


CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

Form C/OH
Cover Sheet PG 1

The C/OH instruction Guide explains how to complete this form. Filer ID (Ethic Commission Filers) Total pages filed:

CANDIDATE / OFFICEHOLDER NAME	Title	First	MI:			
	NickName	Last	Suffix			
Gregory		Parker				
2226 Oak Rise Drive		Conroe TX 77304				
CANDIDATE / OFFICEHOLDER ADDRESS	Address/PO Box	Apt/Suite#	City	State	Zip Code	
<input type="checkbox"/> Change of Address	2226 Oak Rise Drive		Conroe	TX	77304	
CANDIDATE / OFFICEHOLDER PHONE	Area Code	Phone Number	Extension			
		(830) 221-5220				
CAMPAIGN TREASURER ADDRESS	Title	First	MI:		Receipt #	Amount
	NickName	Last	Suffix		Date Processed	Date Imaged
Mrs.		Tasha	Parker			
CAMPAIGN TREASURER ADDRESS	Street Address	Apt/Suite#	City	State	Zip Code	
	2226 Oak Rise Drive		Conroe	TX	77304	
CAMPAIGN TREASURER PHONE	Area Code	Phone Number	Extension			
		(830) 660-9289				
REPORT TYPE	<input type="checkbox"/> January 15	<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment		
	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit	<input type="checkbox"/> Final report		
PERIOD COVERED	Month	Day	Year	Month	Day	Year
			1/1/2018	THROUGH		1/25/2018
ELECTION	Election Date	Election Type				
	3/6/2018	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special				
OFFICE	Office Held (if any)	Office Sought (if known)				
		Montgomery County Commissioner PCT #2				

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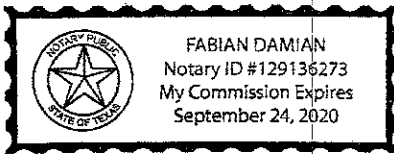
CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

Form C/OH
Cover Sheet PG 2

C/OH NAME		Gregory Parker	Filer ID (Ethics Commission Filers)
NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> 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.		
	COMMITTEE TYPE	Committee Name	
	<input type="checkbox"/> GENERAL	Committee Address	
	<input type="checkbox"/> SPECIFIC	Committee Campaign Treasurer Name	
		Committee Campaign Treasurer Address	
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)		\$8,205.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED		\$0.00
	4. TOTAL POLITICAL EXPENDITURES		\$378.19
CONTRIBUTION BALANCE	5. TOTAL PRINCIPAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$19,176.98
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$15,000.00

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



Gregory Parker
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Gregory Parker, this the 5th day of February 2018, to certify which, witness my hand and seal of office.

Fabian Damian
Signature of officer administering oath

Fabian Damian
Print name of officer administering oath

Notary Public / Parker
Title of officer administering oath

SUBTOTALS - C/OH

Form C/OH
Cover Sheet PG 3

FILER NAM		Filer ID (Ethics Commission Filers)
Gregory Parker		
SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTALS AMOUNTS
<input type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$4,205.00
<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY(IN-KIND) POLITICAL CONTRIBUTIONS	\$4,000.00
<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$2,000.00
<input type="checkbox"/>	SCHEDULE E: LOANS	\$15,000.00
<input type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$378.19
<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$0.00
<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$0.00
<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$0.00
<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$0.00
<input type="checkbox"/>	SCHEDULE H: PAYMENTS MADE FROM POLITICAL CONTRIBUTIONS TO BUSINESS OF C/OH	\$0.00
<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$0.00
<input type="checkbox"/>	SCHEDULE K: INTREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILIER	\$0.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

Total Pages this schedule A1: Page 1 of 4

FILER NAME

Gregory Parker

Filer ID (Ethics Commission Filers)

DATE	Full name of contributor	out-of-state PAC (ID# _____)	Amount of contribution (\$)
1/4/2018	Deborah Dousay		\$25.00
	Contributor address:	City: State: Zip Code	
	33507 Walnut Grove Ln, Magnolia, TX, 77355		
Principal occupation / Job Title (See Instructions)		Employer (See Instructions)	
Retired		Retired	

DATE	Full name of contributor	out-of-state PAC (ID# _____)	Amount of contribution (\$)
1/5/2018	Jake Gabriel		\$100.00
	Contributor address:	City: State: Zip Code	
	9011 Sendera Dr, Magnolia, TX, 77354		
Principal occupation / Job Title (See Instructions)		Employer (See Instructions)	
Sales		Medline	

DATE	Full name of contributor	out-of-state PAC (ID# _____)	Amount of contribution (\$)
1/11/2018	Tasha Parker		\$175.00
	Contributor address:	City: State: Zip Code	
	2226 Oak Rise Drive, Conroe, TX, 77304		
Principal occupation / Job Title (See Instructions)		Employer (See Instructions)	
Manager		Oil & Gas Company	

DATE	Full name of contributor	out-of-state PAC (ID# _____)	Amount of contribution (\$)
1/21/2018	Tasha Parker		\$100.00
	Contributor address:	City: State: Zip Code	
	2226 Oak Rise Drive, Conroe, TX, 77304		
Principal occupation / Job Title (See Instructions)		Employer (See Instructions)	
Manager		Oil & Gas Company	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

Total Pages this schedule A1: Page 2 of 4

FILER NAME

Gregory Parker

Filer ID (Ethics Commission Filers)

DATE 1/22/2018	Full name of contributor Roxie Tijerina	out-of-state PAC (ID# _____)	Amount of contribution (\$)
	Contributor address: 803 Tammy, San Antonio, TX, 78216	City: State: Zip Code	\$200.00
Principal occupation / Job Title (See Instructions) Executive Assistant		Employer (See Instructions) Kaler Energy Corp	

DATE 1/23/2018	Full name of contributor David & Betty Anderson	out-of-state PAC (ID# _____)	Amount of contribution (\$)
	Contributor address: 503 Rosewood Dr, Shenandoah, TX, 77381	City: State: Zip Code	\$50.00
Principal occupation / Job Title (See Instructions) Retired		Employer (See Instructions) Retired	

DATE 1/23/2018	Full name of contributor Penny Benbow	out-of-state PAC (ID# _____)	Amount of contribution (\$)
	Contributor address: 28219 KAILEES Court, Spring, TX, 77386	City: State: Zip Code	\$250.00
Principal occupation / Job Title (See Instructions) Nurse		Employer (See Instructions) RN	

DATE 1/24/2018	Full name of contributor Buck Carraway	out-of-state PAC (ID# _____)	Amount of contribution (\$)
	Contributor address: 27207 FM 2978, Magnolia, TX, 77354	City: State: Zip Code	\$1,680.00
Principal occupation / Job Title (See Instructions) Construction		Employer (See Instructions) Self-Employed	

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

Total Pages this schedule A1:

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FILER NAME

Gregory Parker

Filer ID (Ethics Commission Filers)

DATE 1/25/2018	Full name of contributor Abby O'Quinn	out-of-state PAC (ID# _____)	Amount of contribution (\$)
	Contributor address: 109 Hall Drive North, Montgomery, TX, 77316	City: State: Zip Code	\$25.00
Principal occupation / Job Title (See Instructions)		Employer (See Instructions)	

DATE 1/25/2018	Full name of contributor Michael Mulligan	out-of-state PAC (ID# _____)	Amount of contribution (\$)
	Contributor address: 1142 W BROMPTON DR., Pearland, TX, 77584	City: State: Zip Code	\$50.00
Principal occupation / Job Title (See Instructions) Territory Manager		Employer (See Instructions) ACOSTA Sales and Merchandising	

DATE 1/25/2018	Full name of contributor Kelli Cook	out-of-state PAC (ID# _____)	Amount of contribution (\$)
	Contributor address: 14218 FM 1097 W, Willis, TX, 77318	City: State: Zip Code	\$50.00
Principal occupation / Job Title (See Instructions) Rancher		Employer (See Instructions) Self-Employed	

DATE 1/25/2018	Full name of contributor Roxie Tijerina	out-of-state PAC (ID# _____)	Amount of contribution (\$)
	Contributor address: 803 Tammy, San Antonio, TX, 78216	City: State: Zip Code	\$300.00
Principal occupation / Job Title (See Instructions) Executive Assistant		Employer (See Instructions) Kaler Energy Corp	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

Total Pages this schedule A1:

Page 4 of 4

FILER NAME

Gregory Parker

Filer ID (Ethics Commission Filers)

DATE	Full name of contributor	out-of-state PAC (ID# _____)	Amount of contribution (\$)
1/25/2018	Robert Jones		\$1,000.00
	Contributor address:	City: State: Zip Code	
	12011 Mariposa Canyon Drive, Tomball, TX, 77377		
Principal occupation / Job Title (See Instructions)		Employer (See Instructions)	
Engineer		Real Estate	

DATE	Full name of contributor	out-of-state PAC (ID# _____)	Amount of contribution (\$)
1/25/2018	Ginger Russell		\$200.00
	Contributor address:	City: State: Zip Code	
	9902 Woodlane Blvd, Magnolia, TX, 77354		
Principal occupation / Job Title (See Instructions)		Employer (See Instructions)	
Retired		Retired	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.		Total Pages this schedule B: Page 1 of 1
FILER NAME	Gregory Parker	Filer ID (Ethics Commission Filers)
TOTAL OF UNITEMIZED PLEDGES:		\$2,000.00

DATE	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of pledge (\$)	In-Kind description (if applicable)
1/24/2018	Buck Carraway Pledgor address: City: State: Zip Code 27207 FM 2978 Magnolia TX, 77354	\$2,000.00	
(If travel outside of Texas, complete Schedule T)			
Principal occupation/ Job title (See instructions) Construction		Employer (See instructions) Self-Employed	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

Total pages Schedule E:

Page 1 of 1

FILER NAME Gregory Parker

Filer ID

TOTAL OF UNITEMIZED LOANS

\$ 15,000.00

Date of loan 1/25/2018	Name of lender Gregory Parker	out-of-state PAC (ID# _____)	Loan Amount (\$) \$15,000.00
Is lender a financial institution? No	Lendor address: City: State: Zip Code 2226 Oak Rise Drive TX 77304		Interest rate 0 %
			Maturity date

Principal occupation / Job title (See Instructions) IT Project Manager	Employer (See Instructions)
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Description of Collateral: <input type="checkbox"/> none	Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/> none
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GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor Guarantor address: City: State: Zip Code	Amount Guaranteed (\$)
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Principal Occupation (See Instructions)	Employer (See Instructions)
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Commit	Gift/Awards/Memorials Expens	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

Total Pages this schedule F: Page 1 of 3	FILER NAME Gregory Parker	Filer ID (Ethics Commission filers)
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DATE 1/10/2018	Payee name 1&1 Internet Inc		
Amount (\$) \$15.96	Payee address: 701 Lee Road, Chesterbrook, PA 19087	City:	State: Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other (Web & Email Hosting)	(a) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if tAustin, TX officeholder living expense Web & Email Hosting	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
DATE 1/11/2018	Payee name Vistaprint		
Amount (\$) \$54.99	Payee address: 95 Hayden Ave Lexington, MA 02421	City:	State: Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(a) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if tAustin, TX officeholder living expense T-Shirt Printing & Banners	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
DATE 1/13/2018	Payee name Montgomery County Tea Party Pac		
Amount (\$) \$150.00	Payee address: 9268 Hwy 242 Conroe, TX 77304	City:	State: Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(a) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if tAustin, TX officeholder living expense Table Fee	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expens	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committ	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to complete this form.		

Total Pages this schedule F: Page 2 of 3	FILER NAME Gregory Parker	Filer ID (Ethics Commission filers)
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DATE 1/21/2018	Payee name Piryx
Amount (\$) \$9.00	Payee address: City: State: Zip Code 995 Market Street, 2nd Floor San Francisco, CA 94103
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense
	(a) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if tAustin, TX officeholder living expense Fundraising Fee

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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DATE 1/21/2018	Payee name Vistaprint
Amount (\$) \$91.99	Payee address: City: State: Zip Code 95 Hayden Ave Lexington, MA 02421
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense
	(a) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if tAustin, TX officeholder living expense Push Card Printing

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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DATE 1/23/2018	Payee name Piryx
Amount (\$) \$11.25	Payee address: City: State: Zip Code 995 Market Street, 2nd Floor San Francisco, CA 94103
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense
	(a) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if tAustin, TX officeholder living expense Fundraising Fee

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Commit	Gift/Awards/Memorials Expens	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

Total Pages this schedule F: Page 3 of 3	FILER NAME . Gregory Parker	Filer ID (Ethics Commission filers)
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DATE 1/25/2018	Payee name Piryx			
Amount (\$) \$45.00	Payee address: 995 Market Street, 2nd Floor San Francisco, CA 94103	City:	State:	Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(a) Description		
	Solicitation/Fundraising Expense	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if tAustin, TX officeholder living expense Fundraising Fee		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	

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