candidate/Officeholder name Office held Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name 01/05/2018 Bentwater Yacht and Country Club Payee address; City; State; Zip Code Amount (\$) \$20.00 800 Bentwater Dr Montgomery, TX 77356 (b) Description **PURPOSE** (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas, Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Meetings / Lunch Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Payee name Date Calendar Wiz 01/11/2018 State; Zip Code Payee address; City; Amount (\$) \$8.00 45 Lafayette Rd North Hampton, NH 03862 (b) Description **PURPOSE** (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. OF Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Community Calendar Office held Office sought Candidate/Officeholder name Complete ONLY if direct expenditure to benefit C/OH Version V1.0.5521 www.ethics.state.tx.us Forms provided by Texas Ethics Commission

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundralsing Expense Accounting/Banking Consulting Expense Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Gift/Awards/Memorials Expense Printing Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee 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: 2 FILER NAME 3 Filer ID Sch: 2/7 Rpt: 5/10 Davenport, Stephanne Payee name 01/20/2018 ETIX. Amount (\$) Payee address; City; State; Zip Code \$60.00 909 Aviation Pkwy #900 Mortisville, NC 27560 **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) (b) Description ΩF Contributions/Donations Made Bv Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Taste of the Town Tickets Candidate/Officeholder name Office held Complete ONLY if direct Office sought expenditure to benefit C/OH Payee name Date 01/10/2018 East Montgomery County Fair Association Payee address; City; State; Zip Code Amount (\$) \$100.00 21670 McClesky Rd New Caney, TX 77357 PURPOSE (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Sponsorship East Montgomery County Fair Association Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name 01/01/2018 Facebook State; Zip Code Payee address; Amount (\$) City; 1601 Willow Road \$17.00 Menlo Park, CA 94025 (b) Description **PURPOSE** (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Advertising Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Version V1.0.5521 www.ethics.state.tx.us

Forms provided by Texas Ethics Commission

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS **EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Solicitation/Fundralsing Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee Transportation Equipment & Related Expense Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Polling Expense Travel in District Salaries/Wages/Contract Lahor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 3/7 Rpt: 6/10 Davenport, Stephanne Payee name 01/12/2018 Facebook 6 Amount (\$) Payee address; City; State; Zip Code 1601 Willow Road \$800.00 Menio Park, CA 94025 PURPOSE (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Advertising Candidate/Officeholder name Office held 9 Complete ONLY if direct Office sought expenditure to benefit C/OH Date Payee name 01/19/2018 Facebook State; Zip Code Amount (\$) Payee address; City, 1601 Willow Road \$20.00 Menio Park, CA 94025 (b) Description **PURPOSE** (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas, Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Donation to American Foundation of Suicide Prevention Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name 01/19/2018 Facebook State; Zip Code Payee address; City; Amount (\$) 1601 Willow Road \$20.00 Menio Park, CA 94025 (b) Description **PURPOSE** (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. OF Contributions/Donations Made By EXPENDITURE Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Donation for Network For Good Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Version V1.0.5521 www.ethics.state.tx.us Forms provided by Texas Ethics Commission

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Advertising Expense Event Expense Accounting/Banking Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Consulting Expense Contributions/ Donations Made By Travel in District Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 4/7 Rpt: 7/10 Davenport, Stephanne 4 Date Payee name 01/22/2018 Facebook Payee address; 6 Amount (\$) City: State; Zip Code \$750.00 1601 Willow Road Menlo Park, CA 94025 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Advertising Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name Magnolia Young Republicans 01/20/2018 Payee address; State: Zip Code Amount (\$) \$525.00 PO Box 61 Magnolia, TX 77355 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Sponship of Magnolia Young Republicans Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Payee name Montgomery County Association of Business Women 01/24/2018 City; State; Zip Code Payee address; Amount (\$) 13921 Hwy 105 West \$262.50 Ste. 130 Conroe, TX 77304 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. OF Contributions/Donations Made By Check if Austin, TX, officeholder living expense **EXPENDITURE** Candidate/Officeholder/Political Committee Sponsor Sock Hop for Scholarships Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Version V1.0.5521 Forms provided by Texas Ethics Commission www.ethics.state.tx.us

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Advertising Expense Event Expense Transportation Equipment & Related Expense Accounting/Banking Fees Consulting Expense Contributions/ Donations Made By -Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Travel in District Printing Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee 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: 2 FILER NAME 3 Filer ID Sch: 5/7 Rpt: 8/10 Davenport, Stephanne 4 Date Payee name 01/20/2018 Montgomery County Republican Women Payee address; City: State; Zip Code 6 Amount (\$) \$200.00 PO Box 1766 Conroe, TX 77304 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Sponsorship of Montgomery County Republican Women Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name North Shore Republican Women 01/25/2018 Payee address; City: State; Zip Code Amount (\$) \$20.00 30 Hairway Park Montgomery, TX 77356 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch Meeting Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Payee name PayPal 01/01/2018 State; Zip Code City; Payee address; Amount (\$) \$229.68 2211 N First St San Jose, CA 95131 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. OF Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Donation to Orphan Cares Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Version V1.0.5521 www.ethics.state.tx.us Forms provided by Texas Ethics Commission

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS **EXPENDITURE CATEGORIES FOR BOX 8(a)** Solicitation/Fundralsing Expense Advertising Expense Event Expense Loan Repayment/Reimbursement Accounting/Banking Office Overhead/Rental Expense Fees Transportation Equipment & Related Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Consulting Expense Contributions/ Donations Made By -Food/Beverage Expense Gift/Awards/Memorials Expense Travel in District Travel Out of District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 6/7 Rpt: 9/10 Davenport, Stephanne 4 Date Payee name 01/12/2018 Proven Results Marketing Payee address; 6 Amount (\$) City: State; Zip Code \$4,158,42 27351 Blueberry Hill Dr Conroe, TX 77385 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Advertising Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/15/2018 Send Out Cards Payee address: City; State: Zip Code Amount (\$) \$42.22 413 Prattwood Ct League City, TX 77573 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule $\mathsf{T}.$ Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Subscription Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 01/11/2018 The Woodlands Republican Women Payee address; City; State; Zip Code Amount (\$) PO Box 7294 \$46.00 The Woodlands, TX 77387 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. OF Fees Check if Austin, TX, officeholder living expense **EXPENDITURE** Lunch / Meeting Plus Guest Jessica Stark Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Version V1.0.5521 www.ethics.state.tx.us Forms provided by Texas Ethics Commission

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Office Overhead/Rental Expense Fees Transportation Equipment & Related Expense Consulting Expense Contributions/ Donations Made By -Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Travel Out of District Candidate/Officeholder/Political Committee Credit Card Payment OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 7/7 Rpt: 10/10 Davenport, Stephanne Payee name 01/11/2018 Tracey Jowers Virtual Assistant 6 Amount (\$) Payee address; City; State; Zip Code \$142.50 10619 Twin Oaks Dr Conroe, TX 77385 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor EXPENDITURE Check if Austin, TX, officeholder living expense Virtual Assistant-Campaign Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/17/2018 Tradey Jowers Virtual Assistant Payee address; City; State: Zip Code Amount (\$) \$202.50 10619 Twin Oaks Dr Conroe, TX 77385 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. OF Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Virtual Assistant-Campaign Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name Tracey Jowers Virtual Assistant 01/23/2018 State; Zip Code Payee address; Amount (\$) 10619 Twin Oaks Dr \$52.50 Conroe, TX 77385 PURPOSE (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. OF Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Virtual Assistant-Campaign Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Version V1.0.5521 Forms provided by Texas Ethics Commission www.ethics.state.tx.us