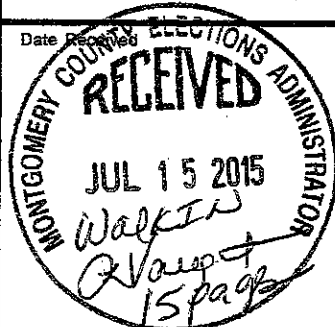


CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 15				
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY 			
	NICKNAME	LAST	SUFFIX				
Mr. Russell		B.					
Rusty Fincher Jr.							
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE		
	P.O. Box 245		Willis, TX	77378			
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(936)	828-1373					
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI				
	NICKNAME	LAST	SUFFIX				
Mr. David		C.					
Kleimann							
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE;	ZIP CODE	
	1246 Cude Cemetary Rd.,		Willis, Texas	77378			
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(936)	537-5619					
9 REPORT TYPE	<input type="checkbox"/> January 15		<input type="checkbox"/> 30th day before election		<input type="checkbox"/> Runoff		
	<input checked="" type="checkbox"/> July 15		<input type="checkbox"/> 8th day before election		<input type="checkbox"/> Exceeded \$500 limit		
				<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)			
				<input type="checkbox"/> Final Report (Attach C/OH - FR)			
10 PERIOD COVERED	Month	Day	Year	THROUGH	Month	Day	Year
	1	1	2014		7	15	2015
11 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month	Day	Year	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description	
3 / 2016		<input type="checkbox"/> General		<input type="checkbox"/> Special			
12 OFFICE	OFFICE HELD (if any)			13 OFFICE SOUGHT (if known)			
				Montgomery County Constable Precinct 1			

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Russell B. Fincher Jr. 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 BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

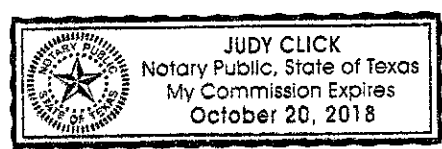
COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	
<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 19,600.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 17,786.72
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 1811.28
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

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.



AFFIX NOTARY STAMP / SEAL ABOVE

Russell B. Fincher Jr.
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Russell B. Fincher, JR., this the 15 day of July, 2015, to certify which, witness my hand and seal of office.

Judy Click Signature of officer administering oath
Judy Click Printed name of officer administering oath
NOTARY Title of officer administering oath

SUBTOTALS - COH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME <i>Russell B. Fincher, Jr.</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>19,600.00</i>
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ <i>17,188.72</i>
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
9.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
10.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **4**

2 FILER NAME

Russell B. Fincher, Jr.

3 Filer ID (Ethics Commission Filers)

4 Date

2/9/2015

5 Full name of contributor

Donnie O. Chumley

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

10,000.00

6 Contributor address;

18321 Rogers Rd. New Waverly, Tx 77358

City; State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3/20/2015

Full name of contributor

Deborah D. Moore

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

2,000.00

Contributor address;

P.O. Box 628
Richards, Texas 77873

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/20/2015

Full name of contributor

Michael G. Manners FCCA

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

1,000.00

Contributor address;

17510 Red Oak Dr. Ste 100
Houston, Texas 77090

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/16/2015

Full name of contributor

AAAA Discount Bail Bonds

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

1,000.00

Contributor address;

505 Frazier
Conroe, Tx 77301

City; State; Zip Code

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

The instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Russell B. Fincher Jr.

3 Filer ID (Ethics Commission Filers)

4 Date

4/2/2015

5 Full name of contributor

out-of-state PAC (ID#: _____)

Joseph A. Michaels, Gayle O. Michaels

7 Amount of contribution (\$)

100.00

6 Contributor address:

City: State: Zip Code

27117 Paula Lane
Oak Ridge North, TX 77385

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

5/15/2015

Full name of contributor

out-of-state PAC (ID#: _____)

Jerry Stovall

Amount of contribution (\$)

1000.00

Contributor address:

City: State: Zip Code

2245 Willow Drive
Conroe, TX 77304

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/3/2015

Full name of contributor

out-of-state PAC (ID#: _____)

30-2 Real Estate Investment, LTD
Sunset Shores on Lake Conroe RV Park

Amount of contribution (\$)

500.00

Contributor address:

City: State: Zip Code

P.O. Box 525
Willis, TX 77378

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/3/2015

Full name of contributor

out-of-state PAC (ID#: _____)

J.D. Wrentz, C.G. Wrentz

Amount of contribution (\$)

2000.00

Contributor address:

City: State: Zip Code

6240 Woodland Lakes Drive
Willis, Texas 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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

4 Date

5 Full name of contributor out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

6/3/2015

William C. Schmidt, Gloria J. Schmidt
 6 Contributor address; City; State; Zip Code
 13331 Bluff View
 Willis, TX 77318

500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

6/30/2015

Jack W. Bass
 Contributor address; City; State; Zip Code
 6606 Royal Cape Ct.
 Houston, TX 77095

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

6/30/2015

Gary W. Yount, Velma Ann Yount
 Contributor address; City; State; Zip Code
 P.O. Box 995
 Willis, TX 77378

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

6/30/2015

Jo Ann Yancy
 Contributor address; City; State; Zip Code
 P.O. Box 3159
 Conroe, TX 77318

500.00

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

The instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Russell B. Fincher, Jr.

3 Filer ID (Ethics Commission Filers)

4 Date

6/30/2015

5 Full name of contributor

Don Van Orden

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

500.00

6 Contributor address;

8 Benthaven Isle
Montgomery, TX

City; State; Zip Code

71356

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

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.

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 8		2 FILER NAME Russell B. Fincher, Jr.		3 Filer ID (Ethics Commission Filers)	
4 Date 2/18/2015		5 Payee name Montgomery County Fair Association			
6 Amount (\$) 775.00		7 Payee address; City, State; Zip Code 9201 Airport Road Conroe, Tx 77303			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Contribution made by Candidate / Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense membership fee belt buckle sponsor	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 2/2/2015		Payee name Girl Scouts of San Jacinto Council Troup 10993			
Amount (\$) 50.00		Payee address; City, State; Zip Code 8832 North Frazier Street Conroe, Tx 77303			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Donation made by Candidate		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/3/2015		Payee name Bentwater Country Club			
Amount (\$) 64.00		Payee address; City, State; Zip Code 800 Bentwater Dr. Montgomery, Tx 77356			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food Expense		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense North Shore Republican Woman P.O. Box 524 Willis, Tx 77378 Lunch	
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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials 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 **Russell B. Fincher, Jr.** 3 Filer ID (Ethics Commission Filers)

4 Date **3/5/2015** 5 Payee name **Walden Yacht Club**

6 Amount (\$) **32.00** 7 Payee address; City; State; Zip Code
**131 Melville Dr.
Montgomery, Tx 77356**

8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) **Food Expense** (b) Description
 Check if travel outside of Texas, complete Schedule T
 Check if Austin, TX, officeholder living expense
**Lake Conroe Area Republican Women
P.O. Box 137 Montgomery, Tx 77354 Lunch**

9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date **3/4/2015** Payee name **North Shore Republican Women**

Amount (\$) **100.00** Payee address; City; State; Zip Code
**P.O. Box 524
Willis, Tx 77378**

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
Ad/Campaign

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date **3/18/2015** Payee name **Toopel Photography**

Amount (\$) **81.19** Payee address; City; State; Zip Code
**10 Baron's Pl
Conroe, Tx 77304**

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
Photos

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	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	3 Filer ID (Ethics Commission Filers)
----------------------------	--------------	---------------------------------------

4 Date 4/1/2015	5 Payee name Bentwater Country Club
--------------------	--

6 Amount (\$) 48.00	7 Payee address; City, State; Zip Code / 800 Bentwater Dr. Montgomery, TX 77356
------------------------	---

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense North Shore Republican Women Luncheon P.O. Box 524, Willis, TX 77375
------------------------------------	--	---

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date 4/2/2015	Payee name AT & T
------------------	----------------------

Amount (\$) 116.00	Payee address; City, State; Zip Code 2948 I-45 North Ste 800 Conroe, TX 77303
-----------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) other	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cell phone expense
-------------------------------	---	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date 4/16/2015	Payee name Conroe Noon Lions Club
-------------------	--------------------------------------

Amount (\$) 138.00	Payee address; City, State; Zip Code P.O. Box 1135 Conroe, TX 77305
-----------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fee	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly dues
-------------------------------	---	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	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 Kusbell B. Kincher, Jr.	3 Filer ID (Ethics Commission Filers)
4 Date 5/6/2015	5 Payee name Walden Yacht Club	
6 Amount (\$) 32.00	7 Payee address; City; State; Zip Code 15101 Melville Dr. Montgomery, TX 77356	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lake Conroe Republican Women Luncheon P.O. Box 737 Montgomery TX 77356
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held
Date 5/7/2015	Payee name Rand for Sheriff Campaign	
Amount (\$) 100.00	Payee address; City; State; Zip Code P.O. Box 1678 Conroe, TX 77305	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution made by Candidate	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held
Date 4/10/2015	Payee name Lake Conroe Republican Women LCARW PAC	
Amount (\$) 100.00	Payee address; City; State; Zip Code P.O. Box 737 Montgomery, TX 77357	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ad/Campaign
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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 3(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Russell B. Fincher, Jr		3 Filer ID (Ethics Commission Filers)	
4 Date 4/17/2015		5 Payee name Donna Wick Public Relations			
6 Amount (\$) 10,000.00		7 Payee address: City: State: Zip Code 2211 Rayford Road #111-44 Spring, TX 77386			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Public Relations	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 4/25/2015		Payee name Animal Shelter Volunteers of Texas			
Amount (\$) 100.00		Payee address: City: State: Zip Code P.O. Box 476 Montgomery, TX 77356			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Donation made by Candidate		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 5/15/2015		Payee name Donna Wick Public Relations			
Amount (\$) 2000.00		Payee address: City: State: Zip Code 2211 Rayford Road #111-44 Spring, TX 77386			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Consulting Expense		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Public Relations	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials 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 Russell B. Fincher, Jr	3 Filer ID (Ethics Commission Filers)
4 Date 5/24/2015	5 Payee name Ryan Gable	
6 Amount (\$) 100.00	7 Payee address; City; State; Zip Code P.O. Box 130966 The Woodlands, TX 77393	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contribution made by Candidate	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 5/28/2015	Payee name Donna Wick Public Relations	
Amount (\$) 1,000.00	Payee address; City; State; Zip Code 2211 Rayford Road #111-44 Spring, TX 77386	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Public Relations
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 6/4/2015	Payee name Donna Wick Public Relations	
Amount (\$) 2000.00	Payee address; City; State; Zip Code 2211 Rayford Road #111-44 Spring, TX 77386	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Public Relations
	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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Russell B. Fincher, Jr	3 Filer ID (Ethics Commission Filers)
4 Date 5/15/2015	5 Payee name Sam's Club	
6 Amount (\$) 342.97	7 Payee address; City; State; Zip Code 2000 Westviews Blvd Conroe, TX 77304	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printer
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 5/21/2015	Payee name AT & T	
Amount (\$) 174.20	Payee address; City; State; Zip Code 2948 I-45 North Ste 800 Conroe, TX 77303	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) other	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense cell phone/campaign
	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 6/15/2015	Payee name AT & T	
Amount (\$) 130.26	Payee address; City; State; Zip Code 2948 I-45 North Ste 800 Conroe, TX 77303	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) other	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense cell phone/campaign
	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Russell B. Fincher	3 Filer ID (Ethics Commission Filers)	
4 Date 6-14-2015	5 Payee name Jim Naplitano		
6 Amount (\$) 100.00	7 Payee address; City; State; Zip Code P.O. Box 2012 Montgomery, Tx 77356		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contribution made by Candidate	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign	
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Date 6/23/2015	Payee name Conroe Noon Lions Club		
Amount (\$) 205.00	Payee address; City; State; Zip Code P.O. Box 1136 Conroe, Tx 77305		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly dues	
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED