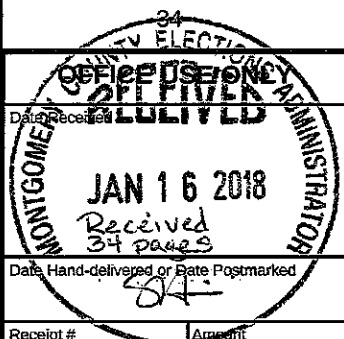


**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**FORM C/OH
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed:				
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI				
	James Craig						
	NICKNAME	LAST	SUFFIX	Date Received			
	Doyal			JAN 16 2018 Received 34 pages			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE	Date Hand-delivered or Date Postmarked			
	PO Box 718 Conroe, TX 77305			Receipt # Amount			
				Date Processed			
				Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI				
	Amy		LOVE				
	NICKNAME	LAST	SUFFIX				
	DOYAL						
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;			
	269 BLUE HERON DRIVE			STATE; ZIP CODE			
	MONTGOMERY, TX 77316						
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	713	- 705-2099					
8 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)			
9 PERIOD COVERED	Month	Day	Year	Month	Day	Year	
		07	01	2017	THROUGH	12	31
10 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month	Day	Year	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other	
	03	06	2018	<input type="checkbox"/> General	<input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT (if known)			
	County Judge Montgomery						

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

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

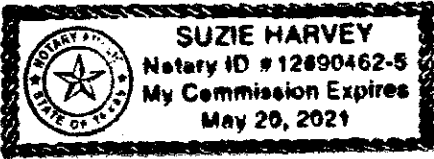
2 of 34

13 C / OH NAME Doyal, James Craig	14 Filer ID
--	--------------------

15 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.	
<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

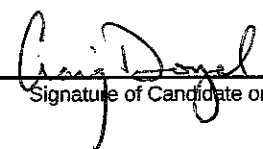
16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 561.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 70,519.54
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 180,416.02
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 29,363.27
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFIDAVIT



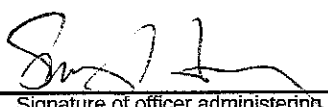
AFFIX NOTARY STAMP / SEAL ABOVE

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.



 Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Craig Doyal, this the 16th day of January, 2019, to certify which, witness my hand and seal of office.



 Signature of officer administering

Suzie Harvey

 Printed name of officer administering

Elections Administrator

 Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Doyal, James Craig		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 69,291.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1,228.54
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 180,089.18
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 326.84
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
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 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: Sch: 1/12 Rpt: 4/34
2 FILER NAME Doyal, James Craig		3 Filer ID
4 Date 11/20/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen Boone Humphries Robinson LLP	7 Amount of Contribution (\$) \$1,500.00
	6 Contributor address; City; State; Zip Code 3200 Southwest Freeway Ste 2600 Houston, TX 77027	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/20/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barazi, Abdul	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code 7500 San Felipe Street Suite 400 Houston, TX 77063	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Connard	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code 94 Lake Estates Montgomery, TX 77356	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnhart, Peter	Amount of Contribution (\$) \$1,250.00
	Contributor address; City; State; Zip Code 14002 Blanco Falls Lane Cypress, TX 77429	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/05/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bass, Dean	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 5845 Honea Egypt Road Montgomery, TX 77316	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/12 Rpt: 5/34
2 FILER NAME Doyal, James Craig		3 Filer ID
4 Date 10/30/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beyer, Charles	7 Amount of Contribution (\$) \$1,500.00
6 Contributor address; City; State; Zip Code 6403 Westcott St Houston, TX 77007		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/05/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blair, Maris	Amount of Contribution (\$) \$65.00
Contributor address; City; State; Zip Code 10 Waterway Court The Woodlands, TX 77380		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/05/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Freddie	Amount of Contribution (\$) \$550.00
Contributor address; City; State; Zip Code 284 Jeffcote Road Conroe , TX 77303		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caldwell, Fred	Amount of Contribution (\$) \$1,250.00
Contributor address; City; State; Zip Code 15330 Hilltop View Drive Cypress, TX 77429		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cannon, Jeff	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code 4315 Whickham Drive Fulshear, TX 77441		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/12 Rpt: 6/34
2 FILER NAME Doyal, James Craig		3 Filer ID
4 Date 07/05/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cates, Mary	7 Amount of Contribution (\$) \$180.00
6 Contributor address; City; State; Zip Code P.O. Box 6 Conroe, TX 77305		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/06/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CenterPoint Energy Inc PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code PO Box 4567 Houston, TX 77210		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Randy	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code P.O. Box 924456 Houston, TX 77292		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Committee to Support R. Jack Cagle	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code P.O. Box 325 Houston, TX 77001		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dalton, Keith	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code 1011 Kingsgate Circle Houston, TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/12 Rpt: 7/34
2 FILER NAME Doyal, James Craig		3 Filer ID
4 Date 11/20/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dannenbaum, James	7 Amount of Contribution (\$) \$1,500.00
6 Contributor address; City; State; Zip Code 3908 Del Monte Drive Houston, TX 77019		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/06/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drake, Jack	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code 1 Blalock Woods Street Houston, TX 77024		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eissler, Robert	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code 29 Coralvine Court The Woodlands, TX 77380		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/05/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Eddie	Amount of Contribution (\$) \$950.00
Contributor address; City; State; Zip Code 15333 Jody Lane Conroe, TX 77303		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/05/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Paul	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code P.O. Box 1230 Pinehurst, TX 77362		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/12 Rpt: 8/34
2 FILER NAME Doyal, James Craig		3 Filer ID
4 Date 07/05/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Paul <hr/> 6 Contributor address; City; State; Zip Code P.O. Box 1230 Pinehurst, TX 77362	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Half Associates State PAC <hr/> Contributor address; City; State; Zip Code 1201 N Bowser Rd Richardson, TX 75081	Amount of Contribution (\$) \$1,300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/05/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, David <hr/> Contributor address; City; State; Zip Code 1710 Seamist Drive Houston, TX 77008	Amount of Contribution (\$) \$1,700.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Home-PAC <hr/> Contributor address; City; State; Zip Code 9511 W Sam Houston Pkwy N Houston, TX 77064	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hudnall, Joel <hr/> Contributor address; City; State; Zip Code 201 Ivy Brook Ct Madison, MS 39110	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/12 Rpt: 9/34
2 FILER NAME Doyal, James Craig		3 Filer ID
4 Date 07/05/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaggers, Patrick	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code 17 Marietta Court Montgomery, TX 77356		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/20/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones & Carter Inc PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 6335 Gulton St Ste 100 Houston, TX 77081		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joslin, Curtis	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code 19598 Riverwalk Drive Porter, TX 77365		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kneisley, Kevin	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 112 Kirkwood Lane Conroe, TX 77304		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/20/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kolluru, Hemachandra Prasad	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code 94 Heathrow Ln Sugar Land, TX 77479		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/12 Rpt: 10/34
2 FILER NAME Doyal, James Craig		3 Filer ID
4 Date 11/20/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamb, Ronald	7 Amount of Contribution (\$) \$1,500.00
6 Contributor address; City; State; Zip Code 13695 Kidd Road Conroe, TX 77302		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Littleton, Sam	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 19240 E River Rd Conroe, TX 77302		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/05/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manning, Amythyst	Amount of Contribution (\$) \$4,300.00
Contributor address; City; State; Zip Code 20822 Bending Pines Ln Spring, TX 77379		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/05/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manning, Amythyst	Amount of Contribution (\$) \$375.00
Contributor address; City; State; Zip Code 20822 Bending Pines Ln Spring, TX 77379		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/05/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Michael	Amount of Contribution (\$) \$475.00
Contributor address; City; State; Zip Code 1309 Hardwood Lane College Station, TX 77840		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/12 Rpt: 11/34
2 FILER NAME Doyal, James Craig		3 Filer ID
4 Date 08/02/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neel, Hibbett	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code PO Box 22625 Jackson, MS 39225		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orrick Texas PAC	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code 1301 McKinney Street Suite 4100 Houston, TX 77010		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/06/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perigee Networks, LLC	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code 18811 West Cool Breeze Lane Montgomery, TX 77356		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perigee Networks, LLC	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code 18811 West Cool Breeze Lane Montgomery, TX 77356		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pisula, Thomas	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code 3 Legato Way The Woodlands, TX 77382		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/12 Rpt: 12/34
2 FILER NAME Doyal, James Craig		3 Filer ID
4 Date 07/05/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Vince	7 Amount of Contribution (\$) \$350.00
6 Contributor address; City; State; Zip Code 210 Springs Edge Drive Montgomery, TX 77356		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/06/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russ, Jim	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code 10555 Westoffice Dr Houston, TX 77042		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutherford, Dustin	Amount of Contribution (\$) \$1,700.00
Contributor address; City; State; Zip Code 103 Hilbig Rd Conroe, TX 77301		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shihadeh, Mohamed	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code 11907 Arcadia Bend Lane Houston, TX 77041		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/05/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Robert	Amount of Contribution (\$) \$800.00
Contributor address; City; State; Zip Code 16800 Falcon Sound Montgomery, TX 77356		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/12 Rpt: 13/34
2 FILER NAME Doyal, James Craig		3 Filer ID
4 Date 07/05/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Robert	7 Amount of Contribution (\$) \$700.00
6 Contributor address; City; State; Zip Code 16800 Falcon Sound Montgomery, TX 77356		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/05/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Robert	Amount of Contribution (\$) \$225.00
Contributor address; City; State; Zip Code 16800 Falcon Sound Montgomery, TX 77356		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smulders, Louis	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 30 East Rivercrest Drive Houston, TX 77042		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/05/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuckey , Shane	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code P.O. Box 1204 Magnolia, TX 77353		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/06/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Blair Law Firm, P.C.	Amount of Contribution (\$) \$300.00
Contributor address; City; State; Zip Code 7 Grogan's Park Dr. Redbud Building 3 The Woodlands, TX 77380		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/12 Rpt: 14/34
2 FILER NAME Doyal, James Craig		3 Filer ID
4 Date 12/12/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Blair Law Firm, P.C.	7 Amount of Contribution (\$) \$1,500.00
6 Contributor address; City; State; Zip Code 7 Grogan's Park Dr. Redbud Building 3 The Woodlands, TX 77380		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/20/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Unterreiner, Jonathan	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code 21994 Whitetail Crossing New Caney, TX 77357		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/05/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanschoick, Dee	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code P.O. Box 1286 Montgomery, TX 77356		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Eric	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code 630 Hedwig Road Houston, TX 77024		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/03/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, David	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 30 Courtland Green St The Woodlands, TX 77382		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/12 Rpt: 15/34
2 FILER NAME Doyal, James Craig		3 Filer ID
4 Date 07/05/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weems, Tim	7 Amount of Contribution (\$) \$1,250.00
6 Contributor address; City, State; Zip Code 13 Eagles Wing Magnolia, TX 77354		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/20/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yanamandala, Raviraj	Amount of Contribution (\$) \$1,000.00
Contributor address; City, State; Zip Code 2504 Bayfront Dr Pearland, TX 77584		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 16/34	
2 FILER NAME Doyal, James Craig		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 11/01/2017	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyal, Amy	8 Amount of contribution (\$) \$100.00	9 In-kind contribution description Event Sponsor
7 Contributor address; City; State; Zip Code 269 Blue Heron Dr. Montgomery, TX 77316		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
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 12/12/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Signorelli, Daniel	Amount of contribution (\$) \$1,128.54	In-kind contribution description Lunch for fundraiser
Contributor address; City; State; Zip Code 1400 Woodloch Forest Dr Ste 200 The Woodlands, TX 77380		<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)			

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
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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/14 Rpt: 17/34	2 FILER NAME Doyal, James Craig	3 Filer ID
4 Date 08/14/2017	5 Payee name AT&T Mobility	
6 Amount (\$) \$79.00	7 Payee address; City; State; Zip Code PO Box 537104 Atlanta, GA 30353	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Campaign Phone bill
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/18/2017	Payee name AT&T Mobility	
Amount (\$) \$100.30	Payee address; City; State; Zip Code PO Box 537104 Atlanta, GA 30353	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Campaign Phone bill
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/27/2017	Payee name AT&T Mobility	
Amount (\$) \$79.00	Payee address; City; State; Zip Code PO Box 537104 Atlanta, GA 30353	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Campaign phone bill
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/14 Rpt: 18/34		2 FILER NAME Doyal, James Craig		3 Filer ID	
4 Date 10/27/2017		5 Payee name AT&T Mobility			
6 Amount (\$) \$79.17		7 Payee address; City; State; Zip Code PO Box 537104 Atlanta, GA 30353			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) 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 Campaign phone bill.	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 11/28/2017		Payee name AT&T Mobility			
Amount (\$) \$111.75		Payee address; City; State; Zip Code PO Box 537104 Atlanta, GA 30353			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) 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 Campaign phone bill	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 12/27/2017		Payee name AT&T Mobility			
Amount (\$) \$111.75		Payee address; City; State; Zip Code PO Box 537104 Atlanta, GA 30353			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) 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 Campaign Phone Bill	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

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
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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/14 Rpt: 19/34		2 FILER NAME Doyal, James Craig		3 Filer ID	
4 Date 11/01/2017		5 Payee name Bentwater Country Club			
6 Amount (\$) \$20.00		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/Beverage 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 Northshore Republican Women's Luncheon	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 09/06/2017		Payee name Bentwater Yacht Club			
Amount (\$) \$20.00		Payee address; City; State; Zip Code 800 Bentwater Dr Montgomery, TX 77356			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Northshore Republican Women's Luncheon	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 08/09/2017		Payee name Better Bookkeepers			
Amount (\$) \$595.00		Payee address; City; State; Zip Code 25227 Grogans Mill Rd, Ste 220 The Woodlands, TX 77380			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) 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 Campaign Finance Report	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

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
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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/14 Rpt: 20/34		2 FILER NAME Doyal, James Craig		3 Filer ID	
4 Date 12/08/2017		5 Payee name Childrens Safe Harbor			
6 Amount (\$) \$100.00		7 Payee address; City; State; Zip Code 1500 N Frazier Conroe, TX 77301			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 08/14/2017		Payee name Conroe Noon Lions Club			
Amount (\$) \$220.00		Payee address; City; State; Zip Code PO Box 1135 Conroe, TX 77305			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) 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 Monthly Dues	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 09/18/2017		Payee name Conroe Noon Lions Club			
Amount (\$) \$55.00		Payee address; City; State; Zip Code PO Box 1135 Conroe, TX 77305			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) 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 Monthly Dues	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

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
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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/14 Rpt: 21/34	2 FILER NAME Doyal, James Craig	3 Filer ID
4 Date 11/20/2017	5 Payee name Conroe Noon Lions Club	
6 Amount (\$) \$110.00	7 Payee address; City; State; Zip Code PO Box 1135 Conroe, TX 77305	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Monthly Dues
9 Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 12/27/2017	Payee name Conroe Noon Lions Club	
Amount (\$) \$55.00	Payee address; City; State; Zip Code PO Box 1135 Conroe, TX 77305	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Monthly Dues
Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 12/23/2017	Payee name Fredricks, Jim	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 822 Stone Mountain Dr Conroe, TX 77302	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 Gift
Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held

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
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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/14 Rpt: 22/34		2 FILER NAME Doyal, James Craig		3 Filer ID
4 Date 12/27/2017		5 Payee name Gilmore's Florist & Gifts		
6 Amount (\$) \$140.00		7 Payee address; City; State; Zip Code 2411 N Frazier Conroe, TX 77303		
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 Adoption Day Roses.	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 07/30/2017		Payee name Golfers Against Cancer		
Amount (\$) \$1,000.00		Payee address; City; State; Zip Code 13101 Walden Road Montgomery, TX 77356		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event sponsor	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 07/13/2017		Payee name Kelly, Emmett		
Amount (\$) \$2,184.00		Payee address; City; State; Zip Code 10135 Wahrenberger Road Conroe, TX 77304		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event 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 Purchase merchandise for auction.	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held

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
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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/14 Rpt: 23/34	2 FILER NAME Doyal, James Craig	3 Filer ID
4 Date 08/02/2017	5 Payee name Lake Conroe Area Chamber of Commerce	
6 Amount (\$) \$20.00	7 Payee address; City; State; Zip Code PO Box 2347 Conroe, TX 77305	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Event Ticket
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/07/2017	Payee name Lake Conroe Area Republican Women	
Amount (\$) \$40.00	Payee address; City; State; Zip Code P.O. Box 737 Montgomery, TX 77356	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Area Republican Women's Luncheon
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/02/2017	Payee name Lake Conroe Area Republican Women	
Amount (\$) \$20.00	Payee address; City; State; Zip Code P.O. Box 737 Montgomery, TX 77356	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Area Republican Women's Luncheon
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/14 Rpt: 24/34		2 FILER NAME Doyal, James Craig		3 Filer ID	
4 Date 12/07/2017		5 Payee name Lake Conroe Area Republican Women			
6 Amount (\$) \$15.00		7 Payee address; City; State; Zip Code P.O. Box 737 Montgomery, TX 77356			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Area Republican Women's Christmas Party	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 12/27/2017		Payee name Liberty Belles Republican Womens Club			
Amount (\$) \$110.00		Payee address; City; State; Zip Code 29815 S Legends Chase Circle Spring, TX 77386			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event 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 Event Tickets	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/03/2017		Payee name Montgomery County			
Amount (\$) \$3,627.00		Payee address; City; State; Zip Code 501 N. Thompson Conroe, TX 77301			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event 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 Convention Center Rental for Event	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

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
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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/14 Rpt: 25/34	2 FILER NAME Doyal, James Craig	3 Filer ID
4 Date 09/21/2017	5 Payee name Montgomery County Republican Party	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code PO Box 45 Conroe, TX 77305	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Event Sponsor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/13/2017	Payee name Montgomery County Republican Party	
Amount (\$) \$1,250.00	Payee address; City; State; Zip Code PO Box 45 Conroe, TX 77305	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Filing Fee for County Judge
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/11/2017	Payee name Montgomery County Republican Women	
Amount (\$) \$200.00	Payee address; City; State; Zip Code PO Box 1766 Conroe, TX 77305	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Event Sponsor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/14 Rpt: 26/34	2 FILER NAME Doyal, James Craig	3 Filer ID
4 Date 12/23/2017	5 Payee name Olszowy, Sylvia	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 12898 Pelican Blvd Willis, TX 77318	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 Gift
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/05/2017	Payee name PayPal	
Amount (\$) \$461.48	Payee address; City; State; Zip Code 2221 N First St San Jose, CA 95131	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Processing Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/19/2017	Payee name Phillip Cash Campaign	
Amount (\$) \$100.00	Payee address; City; State; Zip Code P.O. Box 2099 Willis , TX 77378	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) 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 Cash, Phillip	Office sought Office held Constable

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
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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/14 Rpt: 27/34	2 FILER NAME Doyal, James Craig	3 Filer ID
4 Date 10/10/2017	5 Payee name Piryx Inc	
6 Amount (\$) \$28.75	7 Payee address; City; State; Zip Code 995 Market Street 2nd Floor San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Credit Card Processing fee
9 Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 08/24/2017	Payee name River Plantation Country Club	
Amount (\$) \$16.00	Payee address; City; State; Zip Code 550 Country Club Dr Conroe, TX 77302	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Montgomery County Republican Women's luncheon
Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 09/27/2017	Payee name River Plantation Country Club	
Amount (\$) \$36.00	Payee address; City; State; Zip Code 550 Country Club Dr Conroe, TX 77302	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Montgomery County Republican Women's Luncheon
Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held

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
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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/14 Rpt: 28/34		2 FILER NAME Doyal, James Craig		3 Filer ID
4 Date 07/14/2017		5 Payee name Ross, Vince		
6 Amount (\$) \$450.00		7 Payee address; City; State; Zip Code 210 Springs Edge Montgomery, TX 77356		
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event 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 Fundraiser - auctioneer service.	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 12/13/2017		Payee name Rotary Club of The Woodlands		
Amount (\$) \$550.00		Payee address; City; State; Zip Code PO Box 7353 The Woodlands, TX 77387		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) 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 Dues	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 08/09/2017		Payee name Rusty Hardin & Associates		
Amount (\$) \$149,806.43		Payee address; City; State; Zip Code 1401 McKinney St Suite 2250 Houston, TX 77010		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Legal Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Attorney Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held

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
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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/14 Rpt: 29/34	2 FILER NAME Doyal, James Craig	3 Filer ID
4 Date 10/23/2017	5 Payee name Shake FX LLC	
6 Amount (\$) \$860.59	7 Payee address; City; State; Zip Code 541 Phillips Dr Boca Raton, FL 33432	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Website payment
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/14/2017	Payee name Spectrum Catering	
Amount (\$) \$1,271.96	Payee address; City; State; Zip Code PO Box 7130 The Woodlands, TX 77387	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Fundraiser - food catering.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/12/2017	Payee name The Woodlands Rotary Club Foundation	
Amount (\$) \$100.00	Payee address; City; State; Zip Code P.O. Box 7353 The Woodlands, TX 77387	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) 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

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
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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/14 Rpt: 30/34		2 FILER NAME Doyal, James Craig		3 Filer ID	
4 Date 08/21/2017		5 Payee name US Postmaster			
6 Amount (\$) \$166.00		7 Payee address; City; State; Zip Code 809 W Dallas Conroe, TX 77301			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) 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 P.O.Box Rental	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/02/2017		Payee name Willis Ag Boosters			
Amount (\$) \$100.00		Payee address; City; State; Zip Code PO Box 1735 Willis, TX 77378			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) 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 12/21/2017		Payee name Wright, Williams & Associates			
Amount (\$) \$15,000.00		Payee address; City; State; Zip Code 14900 Avery Ranch Blvd Austin, TX 78717			
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 Political Consultant	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 F4: Sch: 1/4 Rpt: 31/34	2 FILER NAME Doyal, James Craig	3 Filer ID
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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5 Date 08/17/2017	6 Payee name Carmelitas Restaurant
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7 Amount (\$) \$28.82	8 Payee address; City; State; Zip Code 109 W Davis Conroe, TX 77301
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Political Lunch
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/28/2017	Payee name Chuy's Shenandoah
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Amount (\$) \$34.10	Payee address; City; State; Zip Code 18035 IH-45 North Shenandoah, TX 77385
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Political Lunch
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 F4: Sch: 2/4 Rpt: 32/34	2 FILER NAME Doyal, James Craig	3 Filer ID
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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5 Date 09/20/2017	6 Payee name Eric's Restaurant
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7 Amount (\$) \$28.82	8 Payee address; City; State; Zip Code 4450 University Drive Room 227 Houston, TX 77204
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Political Lunch
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11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/07/2017	Payee name Marriott Waterway Banquet
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Amount (\$) \$48.00	Payee address; City; State; Zip Code 1601 Lake Robbins Drive The Woodlands, TX 77380
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Interfaith Event
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 F4: Sch: 3/4 Rpt: 33/34	2 FILER NAME Doyal, James Craig	3 Filer ID
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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5 Date 09/28/2017	6 Payee name The Crighton Theater
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7 Amount (\$) \$119.00	8 Payee address; City; State; Zip Code 234 North Main Street Conroe , TX 77301
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Event Tickets
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/07/2017	Payee name The Red Onion
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Amount (\$) \$40.87	Payee address; City; State; Zip Code 330 North Main Street Conroe, TX 77301
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Political Lunch
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 F4: Sch: 4/4 Rpt: 34/34	2 FILER NAME Doyal, James Craig	3 Filer ID
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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5 Date 10/27/2017	6 Payee name The Toasted Yolk Cafe
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7 Amount (\$) \$27.23	8 Payee address; City; State; Zip Code 2129 W Davis St Suite C Conroe, TX 77304
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Political Breakfast
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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