

		Filer ID (Ethics Commission Filers) 00080281	Total pages filed: 8	
CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Thomas E.	MI	
	NICKNAME Tom	LAST Brewer	SUFFIX III	
CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 80 Stones Edge Dr. Montgomery, TX 77356		ZIP CODE	
	Date Hand-delivered or Date Postmarked		ELECTRONICALLY FILED 01/15/2016	
	Receipt #	Amount		
	Date Processed			
Date Imaged				
CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Thomas E.	MI	
	NICKNAME	LAST Brewer	SUFFIX III	
CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 111 Carlie Way Stafford, TX 77477		APT / SUITE #; CITY; STATE; ZIP CODE	
	CAMPAIGN TREASURER PHONE	AREA CODE (832)	PHONE NUMBER 722-2052	EXTENSION
REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
PERIOD COVERED	Month 11	Day 28	Year 2015	THROUGH Month 12 Day 31 Year 2015
ELECTION	ELECTION DATE Month Day Year 01/03/2016		ELECTION TYPE	
			<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	
OFFICE	OFFICE HELD (if any) None		OFFICE SOUGHT (if known) District Judge Place Montgomery District 435th	

C / OH NAME Brewer III, Thomas E. (Mr.)	Filer ID (Ethics Commission Filers) 00080281
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NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.									
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; border: none;"> COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC </td> <td style="border: none;"> COMMITTEE NAME </td> </tr> <tr> <td style="border: none;"></td> <td style="border: none;"> COMMITTEE ADDRESS </td> </tr> <tr> <td style="border: none;"></td> <td style="border: none;"> COMMITTEE CAMPAIGN TREASURER NAME </td> </tr> <tr> <td style="border: none;"></td> <td style="border: none;"> COMMITTEE CAMPAIGN TREASURER ADDRESS </td> </tr> </table>	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME		COMMITTEE ADDRESS		COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS		
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME								
		COMMITTEE ADDRESS								
		COMMITTEE CAMPAIGN TREASURER NAME								
	COMMITTEE CAMPAIGN TREASURER ADDRESS									

CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	0.00
	(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	5,100.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	0.00
		1,500.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	3,600.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	0.00

AFFADAVIT

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.

Mr. Thomas E. Brewer III

 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

FILER NAME Brewer III, Thomas E. (Mr.)		Filer ID (Ethics Commission Filers) 00080281
SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	5,100.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	0.00
4.	<input checked="" type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	0.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	1,500.00
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	0.00
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	0.00
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	0.00
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	0.22

		Total pages Schedule A(J)1: Sch: 1/1 Rpt: 4/8
FILER NAME Brewer III, Thomas E. (Mr.)		Filer ID (Ethics Commission Filers) 00080281
Date 11/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer III, Thomas (Mr.) <hr style="border-top: 1px dotted black;"/> Contributor address; City; State; Zip Code Montgomery, TX 77356	Amount of Contribution (\$) \$5,100.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Supervising attorney
Contributor's employer/law firm State Counsel for Offenders		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

		Total pages Schedule A2: Sch: 1/1 Rpt: 5/8	
FILER NAME Brewer III, Thomas E. (Mr.)		Filer ID 00080281	
TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		0.00	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ----- Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description
<input type="checkbox"/> 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)			

		Total pages Schedule B(J): Sch: 1/1 Rpt: 6/8	
FILER NAME Brewer III, Thomas E. (Mr.)		Filer ID (Ethics Commission Filers) 00080281	
TOTAL OF UNITEMIZED PLEDGES			0.00
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of pledge (\$)	In-kind description (If applicable)
 Pledgor Address; City; State; Zip Code		
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Pledgor's principal occupation		Pledgor's job title	
Pledgor's employer/law firm		Law firm of pledgor's spouse (if any)	
If pledgor is a child, law firm of parent(s) (if any)			

Advertising Expense
 Accounting/Banking
 Consulting Expense
 Contributions/ Donations Made By -
 Candidate/Officeholder/Political Committee
 Credit Card Payment

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)

Total pages Schedule F1: Sch: 1/1 Rpt: 7/8		FILER NAME Brewer III, Thomas E. (Mr.)		Filer ID (Ethics Commission Filers) 00080281	
Date 11/28/2015		Payee name Montgomery County Republican Party			
Amount (\$) \$1,500.00		Payee address; City; State; Zip Code 310 Metcalf St. Conroe, TX 77301			
		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 Payment to Montgomery County Republican Party for a place on the ballot.	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	

			Total pages Schedule K: Sch: 1/1 Rpt: 8/8
FILER NAME Brewer III, Thomas E. (Mr.)		Filer ID (Ethics Commission Filers) 00080281	
Date 12/31/2015	Name of person from whom amount is received Woodforest National Bank	Amount (\$) \$0.22	
	Address of person from whom amount is received; City; State; Zip Code Conroe, TX 77304		
	Purpose for which amount is received Interest on account	<input type="checkbox"/> Check if political contribution returned to filer	