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 (Fittics Commission Filers)	2 Total pages filed:		
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST	, Mì	OFFICEUSEONLY		
NAME	MR Billy NICKNAME LAST Beavers	SUFFIX	Date Receivery ELECTIONS RECEIVED TE		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address		CITY; STATE; ZIP CODE	RELEIVED WISTING OF THE PARTY O		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (936) 524-1277	EXTENSION	Date Harry delivered or Date Postmarked		
6 CAMPAIGN TREASURER NAME	MS / MRS / MRS Sarah NICKNAME LAST Beavers	MI J SUFFIX	Receipt # Amount S Date Processed Date Imaged		
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / St	UITE #; CITY; STATE;	ZIP CODE		
(Residence or Business)	300 Scarborough Dr C	onroe TX	77305		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (713) 240-4791	EXTENSION			
9 REPORT TYPE	January 15 30th day before e		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Affach C/OH - FR)		
10 PERIOD COVERED	Month Day Year 01 / 01 / 2015	Month THROUGH 06	Day Year / 30 / 2015		
11 ELECTION	Month Day Year Primary 03 01 2016 General	ELECTION TYPE Runoff Cither Description Special			
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known Montgomery	Ocunty Constable PCT 2		
GO TO PAGE 2					

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME	Billy T Beavers		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 SEEN 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				
	SPECIFIC	COMMITTEE ADDRESS			
_		COMMITTEE CAMPAIGN TREASURER NAME			
Additional Pages					
•		COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THIS, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMI			
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 31,219.00		
EXPENDITURE TOTALS	3. TOTAL F UNLESS	\$ 0			
	4. TOTAL	POLITICAL EXPENDITURES	\$ 19,092.34		
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST ORTING PERIOD	T DAY \$ 8,464.06		
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LY OF THE REPORTING PERIOD	THE \$ 0		
18 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. APRIL 2, 2018					
		Signature of Car	ndidate or Officeholder		
AFFIX NOTARY STAMI	P/SEALABOVE	01	:1		
Sworn to and subscr	ribed before me, b	by the said Billy T. Beavers	, this the 10^{+4}		
day of July	20151	o certify which, witness my hand and seal of office	-		
Martha M	san-	Martha Ybarra	Texas Notary		
Signature of officer a	dininistering oath	Printed name of officer administering oath	Title of officer administering eath		

SUBTOTALS-COH

FORM C/OH COVER SHEET PG 3

19	FILER NAME 20 Filer II	O (Ethics Commission Filers)
	Billy T Beavers	
	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 25,219.00
2,	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 6,000.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4.	X SCHEDULE E: LOANS	\$ 2,337.40
5.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 19,092.34
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 0
8,	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 0
9.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
10.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTION	ons \$ 0
11.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Billy T Beavers 4 Date 7 Amount of contribution (\$) 5 Full name of contributor out-of-state PAC (ID#:__ Stewart Hightower 03-09-15 250.00 6 Contributer address; City; State; Zip Code Montgomery, TX 77316 2123 McCaleb Rd 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Full name of contributor ☐ out-of-state PAC (ID#:_ Date Amount of contribution (\$) Dennis Bonner 03-23-15 150.00 Contributor address; City; State; Zip Code Conroe, TX 77304 342 Maple Ln Employer (See Instructions) Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (ID#_ Amount of contribution (\$) Marilyn Noel 03-26-15 100.00 Contributor address; City, State; Zip Code 18 Amherst Ct Conroe, TX 77304 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of contribution (\$) cut-of-state PAC (ID#:_ Linda Simmons 500.00 03-26-15 Contributor address; City; State; Zip Code Livingston, TX 77351 148 Betty Lou Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Billy T Beavers 4 Date 5 Full name of contributor 7 Amount of contribution (\$) out-of-state PAC (ID#:_ Robert Trero 03-26-15 100.00 6 Contributor address; City; State; Zip Code Willis, TX 77378 14573 Trero Ln 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor ☐ out-of-state PAC (IDF:_ Date Amount of contribution (\$) Tim Obrien 03-26-15 100.00 Contributor address; City; State; Zip Code 27899 Myers Rd Montgomery, TX 77356 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) Ronald Bolian 03-26-15 200.00 Contributor address; City; State; Zip Code 9952 East Shore Dr Willis, TX 77318 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of contribution (\$) ☐ out-of-state PAC (ID#_ Larry Albritton 50.00 03-26-15 Contributor address; City; State; Zip Code Willis, TX 77318 9560 FM 830 Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

AT IACH ADDITIONAL COPIES OF THIS SCHEDULE 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.	1 Total pages Schedule A1:
2	FILER NAME	Billy T Beavers	3 Filer ID (Ethics Commission Filers)
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)
	03-26-15	C Pat Davis Contributor address; City; State; Zip Code	100.00
		PO Box 1275 Conroe, TX 77305	
8	Principal occu	pation / Job title (See Instructions) 9 Employer (See Instructions)	tions)
	Date	Full name of contributor	Amount of contribution (\$)
	03-26-15	Richard Needham Contributor address; City; State; Zip Code	100.00
		89 N Avonlea Circle Spring, TX 77382	
	Principal occup	ation / Job title (See Instructions) Employer (See Instruct	îons)
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
	03-31-15	Buster Emmons Contributor address; City; State; Zip Code	100.00
		424 Rolling Hills W Conroe, TX 77304	
	Principal occup	ration / Job title (See Instructions) Employer (See Instructions)	ions)
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
	04-07-15	Ken Seifert Contributor address; City; State; Zip Code	100.00
		4701 Preston Ave Pasadena, TX 77505	
	Principal occup	ation / Job title (See Instructions) Employer (See Instruct	ions)
		ATTACHARDITIONAL CODIFO OF THE COMPTHE FACILITY	
		ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NE	EDED

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

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 18 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Billy T Beavers 4 Date 7 Amount of contribution (\$) 5 Full name of contributor out-of-state PAC (ID#:___ Joella Denina 04-07-15 100.00 City; State; Zip Code 6 Contributor address; 10467 Parkside Dr Willis, TX 77318 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:__ Date Amount of contribution (\$) Vincent Denina 04-07-15 100.00 Contributor address; City; State; Zip Code 15743 Paradise Point Willis, TX 77318 Employer (See Instructions) Principal occupation / Job title (See Instructions) Full name of contributor Date ut-of-state PAC (ID#:_ Amount of contribution (\$) Stan Furce 04-07-15 100.00 Contributor address; City; State; Zip Code 20031 Peel Rd Montgomery, TX 77356 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of contribution (\$) ut-of-state PAC (ID#:_ Jerry Walker 250.00 04-24-15 Contributor address; City; State; Zip Code 6620 Woodlands Parkway The Woodlands, TX 77382 Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Billy T Beavers 4 Date 5 Full name of contributor 7 Amount of contribution (\$) out-of-state PAC (ID#:_____ Jason Lebwohl 04-24-15 150.00 6 Contributor address; City; State; Zip Code 15 Firestone Place The Woodlands, TX 77382 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:___ Date Amount of contribution (\$) Shari Clifton 04-24-15 100.00 Contributor address; City; State; Zîp Code Conroe, TX 77304 104 Hiwon Dr Employer (See Instructions) Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (ID#:__ Amount of contribution (\$) Kenneth Hasara 04-24-15 100.00 Contributor address; City; State; Zip Code 14506 Hasara Ln Willis, TX 77378 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of contribution (\$) out-of-state PAC (ID#:__ Travis Mabry 100.00 05-28-15 Contributor address; City; State; Zip Code La Grange, TX 78945 1251 Laurie Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Billy T Beavers 4 Date 5 Full name of contributor 7 Amount of contribution (\$) out-of-state PAC (ID#:____ Dennis Hoard 05-28-15 100.00 6 Contributor address; City; State; Zip Code 82 Elkins Lake Huntsville, TX 77340 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Date Amount of contribution (\$) MK Bice 05-28-15 50.00 Contributor address; City; State; Zip Code 115 Hiwon Dr Conroe, TX 77304 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:__ Amount of contribution (\$) Mary Bowers 05-28-15 100.00 Contributor address; City; State; Zip Code 1809 Hart Rd Conroe, TX 77304 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of contribution (\$) out-of-state PAC (ID#:_ Susan Beavers 100.00 05-28-15 Contributor address; City; State; Zip Code 14503 Hasara Ln Willis, TX 77378 Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Billy T Beavers 4 Date 5 Full name of contributor 7 Amount of contribution (\$) out-of-state PAC (ID#:___ Dewey Allen 05-28-15 100.00 6 Contributor address; City; State; Zip Code 9925 Fostoria Rd Cleveland, TX 77328 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor ut-of-state PAC (ID#:_ Date Amount of contribution (\$) Glenda Stowe 05-28-15 250.00 Contributor address; City; State; Zip Code 21587 Eva St Montgomery, TX 77356 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor ut-of-state PAC (ID#; Date Amount of contribution (\$) Joseph Schultea 05-28-15 2500.00 Contributor address; City; State; Zip Code New Waverly, TX 77358 PO Box 310 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of contribution (\$) ut-of-state PAC (ID#;_ Stewart Hightower 06-02-15 120.00 Contributor address; City; State; Zip Code 2123 McCaleb Rd Montgomery, TX 77316 Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Billy T Beavers 4 Date 7 Amount of contribution (\$) 5 Full name of contributor ut-of-state PAC (ID#:__ Teena Byrd 06-02-15 60.00 6 Contributor address; City; State; Zip Code 30211 Thorsby Spring, TX 77386 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Date Amount of contribution (\$) Dennis Bonner 06-02-15 375.00 City; State; Zip Code Contributor address; Conroe, TX 77304 342 Maple Ln Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date ut-of-state PAC (ID#:_ Amount of contribution (\$) Kelley Smith 06-02-15 1200.00 City; State; Zip Code Contributor address; PO Box 1021 Montgomery, TX 77356 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of contribution (\$) out-of-state PAC (ID#:_ Betty McCreary 1000.00 06-02-15 Contributor address; City; State; Zip Code Montgomery, TX 77316 23949 N Lakeview Rd Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Billy T Beavers 7 Amount of contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#:____ Stewart Hightower 06-02-15 45.00 6 Contributor address; City; State; Zip Code Montgomery, TX 77316 2123 McCaleb Rd 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Full name of contributor __ out-of-state PAC (ID#:__ Date Amount of contribution (\$) Arnaud Guena 06-04-15 50.00 City; State; Zip Code Contributor address; Conroe, TX 77304 58 Orinda Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#:_ Amount of contribution (\$) Tim Seay 06-11-15 1000.00 Contributor address; City; State; Zip Code The Woodlands, TX 77380 2614 S Wildwind Cir Principal occupation / Job title (See Instructions) Employer (See Instructions)

out-of-state PAC (ID#:

Willis, TX 77378

City; State; Zip Code

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

Amount of contribution (\$)

55.00

Full name of contributor

Contributor address;

Philip Cash

PO Box 2099

Principal occupation / Job title (See Instructions)

Date

06-16-15

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 18 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Billy T Beavers 4 Date 5 Full name of contributor 7 Amount of contribution (\$) out-of-state PAC (ID#:___ Betty Ward 06-16-15 80.00 6 Contributor address; City; State; Zip Code Conroe, TX 77301 2894 Ave M 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor ut-of-state PAC (ID#:__ Date Amount of contribution (\$) Karen English 06-16-15 390.00 Contributor address; City; State; Zip Code 1114 Appleford Dr Seabrook, TX 77586 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:__ Date Amount of contribution (\$) Jason Hodges 06-16-15 95.00 Contributor address; City; State; Zip Code Willis, TX 77318 13921 Dolphin Dr Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of contribution (\$) Cout-of-state PAC (ID#: Teena Byrd 200.00 06-16-15 Contributor address; City; State; Zip Code 30211 Thorsby Spring, TX 77386 Employer (See Instructions) Principal occupation / Job title (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 18 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Billy T Beavers 4 Date 5 Full name of contributor 7 Amount of contribution (\$) out-of-state PAC (ID#:___ David Koth 06-16-15 120.00 6 Contributor address; City; State; Zip Code Willis, TX 77318 4715 Laguna Way 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:__ Date Amount of contribution (\$) Mauricia Keeley 06-16-15 130.00 City; State; Zip Code Contributor address; Willis, TX 77318 11200 Windswept Way Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#:___ Amount of contribution (\$) Bill Storey 100.00 06-16-15 Contributor address; City; State; Zip Code Conroe, TX 77304 135 Masters Employer (See Instructions) Principal occupation / Job title (See Instructions) Date Full name of contributor ut-of-state PAC (ID#:__ Amount of contribution (\$) Brandi Beavers 200.00 06-16-15 Contributor address; City; State; Zip Code Conroe, TX 77303 4741 Rolling Hills Rd Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Billy T Beavers 4 Date 7 Amount of contribution (\$) 5 Full name of contributor out-of-state PAC (ID#:___ Martha Ybarra 06-16-15 235.00 6 Contributor address; City; State; Zip Code 13622 FM 1484 Conroe, TX 77303 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:____ Date Amount of contribution (\$) Winona Cavender 06-16-15 205.00 Contributor address; City; State; Zip Code 14244 Burnt MLS Willis, TX 77318 Employer (See Instructions) Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (ID#:_ Amount of contribution (\$) Craig Wieghat 06-16-15 1910.00 Contributor address; City; State; Zip Code PO Box 1355 New Waverly, TX 77358 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of contribution (\$) out-of-state PAC (ID#:_ Tim Seay 530.00 06-16-15 Contributor address: City; State; Zip Code The Woodlands, TX 77380 2614 S Wildwood Employer (See Instructions) Principal occupation / Job title (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 18 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Billy T Beavers 4 Date 5 Full name of contributor 7 Amount of contribution (\$) out-of-state PAC (ID#:___ Dennis Diehl 06-16-15 200.00 6 Contributor address; City; State; Zip Code 2607 Spring Cypress Spring, TX 77388 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Date Amount of contribution (\$) Andy Ferguson 06-16-15 200.00 City; State; Zip Code Contributor address; 16330 Autumn Wood Dr Houston, TX 77090 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date __ out-of-state PAC (ID#:___ Amount of contribution (\$) Linda Mock 06-16-15 480.00 City; State; Zip Code Contributor address; Dobbin, TX 77333 26453 Hwy 105 W Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:_ Amount of contribution (\$) Jimmie Green 250.00 06-16-15 Contributor address; City; State; Zip Code Conroe, TX 77304 98 Hiwon Dr Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 18 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Billy T Beavers 4 Date 5 Full name of contributor 7 Amount of contribution (\$) out-of-state PAC (ID#:____ Sammy English 06-16-15 250.00 City; State; Zip Code 6 Contributor address; Magnolia, TX 77355 28819 Ashbrook Ln 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Full name of contributor Out-of-state PAC (ID#: Date Amount of contribution (\$) Mary Noble 06-16-15 35.00 Contributor address; City; State; Zip Code 304 W Mink Willis, TX 77378 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Amount of contribution (\$) Zina Bosworth 100,00 06-16-15 City; State; Zip Code Contributor address; 13390 E FM 1097 Willis, TX 77378 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of contribution (\$) ☐ out-of-state PAC (ID#: David Grindrup 130.00 06-16-15 Contributor address; City; State; Zip Code 1462 Broad Oaks Conroe, TX 77303 Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1 The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Billy T Beavers 4 Date 5 Full name of contributor 7 Amount of contribution (\$) out-of-state PAC (ID#:__ Charles Blackburn 06-16-15 80.00 6 Contributor address; City; State; Zip Code 10636 Royal Adrian Conroe, TX 77303 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor ut-of-state PAC (ID#:_ Date Amount of contribution (\$) Gerald Simmons 06-16-15 300.00 Contributor address; City; State; Zip Code 148 Betty Lou Livingston, TX 77351 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#:_ Amount of contribution (\$) Fred Deats 06-16-15 1280.00 Contributor address; City; State; Zip Code 800 N San Jacinto #204 Conroe, TX 77301 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#_ Amount of contribution (\$) Don Fullen 06-16-15 185.00 Contributor address; City; State; Zip Code 13319 Southshore Conroe, TX 77304 Principal occupation / Job title (See Instructions) Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Billy T Beavers 4 Date 7 Amount of contribution (\$) 5 Full name of contributor ut-of-state PAC (ID#:___ Tommy Gage 06-16-15 200.00 City; State; Zip Code 6 Contributor address; PO Box 3665 Conroe, TX 77305 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#: Date Amount of contribution (\$) Kathy Stricker 06-16-15 125.00 City; State; Zip Code Contributor address; 518 Paradise Ln Montgomery, TX 77356 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#:_ Amount of contribution (\$) Stewart Hightower 06-16-15 90.00 Contributor address: City; State; Zip Code Montgomery, TX 77316 2123 McCaleb Rd Employer (See Instructions) Principal occupation / Job title (See Instructions) Date Full name of contributor Amount of contribution (\$) ut-of-state PAC (ID#:_ Richard Currie 810.00 06-16-15 Contributor address; City; State; Zip Code PO Box 84 Oakhurst, TX 77359 Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Billy T Beavers 4 Date 5 Full name of contributor 7 Amount of contribution (\$) out-of-state PAC (ID#:__ Sue Beavers 06-16-15 60.00 6 Contributor address; City; State; Zip Code 14503 Hasara Ln Willis, TX 77378 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor ut-of-state PAC (ID#:_ Date Amount of contribution (\$) Joseph Schuitea 06-16-15 2675.00 Contributor address; City; State; Zip Code PO Box 310 New Waverly, TX 77358 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor ut-of-state PAC (ID#:__ Amount of contribution (\$) Kurt Klicker 06-16-15 65.00 Contributor address; City; State; Zip Code 2210 Westview Blvd #229 Conroe, TX 77304 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:_ Amount of contribution (\$) Chad Fussell 06-20-15 3135.00 Contributor address; City; State; Zip Code PO Box 1113 Willis, TX 77378 Principal occupation / Job title (See Instructions) Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 18 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Billy T Beavers 4 Date 7 Amount of contribution (\$) 5 Full name of contributor ut-of-state PAC (ID#:____ Dennis Bonner 06-22-15 50.00 City; State; Zip Code 6 Contributor address; 342 Maple Ln Conroe, TX 77304 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:___ Date Amount of contribution (\$) Sammy English 06-24-15 75.00 Contributor address; City; State; Zip Code 28819 Ashbrook Ln Magnolia, TX 77355 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:____ Date Amount of contribution (\$) City; State; Zip Code Contributor address; Employer (See Instructions) Principal occupation / Job title (See Instructions) Date Full name of contributor Amount of contribution (\$) out-of-state PAC (ID#:____ City; State; Zip Code Contributor address; Principal occupation / Job title (See Instructions) Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

Th	e Instruction Guide explains how to complete this for	n.	1 Total pages Schedule A2:
2 FILER NAME	≣ Billy T Beavers		3 Filer ID (Ethics Commission Filers)
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIB	BUTIONS	\$
5 Date 06-04-15 10 Principal occ	6 Full name of contributor ☐ out-of-state PAC (ID#		8 Amount of 9 In-kind contribution description 75.00 Custom Pistol Holster Check if travel outside of Texas, complete Schedule Ter (FOR NON-JUDICIAL) (See Instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	tor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 06-04-15	Full name of contributor		Amount of . In-kind contribution Contribution \$. description Streamlight Tactical 220.00 Flashlight
	2123 McCaleb Rd Montgomery, TX 77316		Check if travel outside of Texas, complete Schedule T
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	r (FOR NON-JUDICIAL)(See Instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	tor'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)		
If	ATTACH ADDITIONAL COPIES OF T contributor is out-of-state PAC, please see instruction		

Th	e Instruction Guide explains how to complete this form	n.	1 Total pages Schedule A2:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
	Billy T Beavers		
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date	6 Full name of contributor		8 Amount of . 9 In-kind contribution Contribution \$. description
06-04-15	Glen Barrett 7 Contributor address; City; State; Zip Coo		150.00 European Whitetail Mount
	17419 Waterview Dr Montgomery, TX 77356		Check if travel outside of Texas, complete Schedule T
10 Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	er (FOR NON-JUDICIAL)(See Instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	ntor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor)	Amount of . In-kind contribution Contribution \$. description
06-04-15	Glen Barrett Contributor address; City; State; Zip Cod	de	Framed Texas 100.00 Flag
	17419 Waterview Dr Montgomery, TX 77356		Check if travel outside of Texas, complete Schedule T
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICIAL)(See Instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	stor'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)		
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lf	contributor is out-of-state PAC, please see instruction	n guide for a	dditional reporting requirements.

Th	ne Instruction Guide explains how to complete this form	n.	1 Total pages Schedule A2: 19
2 FILER NAME	≣ Billy T Beavers		3 Filer ID (Ethics Commission Filers)
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$
5 Date	6 Full name of contributor		8 Amount of . 9 In-kind contribution Contribution \$. description
06-04-15	Glen Barrett 7 Contributor address; City; State; Zip Cod	ie	100.00 Framed Come & Take
	17419 Waterview Dr Montgomery, TX 77356		Check if travel outside of Texas, complete Schedule T
10 Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	Per (FOR NON-JUDICIAL)(See Instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor	·)	Amount of . In-kind contribution Contribution \$. description
06-05-15	Greg English Contributor address; City; State; Zip Cod	de	Solid Wood Dresser
	1114 Appleford Dr Seabrook, TX 77586		Check if travel outside of Texas, complete Schedule T
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICIAL)(See Instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	utor's job title (FOR JUDICIAL) (See Instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
lf contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
If	ATTACH ADDITIONAL COPIES OF T		

Tin	e Instruction Guide explains how to complete this form	n.	1	Total pages Schedule	A A2: 19
2 FILER NAME	E Billy T Beavers		3	Filer ID (Ethics Comr	mission Filers)
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTION	ıs \$		
5 Date	6 Full name of contributor out-of-state PAC (ID#:		8	Amount of . § Contribution \$	In-kind contribution description
06-05-15	Kelly Hightower 7 Contributor address; City; State; Zip Coc	e		50.00	Custom Wreath with Dove
	2123 McCaleb Rd Montgomery, TX 77316			Check if travel outside	of Texas, complete Schedule T
10 Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Em	ployer (F	OR NON-JUDICIAL)(See Instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Co	ntributor's	i job title (FOR JUDI	ICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Lav	firm of c	contributor's spouse	(if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor			Amount of . Contribution \$.	In-kind contribution description
06-05-15	Jim Leaveale Contributor address; City; State; Zip Cod	 ie	- •	400.00	1/2 day fishing trip on Nueces Bay
	7009 Hannah Circle Corpus Christi, TX 7841	3		Check if travel outside	of Texas, complete Schedule T
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Em		OR NON-JUDICIAL	
Contributor's	principal occupation (FOR JUDICIAL)	Cor	tributor's	i job title (FOR JUDI	CIAL) (See Instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Lav	firm of c	contributor's spouse	(if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
1 f	ATTACH ADDITIONAL COPIES OF T				quirements.

Th	e Instruction Guide explains how to complete this for	n.	1 Total pages Schedule A2:	
2 FILER NAME	E Billy T Beavers		3 Filer ID (Ethics Commission Filers)	
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$	
5 Date 06-05-15	B II B		8 Amount of . 9 In-kind contribution description 175.00 . 20z Silver Bullet & Emerald Necklace	
10 Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	er (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor)	. Amount of . In-kind contribution Contribution \$. description	
06-05-15	Stewart Hightower Contributor address; City; State; Zip Cod	 de	2 night stay @ Laughlin 300.00 - Casino with dinner for 2	
	2123 McCaleb Rd Montgomery, TX 77316		Check if travel outside of Texas, complete Schedule T	
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICIAL)(See Instructions)	
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)			

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lf	ATTACH ADDITIONAL COPIES OF T contributor is out-of-state PAC, please see instruction			

1 Total pages Schedule A2: 19 3 Filer ID (Ethics Commission Filers)
3 Filer ID (Ethics Commission Filers)
\$
8 Amount of Contribution \$ 9 In-kind contribution description 75.00 2 dozen cupcakes 2 dozen cake pops
Check if travel outside of Texas, complete Schedule T
r (FOR NON-JUDICIAL)(See Instructions)
tor's job title (FOR JUDICIAL) (See Instructions)
of contributor's spouse (if any) (FOR JUDICIAL)
Amount of . In-kind contribution Contribution \$. description
60.00 Homemade Canned Goods Basket
Check if travel outside of Texas, complete Schedule T
r (FOR NON-JUDICIAL)(See Instructions)
tor's job title (FOR JUDICIAL) (See Instructions)
of contributor's spouse (if any) (FOR JUDICIAL)
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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAM			3 Filer ID (Ethics Commission Filers)
	Billy T Beavers		
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$
5 Date 06-06-15 10 Principal occ	Nancy Page 7 Contributor address; City; State; Zip Code 8019 Rolling Oaks Dr Spring, TX 77389		8 Amount of . 9 In-kind contribution Contribution \$. description . Western lamp, soup basks . metal sign, cookie cutters Check if travel outside of Texas, complete Schedule T er (FOR NON-JUDICIAL)(See Instructions)
49 Contributors	principal occupation (FOR JUDICIAL)	42 Contribu	utor's job title (FOR JUDICIAL) (See Instructions)
12 Considurors	principal decapation (FOX DODICIAL)	13 Counting	not s jub title (FOR JODIOIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	<u> </u>	
Date 06-06-15	Full name of contributor		Amount of In-kind contribution Contribution \$ description 1 hour photo session
	56 Bent Tree Ln Montgomery, TX 77356	40	Check if travel outside of Texas, complete Schedule T
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICIAL) (See Instructions)
,		,	,,
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
1 11111 2112			
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Th	e Instruction Guide explains how to complete this forn	n.	1 Total pages Schedule A2: 14	
2 FILER NAME	≣ Billy T Beavers		3 Filer ID (Ethics Commission Filers)	
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$	
5 Date	6 Full name of contributor)	8 Amount of . 9 In-kind contribution Contribution \$. description	
06-06-15	James Tucker 7 Contributor address; City; State; Zip Cod		250.00 . 1/2 day fishing trip on . Lake Conroe	
	13988 Calvary Rd Willis, TX 77318		Check if travel outside of Texas, complete Schedu	e T
10 Principal occi	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	er (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor)	Amount of . In-kind contribution Contribution \$. description	
06-06-15	Brandi Beavers Contributor address; City; State; Zip Cod	de	80.00 Wooden American Flag	
	4741 Rolling Hills Rd Conroe, TX 77303		Check if travel outside of Texas, complete Schedul	e T
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICIAL)(See Instructions)	
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	utor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm	n of contributor's spouse (if any) (FOR JUDICIAL	,
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
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If	ATTACH ADDITIONAL COPIES OF T contributor is out-of-state PAC, please see instruction			

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A2:	
2 FILER NAME Billy T Beavers			3 Filer ID (Ethics C	Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTION		BUTIONS	\$	
5 Date	Date 6 Full name of contributor		8 Amount of Contribution \$. 9 In-kind contribution description
06-06-15	06-06-15 Stephanie Davis 7 Contributor address; City; State; Zip Code		125.00	1/2 hour photo session
	4 Cherry Hills Dr Conroe, TX 77304		Check if travel out	· side of Texas, complete Schedule T
10 Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	er (FOR NON-JUDIC	IAL)(See Instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	itor's job title (FOR J	UDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor)	Amount of Contribution \$. In-kind contribution description
06-07-15	Michael Marcus Contributor address; City; State; Zip Cod	<i>,</i> ete	150.00	Western Metal Art
	98 Hiwon Dr Conroe, TX 77304		Check if travel out	side of Texas, complete Schedule T
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employe	er (FOR NON-JUDIC	IAL)(See Instructions)
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)				
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H.	contributor is out-of-state PAC, please see instruction	i quide for a	aaitional reportina	requirements.

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A2: 19	
2 FILER NAME Billy T Beavers			3 Filer ID (Ethics Commission Filers)	
	-			
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$		
5 Date	te 6 Full name of contributor		8 Amount of Contribution \$	9 In-kind contribution description
06-06-15	06-06-15 Howard Kravetz 7 Contributor address; City; State; Zip Code		125.00	Round of golf for 4 @ Village Golf Club
	27 Greentree Ln Conroe, TX 77304		Check if travel out	side of Texas, complete Schedule T
10 Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe		IAL)(See Instructions)
io ; iiicipai oco.	apadon 7 dob dide (i Ork Norv dobina) (deed instituctions)			,(, ,,
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR J	UDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	o of contributor's spor	use (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor)	Amount of Contribution \$	In-kind contribution description
06-07-15	Dennis DePaul Contributor address; City; State; Zip Cod		285.00	lce cream maker, roaster pitcher, firetruck mailbox
	21466 Arnsworth Rd Montgomery, TX 77356		Check if travel outs	side of Texas, complete Schedule T
			FOR NON-JUDIC	IAL)(See Instructions)
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)			
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.				

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A2: 19	
2 FILER NAME			3 Filer ID (Ethics Co	ommission Filers)
	Billy T Beavers			
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		BUTIONS	\$	
5 Date	6 Full name of contributor		8 Amount of . Contribution \$.	9 In-kind contribution description
06-08-15	06-08-15 Melanie Thibodeaux 7 Contributor address: City; State; Zip Code		300.00	1 hour photo session
	PO Box 8122 Huntsville, TX 77340		Check if travel outs	ide of Texas, complete Schedule T
10 Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	er (FOR NON-JUDIC!	AL)(See Instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	ntor's job title (FOR JL	JDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	irm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor)	Amount of . Contribution \$.	In-kind contribution description
06-08-15	Craig Wieghat Contributor address; City; State; Zip Contributor		160.00	Micro start jump pack
	PO Box 1355 New Waverly, TX 77358		Check if travel outs	ide of Texas, complete Schedule T
			FOR NON-JUDICI	
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)		
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If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
				:
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.				

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A2: 19		
2 FILER NAME Billy T Beavers		3 Filer ID (Ethics Commission Filers)			
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$			
5 Date 06-08-15 10 Principal occ	6 Full name of contributor □ cut-of-state PAC (ID#:		8 Amount of 9 In-kind contribution Contribution \$ description 100.00 Texas theme basket Check if travel outside of Texas, complete Schedule Ter (FOR NON-JUDICIAL) (See Instructions)		
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	tor's job title (FOR JUDICIAL) (See Instructions)		
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date 06-08-15	06-08-15 Stewart Hightower Contributor address; City; State; Zip Code		Amount of In-kind contribution Contribution \$ description Custom Knife & Sheath 200.00 Check if travel outside of Texas, complete Schedule T		
2123 McCaleb Rd Montgomery, TX 77316 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employe	Employer (FOR NON-JUDICIAL)(See Instructions)		
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)					
If	ATTACH ADDITIONAL COPIES OF T contributor is out-of-state PAC, please see instruction				

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A2:	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
Billy T Beavers				
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$		
5 Date	6 Full name of contributor		8 Amount of . 9 In-kind contribution Contribution \$. description	
06-08-15	06-08-15 Steve Sanders 7 Contributor address; City; State; Zip Code		60.00 Texas toothpick knife Hawk Knife	
	140 Paradise Valley Conroe, TX 77304		Check if travel outside of Texas, complete Schedule T	
10 Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Emplo	oyer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contri	butor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law fi	rm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor		Amount of . In-kind contribution Contribution \$. description	
06-08-15	Kathy Stricker Contributor address; City; State; Zip Cod	 de	285.00 Spa Day Basket	
	518 Paradise Ln Montgomery, TX 77356		Check if travel outside of Texas, complete Schedule T	
		Emplo	yer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)		
Contributor's employer/law firm (FOR JUDICIAL)		Law fi	rm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
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The Instruction Guide explains how to complete this for	rm. 1 Total pages Schedule A2: 19		
2 FILER NAME Billy T Beavers	3 Filer ID (Ethics Commission Filers)		
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRI	IBUTIONS \$		
5 Date 6 Full name of contributor □ out-of-state PAC (ID#	Check if travel outside of Texas, complete Schedule T		
12 Contributor's principal occupation (FOR JUDICIAL)	13 Contributor's job title (FOR JUDICIAL) (See Instructions)		
14 Contributor's employer/law firm (FOR JUDICIAL)	15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date Full name of contributor out-of-state PAC (ID#:	Check if travel outside of Texas, complete Schedule T		
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Contributor's principal occupation (FOR JUDICIAL)	Employer (FOR NON-JUDICIAL) (See Instructions) 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)			
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The Instruction Guide explains how to complete this form.			1 Total pages Schedule A2:	
2 FILER NAME	E Billy T Beavers		3 Filer ID (Ethics Commission Filers)	
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$	
5 Date	Date 6 Full name of contributor		8 Amount of . 9 In-kind contribution Contribution \$. description	
06-08-15	06-08-15 Betty Ward 7 Contributor address; City; State; Zip Code		165.00 Crocheted Baby Blanket 2 ladies necklaces	
	2894 Ave M Conroe, TX 77301	1	Check if travel outside of Texas, complete Schedule T	
10 Principal occi	Expation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	er (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	irm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor	,	Amount of . In-kind contribution Contribution \$. description	
06-09-15	Aaron Cravens Contributor address; City; State; Zip Coo	, de	150.00 Electric Vaporizor	
	18020 Hwy 105 W Montgomery, TX 77356		Check if travel outside of Texas, complete Schedule T	
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICIAL)(See Instructions)	
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm	Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.				

Th	e Instruction Guide explains how to complete this form	1 Total pages Schedule A2:	
2 FILER NAME	E Billy T Beavers		3 Filer ID (Ethics Commission Filers)
4 TOTAL OI	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$
5 Date	6 Full name of contributor out-of-state PAC (ID#		8 Amount of 9 In-kind contribution Contribution 9 description
06-09-15	Wendie Bauer 7 Contributor address; City; State; Zip Cod	ie	100.00 . 1 day golf cart rental
	PO Box 2121 Willis, TX 77378		Check if travel outside of Texas, complete Schedule T
10 Principal occi	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	er (FOR NON-JUDICIAL)(See Instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor)	Amount of . In-kind contribution Contribution \$. description
06-09-15	Karen English Contributor address; City; State; Zip Cod	de	150.00 Mommy's day out basket
	1114 Appleford Dr Seabrook, TX 77586	!	Check if travel outside of Texas, complete Schedule T
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICIAL)(See Instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	utor's job title (FOR JUDICIAL) (See Instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
If	ATTACH ADDITIONAL COPIES OF T contributor is out-of-state PAC, please see instruction		

Th	ne Instruction Guide explains how to complete this form	n.	1 Total pages Schedule A2:
2 FILER NAME	E Billy T Beavers		3 Filer ID (Ethics Commission Filers)
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$
5 Date 06-10-15			8 Amount of Soln-kind contribution description 205.00 Harley lamp & Sign Welcome metal sign Check if travel outside of Texas, complete Schedule T
10 Principal occ	cupation / Job title (FOR NON-JUDICIAL)(See Instructions)	11 Employe	er (FOR NON-JUDICIAL)(See Instructions)
12 Centributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor		Amount of . In-kind contribution Contribution \$. description
06-11-15	Jodi Lea	, ,	200.00 Date Night basket
	6619 Knollbridge Ln Spring, TX 77379		Check if travel outside of Texas, complete Schedule T
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICIAL)(See Instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	ator's job title (FOR JUDICIAL) (See Instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
If	ATTACH ADDITIONAL COPIES OF T contributor is out-of-state PAC, please see instruction		

The Instruction Guide explains how to complete this forn	m. 1 Total pages Schedule A2:	
2 FILER NAME Billy T Beavers	3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS \$	
5 Date 6 Full name of contributor	8 Amount of 9 In-kind contribution Contribution \$ description 150.00 Taste of Montgomery County Basket Check if travel outside of Texas, complete Schedule T	
12 Contributor's principal occupation (FOR JUDICIAL)	13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)	15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date Full name of contributor ☐ out-of-state PAC (ID#	Check if travel outside of Texas, complete Schedule T	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employer (FOR NON-JUDICIAL)(See Instructions)	
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)		
ATTACH ADDITIONAL COPIES OF T	THIS SCHEDULE AS NEEDED	

Th	e Instruction Guide explains how to complete this form	1 Total pages Schedule A2: 19	
2 FILER NAME	≣ Billy T Beavers	3 Filer ID (Ethics Commission Filers)	
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	 3UTIONS	\$
5 Date	6 Full name of contributor)	8 Amount of . 9 In-kind contribution Contribution \$. description
06-16-15	Donald Winford 7 Contributor address; City; State; Zip Coo	ie	. 125.00 . 5 Cooked Briskets
	21627 FM 2854 Montgomery, TX 77316		Check if travel outside of Texas, complete Schedule T
10 Principal occi	upation / Job title (FOR NON-JUDICIAL)(See Instructions)	11 Employe	er (FOR NON-JUDICIAL)(See Instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Amount of . In-kind contribution Contribution \$. description
	Contributor address; City; State; Zip Cod	de	Check if travel outside of Texas, complete Schedule T
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICIAL)(See Instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	utor's job title (FOR JUDICIAL) (See Instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
If	ATTACH ADDITIONAL COPIES OF T contributor is out-of-state PAC, please see instruction		

LOANS SCHEDULE E 1 Total pages Schedule E: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Billy T Beavers \$ 4 TOTAL OF UNITEMIZED LOANS Name of lender 9 Loan Amount (\$) Date of loan Out-of-state PAC (ID#: 02-09-15 1000.00 Billy Beavers 10 Interest rate 6 Is lender 8 Lender address; City; State: Zip Code a financial Institution? 11 Maturity date 300 Scarborough Dr Conroe, TX 77304 13 Employer (See instructions) 12 Principal occupation / Job title (See Instructions) City of Panorama Village Police Officer 15 Check if personal funds were deposited into political 14 Description of Collateral account (See Instructions) none 16 GUARANTOR 17 Name of guarantor 19 Amount Guaranteed (\$) INFORMATION 18 Guarantor address; City; State; Zip Code not applicable 20 Principal Occupation (See Instructions) 21 Employer (See Instructions) Date of loan Loan Amount (\$) Name of lender out-of-state PAC (ID#:__ 02-24-15 Billy Beavers 1000.00 Interest rate Is lender Lender address; City; State; Zip Code a financial Institution? Maturity date 300 Scarborough Dr Conroe, TX 77304 Employer (See Instructions) Principal occupation / Job title (See Instructions) City of Panorama Village Police Officer Check if personal funds were deposited into political Description of Collateral account (See Instructions) П none Amount Guaranteed (\$) GUARANTOR Name of guarantor INFORMATION City; State; Zip Code Guarantor address; not applicable 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.

LOANS SCHEDULE E 1 Total pages Schedule E: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Billy T Beavers 4 TOTAL OF UNITEMIZED LOANS \$ Date of loan Name of lender out-of-state PAC (ID#:_ 9 Loan Amount (\$) 02-04-15 210.55 Billy Beavers 6 is lender 10 Interest rate Lender address; City; State; Zip Code a financial Institution? 11 Maturity date 300 Scarborough Dr Conroe, TX 77304 Ν 12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions) Police Officer City of Panorama Village 14 Description of Collateral 15 Check if personal funds were deposited into political account (See Instructions) none 17 Name of guarantor 16 GUARANTOR 19 Amount Guaranteed (\$) INFORMATION 18 Guarantor address; City; State; Zip Code not applicable 20 Principal Occupation (See Instructions) 21 Employer (See Instructions) Date of loan Name of lender Loan Amount (\$) out-of-state PAC (ID#: 02-11-15 Billy Beavers 74.00 Interest rate Is lender Lender address; City; State; Zip Code a financial 0 Institution? Maturity date 300 Scarborough Dr Conroe, TX 77304 Principal occupation / Job title (See Instructions) Employer (See Instructions) Police Officer City of Panorama Village Check if personal funds were deposited into political Description of Collateral account (See Instructions) none **GUARANTOR** Name of guarantor Amount Guaranteed (\$) INFORMATION City: Guarantor address; not applicable 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.

LOANS SCHEDULE E 1 Total pages Schedule E: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Billy T Beavers 4 TOTAL OF UNITEMIZED LOANS \$ Date of loan 7 Name of lender Out-of-state PAC (ID#:_ Loan Amount (\$) 02-12-15 32.85 Billy Beavers 6 Is lender 10 Interest rate Lender address; Cîty; State; Zip Code a financial Institution? 11 Maturity date 300 Scarborough Dr Conroe, TX 77304 Ν 13 Employer (See Instructions) 12 Principal occupation / Job title (See Instructions) Police Officer City of Panorama Village 14 Description of Collateral 15 Check if personal funds were deposited into political account (See Instructions) none 17 Name of guarantor 16 GUARANTOR 19 Amount Guaranteed (\$) INFORMATION 18 Guaranter address; City; Zip Code State; not applicable 21 Employer (See Instructions) 20 Principal Occupation (See Instructions) Date of loan Name of lender Loan Amount (\$) __ out-of-state PAC (ID#:__ 02-17-15 20.00 Billy Beavers Interest rate ls lender Lender address; City; State; Zip Code a financial Institution? Maturity date 300 Scarborough Dr Conroe, TX 77304 0 Principal occupation / Job title (See Instructions) Employer (See Instructions) City of Panorama Village Police Officer Check if personal funds were deposited into political Description of Collateral account (See Instructions) none GUARANTOR Name of guarantor Amount Guaranteed (\$) INFORMATION Cîty; Guarantor address; State; Zip Code not applicable 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.

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Lenal Sentices Loan Repayment/Reimbursement Office Overhead/Rental Expense Politing Expense Printing Expense

Contributions/Donations Made B Candidate/Officeholder/Politica		opense Travel Out Of District Mages/Contract Labor Other (enter a category not listed above)	
Caracas Caraca Car	The Instruction Guide explains how to o		
1 Total pages Schedule F1:	i e e e e e e e e e e e e e e e e e e e	3 Filer ID (Ethics Commission Filers)	
17	Billy T Beavers		
4 Date	5 Payee name		
02-09-15	Houston Livestock Show & Rodeo		
6 Amount (\$)	7 Payee address; City; State; Zip Code	·	
100.00	PO Box 20070 Houston, TX	77225	
8	(a) Category (See categories listed at the top of this schedule)	(b) Description	
	(,, , , , , , , , , , , , , , , , , , ,	Check if travel outside of Texas, complete Schedule T	
PURPOSE OF		Check if Austin, TX, officeholder living expense	
EXPENDITURE	Event Expense	Oreca is Austral, 17, Oracestories average expectate	
	Lven Expense		
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held	
Date	Payee name		
02-16-15	Nick Wilhoite		
Amount (\$)	Payee address; City; State; Zip Code		
50.00	700 Old Montgomery Rd Conroe, TX 77301		
	Category (See categories listed at the top of this schedule)	Description	
	Category (occompanies and an application)	Check if travel outside of Texas, complete Schedule T	
PURPOSE OF		į [
EXPENDITURE	Check if Austin, TX, officeholder living expense		
	Advertising Expense		
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held	
Date	Payee name		
00.477.45	Ourse Phys Clare		
02-17-15	Super Blue Signs		
Amount (\$)	Payee address; City; State; Zip Code		
353.98	1112 N. Frazier Conroe, TX 7	7301	
	Category (See categories listed at the top of this schedule)	Description	
		Check if travel outside of Texas, complete Schedule T	
PURPOSE OF			
EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense	
	Adversing Expense		
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held	
expenditure to benefit C/OH	1		
	ATTACH ADDITIONAL COPIES OF THIS:	SCHEDULE AS NEEDED	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Severage Expense Gitt/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/Donations Made B Candidate/Officeholder/Politica		pense Travel Out Of District lages/Contract Labor Other (enter a category not listed above)	
	The Instruction Guide explains how to c		
1 Total pages Schedule F1:	2 FUER NAME	3 Filer ID (Ethics Commission Filers)	
17	Billy T Beavers	,	
4 Date	5 Payee name		
02-19-15	Harland Clarke Check Order		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
19.92	1700 N Loop 336 Conroe, TX 7	7304	
8	(a) Category (See categories listed at the top of this schedule)	(b) Description	
PURPOSE		Check if travel outside of Texas, complete Schedule T	
OF EXPENDITURE		Check if Austin, TX, officeholder living expense	
EX-END/TOKE	Banking Expense		
9 Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name	Office sought Office held	
Date	Payee name		
02-23-15	Ducks Unlimited		
Amount (\$)	Payee address; City; State; Zip Code		
90.00	10639 Sunflower Dr Willis, TX 7731	8	
	Category (See categories listed at the top of this schedule)	Description	
PURPOSE		Check if travel outside of Texas, complete Schedule T	
OF	Check if Austin, TX, officeholder living expense		
EXPENDITURE	Event Expense		
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held	
Date	Payee name		
03-02-15	Xpress Stamp		
Amount (\$)	Payee address; City; State; Zip Code		
19.97	300 Cadman Plaza W Suite 1303 Brooklyn, NY 11201		
	Category (See categories listed at the top of this schedule)	Description	
PURPOSE		Check if travel outside of Texas, complete Schedule T	
OF EXPENDITURE	District Constant	Check if Austin, TX, officeholder living expense	
	Printing Expense		
Complete ONE V States of	Candidate / Officeholder name	Office sought Office held	
Complete <u>ONLY</u> if direct expenditure to benefit C/QF			
	ATTACH ADDITIONAL COPIES OF THIS:	SCHEDULE AS NEEDED	
	AT IACH ADDITIONAL CUPIES OF THIS	JOHEDOLE NO RECIPED	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense

Event Expense Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

Contributions/Donations Made 53 Candidate/Officeholder/Politica		opense Travel Out Of District Vages/Contract Labor Other (enter a category not listed above)	
	The Instruction Guide explains how to o	, , , ,	
	-	<u> </u>	
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)	
(7	Billy T Beavers		
4 Date	5 Payee name		
02-27-15	Melanie Thibodeaux		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
• • • • • • • • • • • • • • • • • • • •			
1000.00	PO Box 8122 Huntsville, TX	77340	
8	(a) Category (See categories listed at the top of this schedule)	(b) Description	
PURPOSE		Check if travel outside of Texas, complete Schedule T	
OF		Check if Austin, TX, officeholder living expense	
EXPENDITURE	Consulting Expense		
 !	0 21 100 111	0.5	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	
expenditure to bettern C/Cri			
Date	Payee name		
	·		
02-27-15	Montgomery County Republican Party		
4			
Amount (\$)	Payee address; City; State; Zip Code		
50.00	310 Metcalf St Conroe, TX 77	305	
	,,		
	Category (See categories listed at the top of this schedule)	Description	
		Check if travel outside of Texas, complete Schedule T	
PURPOSE OF		Check if Austin, TX, officeholder living expense	
EXPENDITURE	_	Checa & Ausum, TA, Unicariotes aving expense	
	Fee		
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held	
expenditure to benefit C/OH			
Date	Payee name		
	577 5 7 14		
03-03-15	Billy Ballard Campaign	j	
Amount (\$)	Payee address; City; State; Zip Code		
, , ,		j	
40.00	PO Box 803 Conroe, TX 7	7305	
-			
	Category (See categories listed at the top of this schedule)	Description	
PURPOSE		Check if travel outside of Texes, complete Schedule T	
OF		Check if Austin, TX, officeholder living expense	
EXPENDITURE	Contribution		
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held	
expenditure to benefit C/OH		mery Co Constable PCT 1	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/Donations Made B	у	Food/Beverage Expense Giff/Awards/Memorials E		Polling Expe Printing Expe	ense	Travel In District Travel Out Of Di	strict
Candidate/Officeholder/Politica	al Committee	Legal Services	ido oveleina		ges/Contract Labor	Other (enter a ca	tegory not listed above)
		The Instruction Gu	ide explains	s now to col	inplete this form.	10.00	
1 Total pages Schedule F1:	2 FILER NA	мв Billy T Beave	ırs			3 Filer ID (Et	hics Commission Filers)
4 Date	5 Payee nan						
03-11-15	Offi	ce Depot					
6 Amount (\$)	7 Payee add	Iress; City;	State; Zip	p Code			
67.09	131	9 W Davis	Conn	oe, TX 773	304		
8	(a) Category	(See categories listed at th	e top of this sch	hedule)	(b) Description	avel outside of Texas, co	omplete Schedule T
PURPOSE OF					rn	ustin, TX, officeholder liv	
EXPENDITURE	Advertis	sing Expense			Orland if you	asim, tog dilections in	mg dapondo
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		te / Officeholder nan	ne		Office sought		Office held
Date	Payee nan	ne .			· · · · · · · · · · · · · · · · · · ·		
03-11-15	Offic	ce Depot					
Amount (\$)	Payee add	ress; City;	State; Zip	Code			
21.63	1319	W Davis	Conro	e, TX 773	04		
	Category	See categories listed at th	e top of this scr	nedule)	Description		
PURPOSE OF						vel outside of Texas, co	·
EXPENDITURE	Adv	ertising Expense			Check if Au	stin, TX, officeholder liv	ng expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		e / Officeholder nan	ne		Office sought		Office held
Date	Рауее пап	ne					
03-26-15	Phil	lip Cash Campaigr	1				
Amount (\$)	Payee add	ress; City;	State; Zip	Code			·
24.00	PO	Box 2099	Willis	s, TX 7737	8		
	Category (See categories listed at the	e top of this sch	nedule)	Description	und mutaido of Tayon	malata Sahadula T
PURPOSE OF						vel outside of Texas, co. stin, TX, officeholder livi	·
EXPENDITURE	Contr	ibution			Onour it Au	Try Smootblabi IIV	
Complete ONLY if direct		e / Officeholder nar	ne	I	Office sought		Office held
expenditure to benefit C/OH	Philip (Cash		Montgom	ery Co Constab	le PCT 1	
	ATTA	ACH ADDITIONAL	COPIES	OF THIS SO	CHEDULE AS N	EEDED	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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 careoury not listed above)

Contributions/Donations Made B Candidate/Officeholder/Politica	Committee Legal Services Salaries/M	cpense Travel Out Of District (lages/Contract Labor Other (enter a category not listed above)
	The Instruction Guide explains how to c	-
1 Total pages Schedule F1:	2 FILER NAME Billy T Beavers	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	
03-13-15	Fed Ex Office	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
8.12	1804 W Davis Conroe, TX 7	7304
8	(a) Category (See categories listed at the top of this schedule)	(b) Description
PURPOSE		Check if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
03-16-15	US Post Office	
Amount (\$)	Payee address; City; State; Zip Code	
147.00	809 W Dallas Conroe, TX 77	305
	Category (See categories listed at the top of this schedule)	Description
PURPOSE		Check if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
04-02-15	Melanie Thibodeaux	
Amount (\$)	Payee address; City; State; Zip Code	
1000.00	PO Box 8122 Huntsville, TX	C77340
	Category (See categories listed at the top of this schedule)	Description
PURPOSE OF		Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
EXPENDITURE	Consulting Expense	
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
expenditure to benefit C/OH		
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Giff/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Politing Expense Printing Expense Salaries/Wages/Contract Labor

Contributions/Donations Made B Candidate/Officeholder/Politica		/ages/Contract Labor Other (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME Billy T Beavers	3 Filer ID (Ethics Commission Filers)
4 Date 04-02-15	5 Payee name Trey Kirby Campaign	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
24.00	PO Box 1032 Montgomery,	TX 77356
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contribution	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
expenditure to benefit C/OF	MOUTH MOUTH	gomery School Board Pos 4
Date	Payee name	
04-10-15	Montgomery County Republican Women	
Amount (\$)	Payee address; City; State; Zip Code	
30.00	PO Box 1766 Conroe, TX 77	305
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
04-15-15	Super Blue Signs	
Amount (\$)	Payee address; City; State; Zip Code	
189.98	1112 N Frazier Conroe, TX 7	7301
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
	Advertising Expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS S	SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Benking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/Donations Made B		xpense Travel Out Of District
Candidate/Officeholder/Politica	al Committee Legal Services Salaries/N The Instruction Guide explains how to	Nages/Contract Labor Other (enter a category not listed above)
		-
1 Total pages Schedule F1:	Billy T Beavers	3 Filer ID (Ethics Commission Filers)
4 Date	5 Pavee name	
04-26-15	Vernon's Kuntry Katfish	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
75.05	5901 W Davis Conroe, TX 7	77304
8	(a) Category (See categories listed at the top of this schedule)	(b) Description
PURPOSE		Check if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Food / Beverage Expense	Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
05-02-15	Keller Williams / VFW 4709 - Local Hero	es Fundraiser
Amount (\$)	Payee address; City; State; Zip Code	
60.00	9971 Wing St Conroe, TX 7	7385
	Category (See categories listed at the top of this schedule)	Description
PURPOSE OF		Check if travel outside of Texas, complete Schedule T
EXPENDITURE	Contribution	L Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
05-07-15	Melanie Thibodeaux	
Amount (\$)	Payee address; City; State; Zip Code	
1089.13	PO Box 8122 Huntsville, T.	X 77340
PURPOSE	Category (See categories listed at the top of this schedule)	Description Check if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Consulting Expense	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Consulting Expense Contributions/Donations Made 8: Candidate/Officeholder/Politics		
	The Instruction Guide explains how to c	complete this form.
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
17	Billy T Beavers	
4 Date 04-30-15	5 Payee name Capital One Bank	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
15.00	2245 N Loop 336 W Conroe, TX 7	7304
8	(a) Category (See categories listed at the top of this schedule)	(b) Description
PURPOSE		Check if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Banking Expense	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
05-28-15	US Post Office	
Amount (\$)	Payee address; City; State; Zip Code	
49.00	809 W Davis Conroe, TX 77	7305
	Category (See categories listed at the top of this schedule)	Description
PURPOSE		Check if travel outside of Texas, complete Schedule T.
OF EXPENDITURE	Advertising Expense	L Check if Austin, TX, officeholder living expense
Complete <u>QNLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	A STATE OF THE STA
06-02-15	Lynch Signs	
Amount (\$)	Payee address; City; State; Zip Code	
479.19	1801 N Loop 336 E Conroe, TX 7	77301
	Category (See categories listed at the top of this schedule)	Description
PURPOSE		Check if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/Donations Made B		cpense Travel Out Of District
Candidate/Officeholder/Politica	•	Vages/Contract Labor Other (enter a category not listed above)
	The Instruction Guide explains how to c	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
l7	Billy T Beavers	
4 Date	5 Payee name	
06-02-15	Margarita's Mexican Resturant	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
282.01	1027 N Loop 336 W Conroe, TX 7	7301
8	(a) Category (See categories listed at the top of this schedule)	(b) Description Charle if travel subside of Toyon complete School-le T
PURPOSE OF		Check if travel outside of Texas, complete Schedule T
EXPENDITURE	Food / Beverage Expense	Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
06-06-15	Joey Ashton	
Amount (\$)	Payee address; City; State; Zip Code	
500.00	410 Moonwalk Montgomery, 7	TX 77356
	Category (See categories listed at the top of this schedule)	Description
PURPOSE		Check if travel outside of Texas, complete Schedule T
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
	Event Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
06.40.45	Lawala	
06-10-15	Lowe's	
Amount (\$)	Payee address; City; State; Zip Code	
24.50	1920 Westview Blvd Conroe, TX 7	7304
	Category (See categories listed at the top of this schedule)	Description
PURPOSE		Check if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Event Expense	Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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
Others of performance on listed above.

Consulting Expense Contributions/Donations Made B		Printing Expense Travel In District Printing Expense Travel Out Of District	
Candidate/Officeholder/Politica		Salaries/Wages/Contract Labor 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 (Ethics Commission Filers)	
้เา	Billy T Beavers		
4 Date	5 Payee name		
06-10-15	Spec's		
6 Amount (\$)	7 Payee address; City; State; Zip	Code	
(¢)			
216.09	1420 N Loop 336 W Conro	e, TX 77301	
8	(a) Category (See categories listed at the top of this sche	dule) (b) Description	
PURPOSE		Check if travel outside of Texas, complete Schedule T	
OF		Check if Austin, TX, officeholder living expense	
EXPENDITURE	Event Expense		
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name I	Office sought Office held	
Date	Payee name		
06-11-15	Joey Ashton		
Amount (\$)	Payee address; City; State; Zip	Code	
1863.31	410 Moonwalk Montgo	mery, TX 77356	
	· ·	•	
,	Category (See categories listed at the top of this sche	dule) Description	
PURPOSE		Check if travel outside of Texas, complete Schedule T	
OF		Check if Austin, TX, officeholder living expense	
EXPENDITURE	Event Expense		
	EVOIL EXPONSO		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	
Date	Payee name		
06-12-15	Sam's Club		
00-12-10	Gain's Glub		
Amount (\$)	Payee address; City; State; Zip (Code	
38.66	2000 Westview Blvd Conro	e, TX 77304	
	Category (See categories listed at the top of this sche		
PURPOSE		Check if travel outside of Texas, complete Schedule T	
OF EXPENDITURE		Check if Austin, TX, officeholder living expense	
	Event Expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	
	ATTACIO ADDITIONAL GODING	THE COURDING ACAIETDED	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Contributions/Donations Made By Candidate/Officeholder/Politice		lages/Contract Labor Other (enter a category not listed above)
1 Total pages Schedule F1;	2 FILER NAME Billy T Beavers	3 Filer ID (Ethics Commission Filers)
4 Date 06-14-15	5 Payee name Fed Ex Office	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
35.18	1304 W Davis Conroe, TX 7	7304
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
06-15-15	Montgomery County	
Amount (\$)	Payee address; City; State; Zip Code	
250.00	600 Gerald St Willis, TX 7737	78
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
06-03-15	Gun Emporium	
Amount (\$)	Payee address; City; State; Zip Code	
2936.82	11400 FM 2854 Conroe, TX 7	7304
PURPOSE OF	Category (See categories listed at the top of this schedule)	Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
EXPENDITURE	Event Expense	Land Greek is Ausers, 17, Officendices living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Giff/Amards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Contributions/Donations Made 8 Candidate/Officeholder/Politica		Vages/Contract Labor Other (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME Billy T Beavers	3 Filer ID (Ethics Commission Filers)
4 Date 06-12-15	5 Payee name CC Plus	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
345.32	4205 W Davis Conroe, TX 7	7304
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
06-16-15	Speedy Stop	
Amount (\$)	Payee address; City; State; Zip Code	
6.45	2998 IH 45 N Conroe, TX 77	7303
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
06-16-15	Office Depot	
Amount (\$)	Payee address; City; State; Zip Code	
61.46	1319 W Davis Conroe, TX 7	77304
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Event Expense Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Lenal 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
Others (select extension and listed above)

Consulting Expense Contributions/Donations Made B	y Gift/Awards/Memorials Expense Printing	Expense Travel In District g Expense Travel Out Of District
Candidate/Officeholder/Politica	-	s/Wages/Contract Labor Other (enter a category not listed above)
	The Instruction Guide explains how t	o complete this form.
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
17	Billy T Beavers	
4 Date	5 Payee name	
06-16-15	Sam's Club	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
112.18	2000 Westview Conroe, T>	(77301
8	(a) Category (See categories listed at the top of this schedule)	(b) Description
PURPOSE		Check if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Frank Francis	Check if Austin, TX, officeholder living expense
	Event Expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
06-16-15	Walker's Feed	
Amount (\$)	Payee address; City; State; Zip Code	
175.00	13305 Hwy 75 N Willis, TX 77	7378
	Category (See categories listed at the top of this schedule)	Description
PURPOSE		Check if travel outside of Texas, complete Schedule T
OF		Check if Austin, TX, officeholder living expense
EXPENDITURE	Event Expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
06-16-15	Stripes #1041	
Amount (\$)	Payee address; City; State; Zip Code	
7.12	101 S Danville Willis, TX	77378
100 8 100 100	Category (See categories listed at the top of this schedule)	Description
PURPOSE OF		Check if travel outside of Texas, complete Schedule T
EXPENDITURE	Event Expense	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Politing Expense Printing Expense

Contributions/Donations Made By Gift/Awards/Mernorials Expense Printing Expense Travel Out Of District Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor Other (enter a category not listed above) The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	2 FILER NAME Billy T Beavers	3 Filer ID (Ethics Commission Filers)	
4 Date	5 Payee name		
06-16-15	Lynch Signs		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
109.97	1801 N Loop 336 E Conroe, TX 7	7301	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	
Date ·	Payee name		
06-19-15	Texas Top Cop Shop		
Amount (\$)	Payee address; Cîty; State; Zip Code		
1175.60	1175.60 1109 W Dallas Conroe, TX 77301		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	
Date	Payee name		
05-31-15	Capital One Bank		
Amount (\$)	Payee address; City; State; Zip Code		
15.00	2245 N Loop 336 W Conroe, TX 7	7304	
PURPOSE	Category (See categories listed at the top of this schedule)	Description Check if travel outside of Texas, complete Schedule T	
OF EXPENDITURE	Banking Expense	Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/Donations Made B	ly Gift/Awards/Memorials Expense Print	ng Expense Travel In District ing Expense Travel Out Of District
Candidate/Officeholder/Politica	<u>-</u>	ries/Wages/Contract Labor Other (enter a category not listed above)
	The Instruction Guide explains how	-
1 Total pages Schedule F1:	2 FILER NAME Billy T Beavers	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	
06-16-15	Square	
6 Amount (\$)	7 Payee address; City; State; Zip Coo	de
3.48	1455 Market St San France	cisco, CA 94103
8	(a) Category (See categories listed at the top of this schedule	
PURPOSE		Check if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Banking Expense	LI Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
06-17-15	Square	
Amount (\$)	Payee address; City; State; Zip Cod	de
226.37	1455 Market St San Franc	isco, CA 94103
	Category (See categories listed at the top of this schedule)	Description Check if travel outside of Texas, complete Schedule T
PURPOSE OF		Check if Austin, TX, officeholder living expense
EXPENDITURE	Banking Expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
06-19-15	Billy Beavers	
Amount (\$)	Payee address; City; State; Zip Cod	le
2337.40	300 Scarborough Dr Conroe,	TX 77304
	Category (See categories listed at the top of this schedule)	Description Check if travel outside of Texas, complete Schedule T
PURPOSE OF		Check if Austin, TX, officeholder living expense
EXPENDITURE	Loan Repayment	Charles and any of the state of the sta
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salariest/Vages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

Contributions/Donations Made By Candidate/Officeholder/Politica		
Carratata Critica Control	The Instruction Guide explains how to	, , , , , , , , , , , , , , , , , , , ,
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
١٦	Billy T Beavers	
4 Date	5 Payee name	· · · · · · · · · · · · · · · · · · ·
06-24-15	Eventbrite	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
12.74	155 5th St San Francisc	o, CA 94103
8	(a) Category (See categories listed at the top of this schedule)	(b) Description
PURPOSE		Check if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Banking Expense	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
06-02-15	Conroe Golf Cars	
Amount (\$)	Payee address; City; State; Zip Code	
2706.25	1409 IH45 S Conroe, TX 77	7301
	Category (See categories listed at the top of this schedule)	Description
PURPOSE		Check if travel outside of Texas, complete Schedule T
OF EXPENDITURE	Event Expense	LI Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
06-30-15	Capital One Bank	
Amount (\$)	Payee address; City; State; Zip Code	
15.00	2245 N Loop 336 W Conroe, TX 7	77304
	Category (See categories listed at the top of this schedule)	Description
PURPOSE		Check if travel cutside of Texas, complete Schedule T
OF EXPENDITURE	Banking Expense	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polting Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (orters extenses and listed chose)

Contributions/Donations Made 8 Candidate/Officeholder/Politica		lages/Contract Labor Other (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME Billy T Beavers	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	
06-16-15	Lone Star Signs	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
190.52	21923 TX 105 W Montgomery,	TX 77356
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas, complete Schedule T
OF		Check if Austin, TX, officeholder living expense
EXPENDITURE	Advertising Expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
06-16-15	Melanie Thibodeaux	
Amount (\$)	Payee address; City; State; Zip Code	
442.85	PO Box 8122 Huntsville, TX	77340
	Category (See categories listed at the top of this schedule)	Description
PURPOSE OF		Check if travel outside of Texas, complete Schedule T
EXPENDITURE	Event Expense	Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	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		Check if travel outside of Texas, complete Schedule T
OF EXPENDITURE		L Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		