

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

<b>The C/OH Instruction Guide explains how to complete this form.</b>		<b>1 ACCOUNT #</b> (Ethics Commission Filers)	<b>2 Total pages filed:</b> 2 <i>(initials)</i>				
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR <i>(MR)</i>	FIRST <i>James</i>	MI <i>A</i>	<b>OFFICE USE ONLY</b>			
	NICKNAME	LAST <i>Hudson</i>	SUFFIX <i>Jr</i>	Date Received <i>01-14-2014 @ 2:19 pm.</i>			
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b> <input type="checkbox"/> change of address	ADDRESS / PO BOX; APT / SUITE #;	CITY;	STATE;	ZIP CODE	Date Hand-delivered or Postmarked		
	<i>PO Box 197 Boerne TX 78006</i>				Receipt #	Amount	
<b>5 CANDIDATE / OFFICEHOLDER PHONE</b>	AREA CODE	PHONE NUMBER	EXTENSION	Date Processed			
	<i>(830)</i>	<i>249-9343</i>	<i>271</i>				
<b>6 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR <i>(MR)</i>	FIRST <i>James</i>	MI <i>A</i>	Date Imaged			
	NICKNAME	LAST <i>Hudson</i>	SUFFIX <i>Jr</i>				
<b>7 CAMPAIGN TREASURER ADDRESS</b> (residence or business)	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE;	ZIP CODE		
	<i>315 Someday Drive (PO Box 197)</i>		<i>Boerne TX</i>		<i>78006-0197</i>		
<b>8 CAMPAIGN TREASURER PHONE</b>	AREA CODE	PHONE NUMBER	EXTENSION				
	<i>(830)</i>	<i>249-9343</i>					
<b>9 REPORT TYPE</b>	<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)						
<b>10 PERIOD COVERED</b>	Month	Day	Year	THROUGH	Month	Day	Year
	<i>7</i>	<i>1</i>	<i>2013</i>		<i>12</i>	<i>31</i>	<i>2013</i>
<b>11 ELECTION</b>	ELECTION DATE			ELECTION TYPE			
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special
	<i>11</i>	<i>08</i>	<i>2016</i>				
<b>12 OFFICE</b>	OFFICE HELD (if any)			13 OFFICE SOUGHT (if known)			
	<i>County Tax Assessor Collector</i>			<i>County Tax Assessor Collector</i>			
<b>14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS</b>  <input type="checkbox"/> additional pages	DIRECT CAMPAIGN EXPENDITURES ARE CAMPAIGN EXPENDITURES MADE BY OTHERS WITHOUT THE CANDIDATE'S PRIOR CONSENT OR APPROVAL. CANDIDATES ARE REQUIRED TO DISCLOSE THIS INFORMATION ONLY IF THEY RECEIVE NOTIFICATION OF THE DIRECT CAMPAIGN EXPENDITURE.						
	Name						
	Address / PO Box; Apt. / Suite #; City; State; Zip Code						
<b>GO TO PAGE 2</b>							

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME

James A. Hudson Jr.

16 ACCOUNT # (Ethics Commission Filers)

17 NOTICE FROM POLITICAL COMMITTEE(S)

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

COMMITTEE TYPE

GENERAL

SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

18 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

0

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

0

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$

0

4. TOTAL POLITICAL EXPENDITURES

\$

0

CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$

1,174.23

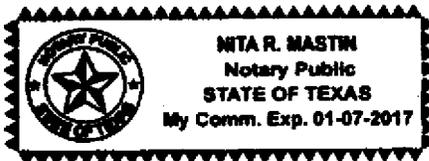
OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$

0

19 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 45, Election Code.

James A. Hudson Jr.  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said James A. Hudson, Jr., this the 14th day of January, 20 14, to certify which, witness my hand and seal of office.

Nita R. Mastin  
Signature of officer administering oath

Nita R. Mastin  
Printed name of officer administering oath

Notary Public  
Title of officer administering oath