



# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

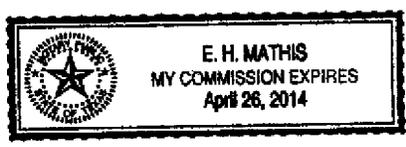
FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME	15 ACCOUNT # (Ethics Commission Filers)
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16 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.	
	COMMITTEE TYPE  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

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)	\$ 2560.76
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 3225.91
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 370.04
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 500.00

18 AFFIDAVIT

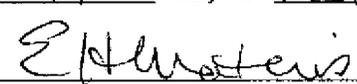


I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

  
 \_\_\_\_\_  
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Susan S. Jackson, this the 24th day of February, 20 14, to certify which, witness my hand and seal of office.

  
Signature of officer administering oath

E H Mathis  
Printed name of officer administering oath

Notary Public  
Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <b>3</b>	
2 FILER NAME <b>SUSAN JACKSON</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>1-24-14</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Shirley Stehling</b> 6 Contributor address; City; State; Zip Code <b>26 LITTLE JOSHUA CREEK RD. COMFORT, TX. 78013</b>	7 Amount of contribution (\$) <b>48.16</b>	8 In-kind contribution description (if applicable) <b>Badges</b>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>1-24-14</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>SIDNEY S. MILLSPAUGH</b> Contributor address; City; State; Zip Code <b>901 WEST 9th Street, Suite 210 AUSTIN, TX. 78703</b>	Amount of contribution (\$) <b>250.00</b>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>1-30-14</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>TERI NUNLEY</b> Contributor address; City; State; Zip Code <b>132 DAK VIEW DRIVE BOERNE, TX. 78006</b>	Amount of contribution (\$) <b>500.00</b>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>2-3-14</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>CRAIG JACKSON</b> Contributor address; City; State; Zip Code <b>225 DAK KNOLL CIRCLE BOERNE, TX. 78006</b>	Amount of contribution (\$) <b>97.43</b>	In-kind contribution description (if applicable) <b>MAGNETIC CAR SIGNS</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>2-5-14</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>JOE M. DAVIS</b> Contributor address; City; State; Zip Code <b>245 COLD RIVER BOERNE, TX. 78006</b>	Amount of contribution (\$) <b>500.00</b>	In-kind contribution description (if applicable)
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.

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <b>SUSAN JACKSON</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>2-7-14</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>Shirley Stehling</b> Contributor address; City; State; Zip Code <b>26 LITTLE JOSHUA CREEK Rd COMFORT, TX. 78013</b>	7 Amount of contribution (\$) <b>138.00</b> <small>(If travel outside of Texas, complete Schedule T)</small>	8 In-kind contribution description (if applicable) <b>ENDORSEMENT Ad Hill Country WEEKLY</b>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>2-10-14</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>Shirley Stehling</b> Contributor address; City; State; Zip Code <b>26 LITTLE JOSHUA CREEK Rd. COMFORT, TX. 78013</b>	Amount of contribution (\$) <b>137.17</b> <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable) <b>ENDORSEMENT AD COMFORT NEWS</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>2-10-14</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>Shirley Stehling</b> Contributor address; City; State; Zip Code <b>26 LITTLE JOSHUA CREEK Rd. COMFORT, TX. 78013</b>	Amount of contribution (\$) <b>200.00</b> <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable) <b>ENDORSEMENT AD BOERNE STAR</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>2-12-14</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>William A. Braatt</b> Contributor address; City; State; Zip Code <b>102 Cibolo BASIN DRIVE BOERNE, TX. 78006</b>	Amount of contribution (\$) <b>100.00</b> <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>2-21-14</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>CHAD M. UPHAM</b> Contributor address; City; State; Zip Code <b>1580 S. MAIN ST., STE. 200 BOERNE, TX. 78006</b>	Amount of contribution (\$) <b>300.00</b> <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

*SUSAN JACKSON*

3 ACCOUNT # (Ethics Commission Filers)

4 Date

*2-18-14*

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)

*TERI NUNLEY*

Contributor address; City; State; Zip Code

*132 OAK VIEW DRIVE  
BOERNE, TX 78006*

7 Amount of contribution (\$)

*100.00*

8 In-kind contribution description (if applicable)

*Hosted MEET AND GREET PARTY (FOOD + DRINK EXPENSE)*

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

*2-18-14*

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)

*RON CISNEROS*

Contributor address; City; State; Zip Code

*13 UPPER BALCONES Rd.  
BOERNE, TX 78006*

Amount of contribution (\$)

*160.00*

In-kind contribution description (if applicable)

*Hosted MEET AND GREET PARTY (FOOD AND DRINK EXPENSE)*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*2-18-14*

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)

*ROBERT CISNEROS*

Contributor address; City; State; Zip Code

*13 UPPER BALCONES Rd.  
BOERNE, TX 78006*

Amount of contribution (\$)

*30.00*

In-kind contribution description (if applicable)

*HOSTED MEET AND GREET PARTY (DRINK EXPENSE)*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(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.

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <b>1</b>		2 FILER NAME <b>SUSAN JACKSON</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>1-24-14</b>		5 Payee name <b>CIRCLE SIGNS</b>			
6 Amount (\$) <b>318.26</b>		7 Payee address; City; State; Zip Code <b>113 S. PLANT AVE. G BDERNE, TX. 78006</b>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <b>PRINTING EXPENSE</b>		(b) Description (If travel outside of Texas, complete Schedule T) <b>3 X 3 COLOR SIGNS</b>	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>1-31-14</b>		Payee name <b>SUSAN JACKSON</b>			
Amount (\$) <b>1,615.63</b>		Payee address; City; State; Zip Code <b>225 DAK KNOLL CIRCLE BDERNE, TX. 78006</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>REIMBURSEMENT</b>		Description (If travel outside of Texas, complete Schedule T) <b>4 x 8 + gARD SIGNS PAID BY PERSONAL CREDIT CARD ON 1-7-14</b>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>2-18-14</b>		Payee name <b>BDERNE PRINTING</b>			
Amount (\$) <b>188.36</b>		Payee address; City; State; Zip Code <b>904 E. BIANCO RD. BDERNE, TX. 78006</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>PRINTING EXPENSE</b>		Description (If travel outside of Texas, complete Schedule T) <b>COLOR FLYERS/HANDOUTS</b>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>2-20-14</b>		Payee name <b>BDERNE STAR</b>			
Amount (\$) <b>450.00</b>		Payee address; City; State; Zip Code <b>941 N. School STREET BOERNE, TX. 78006</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>ADVERTISING EXPENSE</b>		Description (If travel outside of Texas, complete Schedule T) <b>3 - 3x4 Ads</b>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: <b>1</b>	2 FILER NAME <b>SUSAN JACKSON</b>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <b>2-10-14</b>	5 Payee name <b>COMFORT NEWS</b>	
6 Amount (\$) <b>345.00</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <b>P.O. BOX 218 COMFORT, TX. 78013</b>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <b>ADVERTISING EXPENSE</b>	(b) Description (If travel outside of Texas, complete Schedule T) <b>FRONT PAGE COLOR BANNER ACROSS BOTTOM</b>
Date <b>2-17-14</b>	Payee name <b>COMFORT NEWS</b>	
Amount (\$) <b>208.66</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <b>P.O. BOX 218 COMFORT, TX. 78013</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>ADVERTISING EXPENSE</b>	Description (If travel outside of Texas, complete Schedule T) <b>2-3x4 Ads</b>
Date <b>2-12-14</b>	Payee name <b>BOERNE STAR</b>	
Amount (\$) <b>100.00</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <b>941 N. SCHOOL STREET BOERNE, TX. 78006</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>ADVERTISING EXPENSE</b>	Description (If travel outside of Texas, complete Schedule T) <b>3x4 Ad</b>
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<input type="checkbox"/> Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)

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