		E / OFFICEHOLDER I FINANCE REPORT			FORM C/OH COVER SHEET PG 1
Th	e C/OH Instruction G	Buide explains how to complete this	form. 1 Filer ID		2 Total pages filed: 10
3	CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Jasor		MI	OFFICE USE TO THE DATE OF THE PERSON OF THE
		NICKNAME LAST Dunn		SUFFIX	FEB 2 6 2018 TRATE
4	CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE 23424 Dunn Lane	E#; CITY;	ZIP CODE	Date God-delivered of Date Postmarker of Receipt # Arrount
	Change of Address	Porter, TX 77365			Date Imaged
5	CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST		мі J.	
		NICKNAME LAST	J	SUFFIX	
6	CAMPAIGN TREASURER ADDRESS (Residence or Business)	REST ADDRESS (NO PO BOX PI	,	r/suite#; city;	state: ZIP CODE
7	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUM 713 562			
8	REPORT TYPE	January 15 30th	day 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 Year 01/26/2018	THROUGH	Month Day 02/24/2018	Year B
10	ELECTION	ELECTION DATE Month Day Year 03/06/2018	X Primary General	ELECTION TYPE Runoff Special	Other
11	OFFICE	OFFICE HELD (if any) None Montgomery		JUSTILE OF	it known) the Peace PCT. 4
			GO TO PAGE 2		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

				2 of 10							
13 C / OH NAME	Dunn, Jason	14 F	ler ID								
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditures made without the call officeholders are required to report this information only	ndidate's or officeholder's	knowledge or							
Additional Pages	COMMITTEE TYPE										
	GENERAL										
		COMMITTEE ADDRESS									
	SPECIFIC										
		COMMITTEE CAMPAIGN TREASURER NAME									
		COMMITTEE CAMPAIGN TREASURER ADDRESS									
16 CONTRIBUTION TOTALS	TOTAL POLITIC LOANS, OR GUA	AL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ARANTEES OF LOANS), UNLESS ITEMIZED	PLEDGES, \$	0.00							
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)										
EXPENDITURE TOTALS	IZED \$	0.00									
	\$	3,694.60									
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	Þ	8,403.74								
OUTSTANDING LOAN TOTALS	- · · · · · · · · · · · · · · · · · · ·										
17 AFFADAVIT		I swear, or affirm, under penalty of pe true and correct and includes all info under Title 15, Election Code.									
	VICKIE LYNN HALL IY COMMISSION EXPIRES November 3, 2019										
		Signature of Cano	lidate or Officeholder								
	TARY STAMP / SEAL ABout the second of the s	7	his the $24^{\frac{1}{2}h}$	day							
Signature of en	Cer administering	Printed name of officer administering	Title of officer admini	stering oath							

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 10 19 Filer ID 18 FILER NAME Dunn, Jason 20 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE 2,700.00 X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ Х SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ 80.88 SCHEDULE B: PLEDGED CONTRIBUTIONS 3. \$ SCHEDULE E: LOANS \$ 4. 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 3,694.60 SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 6. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ 8. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ 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

-	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1	
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/10
2	FILER NAME Dunn, Jasor			3 Filer ID
4	Date 02/21/2018	5 Full name of contributor	7 Amount of Contribution (\$) \$2,700.00	
8	Principal occu	Splendora , TX 77328 upation / Job title (See Instructions)	9 Employer (See Instruction	ns)

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 CONTRIBUTIONS 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 5/10 3 Filer ID 2 FILER NAME Dunn, Jason \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 5 Date 8 Amount of In-kind contribution 6 Full name of contributor out-of-state PAC (ID#: contribution (\$) description 01/29/2018 Prvkrvl. Elizabeth \$28.09 | Reese's Peanut Butter Contributor address; City; State; Zip Code Cups for Event 20706 Bellhaven Spring Dr Porter, TX 77365 Check if travel outside of Texas. Complete Schedule T. 11 Employer (FOR NON-JUDICIAL) (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) (See instructions) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Amount of Full name of contributor out-of-state PAC (ID#: Date contribution (\$) description 01/29/2018 Prykryl, Elizabeth \$9.991 Polyester Table Cloth for Contributor address; City; State; Zip Code 20706 Bellhaven Spring Dr Porter, TX 77365 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) Contributor's employer/law firm (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Amount of In-kind contribution Full name of contributor Date out-of-state PAC (ID#: contribution (\$) description 02/10/2018 Prykryl, Elizabeth \$50.001 Dunn Right Cookies Contributor address; City; State; Zip Code 20706 Bellhaven Spring Dr Porter, TX 77365 Check if travel outside of Texas. Complete Sche Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment	e Legal Services	Printing Expense Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
	The Instruction Guide explains he		
1 Total pages Schedule F1: 2 FILE		3	Filer ID
	ın, Jason		
4 Date 5 Pays	ee name		
02/21/2018 Ame	erican Screen Graphics		
6 Amount (\$) 7 Paye	ee address; City; State;	Zip Code	
\$612.15 170	1 Northpark Dr		
Kind	gwood, TX 77339		
	PGOTY (See Categories listed at the top of this sched	(b) Description	
OF Adv	rertising Expense	· · · · ·	aside of Texas. Complete Schedule T.
EXPENDITURE	entioning Expenses	Check if Austin,	IX, officeholder living expense
		Marketing	
	idate/Officeholder name Of	fice sought	Office held
expenditure to benefit C/OH			
Date Pave	ee name		
•	eBook		
Amount (\$) Paye	ee address; City; State;	Zip Code	
l '''	acker Way		
Ψ255.55	2010. 114)		
1400	ole Dayle CA 0420E		•
Mer	nlo Park , CA 94205		
	egory (See Categories listed at the top of this sched	(b) Description	and the second of the second o
EXPENDITURE Adv	rertising Expense	. <u> </u>	tside of Texas. Complete Schedule T. X, officeholder living expense
		Facebook Adv	
			3
Complete ONLY if direct Cand	idate/Officeholder name Of	I fice sought	Office held
expenditure to benefit C/OH	March of Moor Product Trains	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
i *	ee name		
02/16/2018 Fac	eBook		
' '		Zip Code	
\$16.12 1 H	acker Way		
Mer	nlo Park , CA 94205		
PURPOSE (a) Cate	PGOTY (See Categories listed at the top of this sched	(b) Description	
OF Adv	vertising Expense	Check if travel ou	tside of Texas. Complete Schedule T.
EXPENDITURE		, –	IX, officeholder living expense
		Facebook Adv	ertising
	idate/Officeholder name Of	fice sought	Office held
expenditure to benefit C/OH			

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	l Committee	Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.					THER (enter a category not listed at	ove)
1	Total pages Schedule F1:	2 FILER NAM	E			į;	3 F	iler ID	
	Sch: 2/5 Rpt: 7/10	Dunn, Jaso	on						
4	Date	5 Payee name	:						
	02/01/2018	FaceBook							
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	de				
	\$15.73	1 Hacker V	Vay						
L		Menio Pari	c, CA 94205						
8	PURPOSE	(a) Category (s	See Categories listed at the top or	f this schedule)	(b)	Description			
	OF EXPENDITURE	Advertising	Expense			=		of Texas. Complete Schedule T.	
	,					Facebook Adv		iceholder living expense	
						T docook Adv	v Ci uc	,g	
Ļ	Complete ONLY if direct	Candidata/Of	iceholder name	Office sou	aht			Office held	
9	expenditure to benefit C/OI		icendider Hame	Office Sou	yııı			Office field	
L								T	
	Date	Payee name)						
	02/13/2018	GotPrint							
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	de				
	\$453.02	7651 San I	ernando Rd						
		Burbank , (CA 91505						
_	PURPOSE	(a) Category (s	See Categories listed at the top o	f this schedule)	(b)	Description			
	OF EXPENDITURE	Advertising		•		Check if travel o	utside	of Texas. Complete Schedule T.	
	EXPENDITORE	_					TX, off	liceholder living expense	
						Printing			
L		<u></u>			<u> </u>				
ŀ	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office sou	ght			Office held	
L	experience to benefit or or								
	Date	Payee name)						
•	02/10/2018	Greater Ea	st Montgomery Count	y Chamber					
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	de	•			
	\$150.00	21575 US	59 Ste 100						
		New Cane	y, TX 77357						
	PURPOSE	(a) Category (s	See Categories listed at the top o	f this schedule)	(b)	Description	•		
	OF EXPENDITURE		ns/Donations Made B					of Texas. Complete Schedule T.	
		Candidate/	Officeholder/Political (Committee		Donation	IX, OII	ficeholder living expense	
						COHOUGH			
<u> </u>	Committee CHIVET	0		O#5	 			Office held	
	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office sou	ynt			Ollice neid	
<u> </u>			· · · · · · · · · · · · · · · · · · ·						
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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Gift/Awards/Memorial Legal Services The Instruction G	,		lages	s/Contract Labor	Travel Out of District OTHER (enter a category not listed about	ve)
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	
L	Sch: 3/5 Rpt: 8/10		Dunn, Jasoi	1						
4	Date	5	Payee name							
	02/14/2018		K&K Insura	nce						,
6	Amount (\$)	7	Payee addres	ss; City;	State	; Zip Co	de			
	\$135.00		P.O. Box 23	38						
			Fort Wayne	, IN 46801-233	38					,
8	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sch	nedule)	(b)	Description		
	OF EXPENDITURE		Event Exper	nse ,				<u></u>	de of Texas. Complete Schedule T. officeholder living expense	
								Insurance	Commentation assing experies	
9	Complete ONLY if direct	(Candidate/Offic	ceholder name	(Office sou	ght		Office held	
	expenditure to benefit C/OI	1					-			
┢	Date		Payee name		,					
	02/16/2018		New Caney	Splendora Me	tro Go Texa	ın Comm	ittee	e		
H	Amount (\$)		Payee addres	s; City;	State	; Zip Co	de			
	\$250.00		Po Box 22							
ŀ										
			Porter, TX 7	7365						
Г	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sci	nedule)	(b)	Description		<u> </u>
	OF EXPENDITURE			s/Donations M					de of Texas. Complete Schedule T.	
			Candidate/0	Officeholder/Po	litical Comn	nittee		Underwriter for	, officeholder living expense Band	
		l						Orider Whiter for a		
H	Complete ONLY if direct		Candidate/Offi	eholder name	(Office sou	aht		Office held	
	expenditure to benefit C/OI						•			
F	Date	Γ	Payee name				-			
	02/21/2018	ļ	Pay Pal							
┢	Amount (\$)	H	Payee addres	ss; City;	State	; Zip Co	de			
l	\$78.60		2211 North	-		·				
			San Jose, C	A 95131						
Г	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sch	hedule)	(b)	Description		
l	OF EXPENDITURE		Accounting/	Banking					ide of Texas. Complete Schedule T.	
								Transaction fee	, officeholder living expense	
						•		Transaston ice		
\vdash	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder name		Office sou	αht		Office held	
	expenditure to benefit C/OI		- Minimal Groff	ZONORGE HOME	`	-1110G 30U	A. II		Office Hold	
\vdash										
ł	*									

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made ByCandidate/Officeholder/Political Ci

Event Expense Foes Food/Beverage Expense
Gft/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Politing Expense Printing Expense Salaries/Contract Lahor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a restractor not listed a list.)

	Candidate/Officeriolder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 4/5 Rpt: 9/10	Dunn, Jason
4	Date	5 Payee name
	02/14/2018	PostNet
6	Amount (\$) \$123.41	7 Payee address; City; State; Zip Code 4038 Wilson Rd Ste 300 Humble, TX 77396
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mailing
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	02/01/2018	Proven Results Marketing
	Amount (\$) \$776.69	Payee address; City; State; Zip Code Po Box 2389 Spring, TX 77383
	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Marketing
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	02/12/2018	Sloan, James
	Amount (\$) \$100.00	Payee address; City; State; Zip Code 25700 IH45 N Ste 100 Spring, TX 77386
-	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Band Friendship Center Donation
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Gift/Award Legal Serv	erage Expense s/Memorials Exp ices ruction Guide			xpens Vages	e /Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed ab	ove)
1	Total pages Schedule F1:	2	FILER NAME							3	Filer ID	
-	Sch: 5/5 Rpt: 10/10	_	Dunn, Jasoi									
4	Date	5	Payee name									
	02/05/2018		Splendora A	Area So	ftball Assoc	iation						
6	Amount (\$)	7	Payee addres	ss; (City;	State;	Zip Co	de				
	\$300.00		25840 lpes	Rd								
Ļ	PLIPPOSE	(0)	Splendora,					(b)	Danadadaa			
8	PURPOSE OF	(a)	Category (Se				dule)	(u)	Description Check if travel	outsi	de of Texas. Complete Schedule T.	
	EXPENDITURE		Contribution Candidate/C				ttee		<u>—</u>		officeholder living expense	
									Donation			
9	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offic	ceholder	name	0	ffice sou	ght			Office held	
F	Date	Π	Payee name									,
	02/17/2018		Splendora A	Area So	ftball Assoc	iation						:
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	\$200.00		25840 lpes									:
			-									
			Splendora,	TX 773	72							
Г	PURPOSE	(a)	Category (Se	ee Categori	es listed at the to	p of this sche	dule)	(b)	Description			
	OF EXPENDITURE		Contribution								de of Texas. Complete Schedule T.	
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ł	expenditure to benefit C/O							•				!
⊨	Date		Pavee name									
	02/10/2018		Splendora H	High Sci	haal							
┝	Amount (\$)	-	Payee addres		Dity;	State	Zip Co	do				
	\$250.00		23747 FM 2		July,	State,	Zip CC	au C				
	φ <u>2</u> 30.00		2014) I W Z	,020								
			Splendora,	TX 773	372							
_	PURPOSE	(a)	Category (Se	ao Categori	pe listed at the to	in of this scho	dule)	(b)	Description			
	OF EXPENDITURE	` `	Contribution							outsi	de of Texas. Complete Schedule T.	
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									Radio Broad	cas	t Donation	
<u> </u>		<u> </u>				,		ــِــا				
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic	ceholder	name	0	ffice sou	ght			Office held	
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