

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers)		2 Total pages filed:		OFFICE USE ONLY		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR MRS.	FIRST Nicole	MI S	Date Received 3:28 pm (RS) 8-21-17		
	NICKNAME	LAST Bishop	SUFFIX			
4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)			
	<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> Exceeded \$500 limit				
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after treasurer appointment (officeholder only)		Date <u>hard-delivered</u> or Date Postmarked 25		
	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Final report		Receipt #	Amount \$	
5 ORIGINAL PERIOD COVERED	Month	Day	Year	Month	Day	Year
	01	01	2017	THROUGH	06	30
Date Processed						
Date Imaged						

6 EXPLANATION OF CORRECTION See attached page labeled "6. Explanation of Corrections"

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:

Semiannual reports: I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.



Nicole Bishop

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Nicole S. Bishop, this the 21 day of August, 2017, to certify which, witness my hand and seal of office.

[Signature]

Signature of officer administering oath

Bethany Ramirez

Printed name of officer administering oath

Notary Public

Title of officer administering oath

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

6. Explanation of Correction

On August 1, 2017 I learned that vendor Adam Huvar had not received payment for auctioneer services in the amount of \$250.00. It had been my understanding that Jessica Minarcin had paid Mr. Huvar directly on June 30, 2017 for those services, and I listed the expenditure and the contribution on my expense report. After speaking with Jessica Minarcin after learning about the outstanding invoice, I learned that she had not paid \$250.00 to the auctioneer but instead paid a portion of the purchase of wine from Alamo City Liquors. Jessica Minarcin ordered and picked up the wine for a campaign event and I reimbursed her \$363.68. I did not know that the actual amount of the wine invoice was \$463.68 and that Ms. Minarcin had paid \$100 directly to the vendor as I did not have a receipt. I have since asked for a copy of that receipt. After speaking with a representative from the Texas Ethics Commission on August 14, 2017, I learned that direct vendor pay contributions should be listed in the Schedule A2 In Kind Contributions instead of Schedule A1 contributions.

On August 11, 2017 while purchasing a parade spot for my campaign, I recalled that I paid \$25.00 to be in a local parade on June 17, 2017. I forgot about the expenditure until this point as it was a last minute expense, in cash, and I had not received an invoice. This was an inadvertent oversight when I filed my report.

On August 14, 2017 I called the Texas Ethics Commission to ask a series of questions before filing this corrected campaign finance report. I learned live auction item purchases contributions should be reported at the time payment is received and not at the time the purchase is made. The contribution that I listed from Rhonda Minarcin was for the purchase of a live auction item on June 30, 2017, however payment for the item was not received until after.

Given the information above the following corrections need to be made.

1. Schedule A1 Monetary Political Contributions
 - a. Page 2 of 4 contribution listed in the amount of \$200.00 from Rhonda Minarcin should be changed to Schedule B Pledged Contribution in the amount of \$200.00
 - b. Page 4 of 4 contribution listed in the amount of \$250.00 from Jessica Minarcin should be moved to Schedule A2 Non-Monetary (In-Kind) Political Contributions in the amount of \$100.00 on June 30, 2017 for wine used at a political fundraising event, instead of for auctioneer services.
2. Schedule A2 Non-Monetary (In-Kind) Political Contributions
 - a. Page 4 of 4 contribution of \$400.00 by Jessica Minarcin on June 30, 2017 should be changed to \$500.00 instead of \$400.00
3. Schedule B Pledged Contributions
 - a. Page 2 of 2 add Rhonda Minarcin in the amount of \$200.00 on June 30, 2017
4. Schedule F1 Expenditures
 - a. Page 6 or 7 - Remove \$250.00 paid to Adam Huvar for Auctioneer services. (should be changed to Schedule F2 Unpaid Incurred obligations
5. Schedule F2 Unpaid Incurred Obligations
 - a. Page 1 of 1 Add Schedule F2 section with for unpaid obligation to Adam Huvar for Auctioneer Services rendered on June 30, 2017
6. Schedule G Political Expenditures Made From Personal Funds
 - a. Page 1 of 1 Add an expenditure for the amount of \$25.00 to the Boerne Berges Fest for parade entrance fee on June 17, 2017.

The first error was discovered 8/1/2017, I am making this correction within 14 business days from the date of discovery as required by law, the due date being August 21, 2017.

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mrs. Nicole Short <hr style="border-top: 1px dashed black;"/> NICKNAME LAST SUFFIX Bishop	OFFICE USE ONLY	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE [REDACTED]	Date Received	
<input type="checkbox"/> Change of Address		Date Hand-delivered or Date Postmarked	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION [REDACTED]	Receipt #	Amount \$
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mrs. Susan G <hr style="border-top: 1px dashed black;"/> NICKNAME LAST SUFFIX Allen	Date Processed	
		Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 7850 Smokey View; Boerne; TX; 78015		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (210) 415 - 7846		
9 REPORT TYPE	<input 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 checked="" 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)		
10 PERIOD COVERED	Month Day Year Month Day Year 01 / 01 / 2017 THROUGH 06 / 30 / 2017		
11 ELECTION	ELECTION DATE Month Day Year 03 / 06 / 2018	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) Kendall County Criminal District Attorney	13 OFFICE SOUGHT (if known) Kendall County Criminal District Attorney	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

14 C/OH NAME Nicole Short Bishop **15 Filer ID (Ethics Commission Filers)**

16 NOTICE FROM POLITICAL COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

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

Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 8,880.00 8,530.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 7,567.38 7,592.38
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 7,317.38

18 AFFIDAVIT

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

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

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME Nicole Short Bishop		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	New amt. \$4,750 \$ 5,200.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	New amt. \$3,780 \$ 3,680.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	New amt. \$26,600 \$ 26,400.00
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 7,317.38
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	New amt. \$7,317.38 \$ 7,567.38
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 250.00
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 25.00
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE 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: 1 of 4

2 FILER NAME
Nicole Short Bishop

3 Filer ID (Ethics Commission Filers)

4 Date
06/27/2017

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

7 Amount of contribution (\$)
\$100.00

6 Contributor address; City; State; Zip Code
7850 Smokey View Boerne, Texas 78015

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
06/30/2017

Full name of contributor out-of-state PAC (ID#: _____)
Laurence R. & Betty L. Nichols

Amount of contribution (\$)
\$100.00

Contributor address; City; State; Zip Code
PO Box 1275 Boerne, Texas 78006

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
06/30/2017

Full name of contributor out-of-state PAC (ID#: _____)
Richard F. & Victoria J. Zapf

Amount of contribution (\$)
\$100.00

Contributor address; City; State; Zip Code
241 English Oaks Cir. Boerne, Texas 78006

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
06/30/2017

Full name of contributor out-of-state PAC (ID#: _____)
Donald W. & Helen M. Jackson

Amount of contribution (\$)
\$500.00

Contributor address; City; State; Zip Code
PO Box 1945 Boerne, Texas 78006

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **2 of 4**

2 FILER NAME
Nicole Short Bishop

3 Filer ID (Ethics Commission Filers)

4 Date
06/30/2017

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

7 Amount of contribution (\$) **\$200.00**

6 Contributor address; City; State; Zip Code
711 FM 474 Boerne, Texas 78006

Move to Schedule B Pledged Contributions

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
06/30/2017

Full name of contributor out-of-state PAC (ID#: _____)
Ronald V. & Barbara S. Racinowski

Amount of contribution (\$) **\$200.00**

Contributor address; City; State; Zip Code
205 Village Dr. Boerne, Texas 78006

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
06/30/2017

Full name of contributor out-of-state PAC (ID#: _____)
Donald D. & Sally R. Pryor

Amount of contribution (\$) **\$100.00**

Contributor address; City; State; Zip Code
6 Jennifer Dr. Boerne, Texas 78006

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
06/30/2017

Full name of contributor out-of-state PAC (ID#: _____)
Kimberly S. Keller & Shane J. Stolarczyk

Amount of contribution (\$) **\$200.00**

Contributor address; City; State; Zip Code
8125 Windmill Cir. Fair Oaks Ranch, Texas 78006

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **3 of 4**

2 FILER NAME
Nicole Short Bishop

3 Filer ID (Ethics Commission Filers)

4 Date
06/30/2017

5 Full name of contributor out-of-state PAC (ID#: _____)
Kay H. Ochoa

7 Amount of contribution (\$)
\$50.00

6 Contributor address; City; State; Zip Code
414 Live Oak St. Boerne, Texas 78006

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
06/30/2017

Full name of contributor out-of-state PAC (ID#: _____)
Anne M. Dacy

Amount of contribution (\$)
\$300.00

Contributor address; City; State; Zip Code
402 Whitworth Rd Boerne, Texas 78006

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
06/30/2017

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

Amount of contribution (\$)
\$2,450.00

Contributor address; City; State; Zip Code
118 Spring Hill Dr. Boerne, Texas 78006

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
06/30/2017

Full name of contributor out-of-state PAC (ID#: _____)
Gene & Bonnie Miertschin

Amount of contribution (\$)
\$500.00

Contributor address; City; State; Zip Code
149 Hwy 46 E. Boerne, Texas 78006

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 4 of 4

2 FILER NAME

Nicole Short Bishop

3 Filer ID (Ethics Commission Filers)

4 Date

06/30/2017

5 Full name of contributor

Charlie Boyd IV

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

7 Amount of contribution (\$)

\$50.00

6 Contributor address;

317 Hampton Cove

City; State; Zip Code

Boerne, Texas 78006

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/30/2017

Full name of contributor

Jody Clark

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

Amount of contribution (\$)

\$100.00

Contributor address;

1231 Sonesta Lane

City; State; Zip Code

San Antonio, Texas 78260

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2017

Full name of contributor

Jessica Minarcin

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

Amount of contribution (\$)

\$250.00

Contributor address;

711 FM 474

City; State; Zip Code

Boerne, Texas 78006

Move to Schedule
A2 and change to
\$100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

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

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 1 of 4	
2 FILER NAME Nicole Short Bishop		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 3,680.00 3,780.00	
5 Date 05/29/2017	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jason Abbott	8 Amount of Contribution \$ \$825.00	9 In-kind contribution description Photography session and headshots
7 Contributor address; City; State; Zip Code 930 East Blanco Rd. Boerne; TX 78006		<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 06/30/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherry Paul Ungashick	Amount of Contribution \$ \$30.00	In-kind contribution description Popcorn for party
Contributor address; City; State; Zip Code 28604 Interstate 10 W: Boerne; Texas; 78006		<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)			

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 2 of 4	
2 FILER NAME Nicole Short Bishop		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 06/23/2017	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kristy Watson	8 Amount of Contribution \$ \$500.00	9 In-kind contribution description Web design and graphic designing
7 Contributor address; City; State; Zip Code 115 W Highland Dr. Boerne; Texas; 78006		<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 06/30/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sara Schank	Amount of Contribution \$ \$75.00	In-kind contribution description Live Auction item: Lythograph
Contributor address; City; State; Zip Code 5117 86th Ave SW Richardton; North Dakota; 58652		<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)			

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: 3 of 4

2 FILER NAME
Nicole Short Bishop

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$

5 Date
06/30/2017

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

8 Amount of Contribution \$
\$1,300.00

9 In-kind contribution description
Live Auction items;
Tubing w/ picnic; stay
at New Mexico
vacation home

7 Contributor address; City; State; Zip Code
711 FM 474 Boerne; Texas; 78006

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
06/30/2017

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

Amount of Contribution \$
\$550.00

In-kind contribution description
Live Auction item:
Catered paella
dinner party

Contributor address; City; State; Zip Code
44 Jennifer Dr. Boerne; Texas; 78006

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: **4 of 4**

2 FILER NAME
Nicole Short Bishop

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date
06/30/2017

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

7 Contributor address; City; State; Zip Code
711 FM 474 Boerne; Texas; 78006

8 Amount of Contribution \$
~~\$400.00~~
\$500.00

9 In-kind contribution description
**Live Auction Items:
Puppy and Donkey
and wine**

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

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

Amount of Contribution \$

In-kind contribution description

Contributor address; City; State; Zip Code

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B: 1 of 2

2 FILER NAME
Nicole Short Bishop

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED PLEDGES

\$ ~~\$26,400.00~~ **26,600.00**

5 Date
06/30/2017

6 Full name of pledgor out-of-state PAC (ID#: _____)
Jack Short

7 Pledgor address; City; State; Zip Code
31611 Wild Oak Hill; Fair Oaks Ranch; TX; 78006

8 Amount of Pledge \$
\$15,000

9 In-kind contribution description
Office space for campaign headquarters for 15 months

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

Date
06/14/2017

Full name of pledgor out-of-state PAC (ID#: _____)
Bill Bird

Pledgor address; City; State; Zip Code
1 Dartford Lane San Antonio; TX; 78257

Amount of Pledge \$
\$10,000.00

In-kind contribution description
direct and fundraising event hosting

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
06/30/2017

Full name of pledgor out-of-state PAC (ID#: _____)
Jeb Wait

Pledgor address; City; State; Zip Code
205 Swede Creek Boerne; TX; 78006

Amount of Pledge \$
\$1,000.00

In-kind contribution description

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
06/30/2016

Full name of pledgor out-of-state PAC (ID#: _____)
Karolyn Lang

Pledgor address; City; State; Zip Code
203 Highway 87, #101 Comfort; TX; 78013

Amount of Pledge \$
\$200.00

In-kind contribution description

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

PLEGGED CONTRIBUTIONS

SCHEDULE B

The instruction Guide explains how to complete this form.

1 Total pages Schedule B: 2 of 2

2 FILER NAME
Nicole Short Bishop

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED PLEDGES

\$

5 Date
06/30/2017

6 Full name of pledgor out-of-state PAC (ID#: _____)
Parviz Daryae

7 Pledgor address; City; State; Zip Code
430 W. Bandera Rd. Boerne; TX; 78006

8 Amount of Pledge \$
\$200.00

9 In-kind contribution description

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

Date
06/30/2017

Full name of pledgor out-of-state PAC (ID#: _____)
Rhonda Minarcin

Pledgor address; City; State; Zip Code

711 FM 474 Boerne, TX 78006

Amount of Pledge \$
\$200.00

In-kind contribution description

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Pledgor address; City; State; Zip Code

Amount of Pledge \$

In-kind contribution description

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Pledgor address; City; State; Zip Code

Amount of Pledge \$

In-kind contribution description

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E: 1 of 1

2 FILER NAME
Nicole Short Bishop

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$ \$7,317.38

5 Date of loan
06/30/2017

7 Name of lender out-of-state PAC (ID#: _____)
Nicole Short Bishop

9 Loan Amount (\$)
\$7,317.38

6 Is lender a financial Institution?
Y N

8 Lender address; City; State; Zip Code
PO Box 1261 Boerne, Texas 78006

10 Interest rate
0
11 Maturity date
January 1, 2019

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
 not applicable

17 Name of guarantor
18 Guarantor address; City; State; Zip Code

19 Amount Guaranteed (\$)

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

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

Loan Amount (\$)

Is lender a financial Institution?
Y N

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral
 none

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

GUARANTOR INFORMATION
 not applicable

Name of guarantor
Guarantor address; City; State; Zip Code

Amount Guaranteed (\$)

Principal Occupation (See Instructions)

Employer (See Instructions)

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1 of 7	2 FILER NAME Nicole Short Bishop	3 Filer ID (Ethics Commission Filers)
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4 Date 06/01/2017	5 Payee name GoDaddy.com
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6 Amount (\$) \$24.15	7 Payee address; City; State; Zip Code 14455 N. Hayden Rd., Suite 219, Scottsdale, AZ 85260
---------------------------------	---

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 .org registration for website votebishopkendallcountycda.org
---	--	---

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06/01/2017	Payee name Facebook, Inc.
--------------------	------------------------------

Amount (\$) \$55.85	Payee address; City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025-1452
------------------------	--

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign page promotion
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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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Date 06/15/2017	Payee name GoDaddy.com
--------------------	---------------------------

Amount (\$) \$63.83	Payee address; City; State; Zip Code 14455 N. Hayden Rd., Suite 219, Scottsdale, AZ 85260
------------------------	--

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Economy Linux Hosting with cPanel (votebishopkendallcountycda.org)
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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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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2 of 7	2 FILER NAME Nicole Short Bishop	3 Filer ID (Ethics Commission Filers)
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4 Date 06/16/2017	5 Payee name InstantImprints-San Antonio
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6 Amount (\$) \$809.17	7 Payee address; City; State; Zip Code 8425 Bandera Road, STE 154, San Antonio, Texas, 78250
----------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 2 banners and 18 tshirts
---	--	--

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06/19/2017	Payee name RSVPify
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Amount (\$) \$38.25	Payee address; City; State; Zip Code 757 N. Orleans St. Suite 1508, Chicago, IL 60654
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising event RSVP website
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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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Date 06/19/2017	Payee name Facebook, Inc.
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Amount (\$) \$28.26	Payee address; City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025-1452
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign kickoff event promotion
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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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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE 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: 3 of 7	2 FILER NAME Nicole Short Bishop	3 Filer ID (Ethics Commission Filers)
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4 Date 06/21/2017	5 Payee name GoDaddy.com
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6 Amount (\$) \$21.16	7 Payee address; City; State; Zip Code 14455 N. Hayden Rd., Suite 219, Scottsdale, AZ 85260
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 .com registration (keepbishop.com)
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06/23/2017	Payee name 4Imprint
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Amount (\$) \$728.56	Payee address; City; State; Zip Code 101 Commerce St. PO Box 320, Oshkosh, WI 54901
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 1000 Koozies
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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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Date 06/27/2017	Payee name Lon Jett
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Amount (\$) \$186.00	Payee address; City; State; Zip Code 7415 Legend Point Dr, San Antonio, TX 78244
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Buttons
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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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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE 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: 4 of 7	2 FILER NAME Nicole Short Bishop	3 Filer ID (Ethics Commission Filers)
4 Date 06/27/2017	5 Payee name Office Depot	
6 Amount (\$) \$86.59	7 Payee address; City; State; Zip Code 1205 N Loop 1604 West, STE 200, San Antonio, TX 78258	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Paypal Chip card reader
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 06/29/2017	Payee name COSTCO	
Amount (\$) \$675.78	Payee address; City; State; Zip Code 5611 UTSA Blvd, San Antonio, TX 78249	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Beverages and Party Supplies, Cups, plates, napkins, plastic wear,
	Candidate / Officeholder name Office sought Office held	
Date 06/29/2017	Payee name Alamo City Liquor	
Amount (\$) \$363.68	Payee address; City; State; Zip Code 2943 Thousand Oaks # 3, San Antonio, TX 78247	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wine for campaign fundraising event
	Candidate / Officeholder name Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE 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: 6 of 7	2 FILER NAME Nicole Short Bishop	3 Filer ID (Ethics Commission Filers)
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4 Date 06/30/2017	5 Payee name Kronkosky Place
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6 Amount (\$) \$3,275.00	7 Payee address; City; State; Zip Code 17 Old San Antonio Rd, Boerne, TX, 78006
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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 Campaign kickoff event venue rental
---	---	--

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06/30/2017	Payee name Adam Huvar
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Amount (\$) \$250.00	Payee address; City; State; Zip Code 613 Deer Forest Dr. West, Pipe Creek, TX 78063
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Auctioneer for campaign kickoff party auction
-------------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06/30/2017	Payee name Joe Moreno and Midnight Highway Band
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Amount (\$) \$600.00	Payee address; City; State; Zip Code 259 Forest Trail, Bandera TX 78003
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Band for Campaign kickoff party
-------------------------------	---	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 7 of 7	2 FILER NAME Nicole Short Bishop	3 Filer ID (Ethics Commission Filers)
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4 Date 06/30/2017	5 Payee name PayPal
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6 Amount (\$) \$3.65	7 Payee address; City; State; Zip Code 2211 North First Street San Jose, California 95131
-------------------------	--

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 transaction fee
------------------------------------	--	--

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2: 1 of 1	2 FILER NAME Nicole Short Bishop	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$ 250.00
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5 Date 06/30/2017	6 Payee name Adam Huvar
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7 Amount (\$) \$250.00	8 Payee address; City; State; Zip Code 613 Deer Forest Dr. West, Pipe Creek, TX 78063
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Auctioneer for campaign kickoff party
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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	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
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TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 G: n/a	2 FILER NAME Nicole Short Bishop	3 Filer ID (Ethics Commission Filers)
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4 Date 06/17/2017	5 Payee name Boerne Berges Fest
-----------------------------	---

6 Amount (\$) \$ 25.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 748; Boerne, TX 78006
---	---

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Parade Entry Fee <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	--	---

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

Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED