

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: 7
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Aubrey	MI Wayne
	NICKNAME	LAST Barrett	SUFFIX Jr.
OFFICE USE ONLY			
Date Received 10/5/15 @ 1:35 PM			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 780 Elkins Lk 1845 Rollingwood Dr Huntsville, TX 77340		ZIP CODE
	Date Hand-delivered or Date Postmarked 10/5/15		Receipt #
	Date Processed 10/5/15		Amount
	Date Imaged 10/5/15		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Melissa	MI
	NICKNAME	LAST Green	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 612 Hickory St.		APT / SUITE #; CITY; STATE; ZIP CODE Huntsville TX 77320
	AREA CODE 225	PHONE NUMBER 276-8536	EXTENSION
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (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 08/24/2015		THROUGH Month Day Year 09/24/2015
10 ELECTION	ELECTION DATE Month Day Year 11/03/2015		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
	11 OFFICE OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Mayor of Huntsville, Texas

GO TO PAGE 2

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

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

2 of 7

13 C / OH NAME Barrett, Aubrey	14 Filer ID
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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. 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.	
<table border="1" style="width:100%"> <tr> <td style="width:30%; vertical-align: top;"> COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC </td> <td style="padding: 5px;"> COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME 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	

16 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)	\$ 2,128.90
----- EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 57.64
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,974.47
----- CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
----- OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFIDAVIT



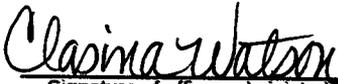
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Aubrey Wayne Barrett, Jr., this the 5th day of October, 20 15, to certify which, witness my hand and seal of office.



 Signature of officer administering

Clasina Watson
 Printed name of officer administering

Deputy City Secretary
 Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Barrett, Aubrey		19 Filer ID
20 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,128.90
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 1,000.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 1,974.47
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 F4: EXPENDITURES MADE BY CREDIT CARD	\$
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: 1/1 Rpt: 4/7
2 FILER NAME Barrett, Aubrey		3 Filer ID
4 Date 09/22/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Betty	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 224 Ave A SE LaFayette, AL 36862		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/14/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolton, Morris	Amount of Contribution (\$) \$800.00
Contributor address; City; State; Zip Code 8588 A State Hwy 75 S Huntsville, TX 77340		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/14/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Harrell (Mr.)	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code P. O. Box 711 TX 77342		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAO Limited,	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1207 University Ave. Huntsville, TX 77340		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wayne Barrett Campaign	Amount of Contribution (\$) \$628.90
Contributor address; City; State; Zip Code 780 Elkins Lk Huntsville, TX 77340		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:
Sch: 1/1 Rpt: 5/7

2 FILER NAME

Barrett, Aubrey

3 Filer ID

4 TOTAL OF UNITEMIZED LOANS

\$

5 Date of loan
08/25/2015

7 Name of lender
Barrett, Aubrey

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

9 Loan Amount (\$)
\$1,000.00

6 Is lender a financial institution?
No

8 Lender address; City; State; Zip Code
780 Elkins Lk
Huntsville, TX 77340

10 Interest Rate

11 Maturity Date

12 Principal occupation / Job title (See Instructions)

13 Employer (See Instructions)

14 Description of Collateral

None

15 Check if personal funds were deposited into political account (See Instructions)

16 GUARANTOR INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

not applicable

18 Guarantor address; City; State; Zip Code

20 Principal occupation

21 Employer (See Instructions)

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: 1/2 Rpt: 6/7	2 FILER NAME Barrett, Aubrey	3 Filer ID
4 Date 09/10/2015	5 Payee name Sam Houston Memorial Museum	
6 Amount (\$) \$125.00	7 Payee address; City; State; Zip Code 1402 19th St Huntsville, TX 77340	
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 Gazebo rental fee
9 Complete ONLY if direct expenditure to benefit C/OH		
Date 09/09/2015	Candidate/Officeholder name Texas GOP Store	
Amount (\$) \$400.00	Office sought Office held	
Date 09/09/2015	Payee name Texas GOP Store	
Amount (\$) \$400.00	Payee address; City; State; Zip Code 404 IH 45 Huntsville, TX 77488	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Signs
Complete ONLY if direct expenditure to benefit C/OH		
Date 09/17/2015	Candidate/Officeholder name Texas GOP Store	
Amount (\$) \$565.61	Office sought Office held	
Date 09/17/2015	Payee name Texas GOP Store	
Amount (\$) \$565.61	Payee address; City; State; Zip Code 404 IH 45 Huntsville, TX 77488	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Signs
Complete ONLY if direct expenditure to benefit C/OH		
Date 09/17/2015	Candidate/Officeholder name Texas GOP Store	
Amount (\$) \$565.61	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: 2/2 Rpt: 7/7	2 FILER NAME Barrett, Aubrey	3 Filer ID						
4 Date 09/24/2015	5 Payee name Texas GOP Store							
6 Amount (\$) \$826.22	7 Payee address; City; State; Zip Code 404 IH 45 Huntsville, TX 77488							
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Signs						
9 Complete ONLY if direct expenditure to benefit C/OH								
<table border="1"> <thead> <tr> <th data-bbox="426 863 822 892">Candidate/Officeholder name</th> <th data-bbox="834 863 1181 892">Office sought</th> <th data-bbox="1189 863 1528 892">Office held</th> </tr> </thead> <tbody> <tr> <td colspan="3" data-bbox="117 934 1536 1974" style="height: 495px;"></td> </tr> </tbody> </table>			Candidate/Officeholder name	Office sought	Office held			
Candidate/Officeholder name	Office sought	Office held						

TEXT ANNOTATION

Sch: 1/1 Rpt: 8/8

FILER NAME

Barrett, Aubrey

Filer ID

Schedule

Cover Sheet

Information entered by filer as a memo:

The contribution of \$628.90 from "Wayne Barrett Campaign" on Schedule A1 is unexpended campaign funds from a previous campaign for a different local office.