

# 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: <div style="text-align: right; font-size: 2em; margin-top: 5px;">3</div>														
3 CANDIDATE / OFFICEHOLDER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; font-size: 8px;">MS / MRS / MR</td> <td style="width:30%; font-size: 8px;">FIRST</td> <td style="width:10%; font-size: 8px;">MI</td> </tr> <tr> <td></td> <td style="text-align: center; font-size: 1.2em;">Rockie</td> <td></td> </tr> <tr> <td style="font-size: 8px;">NICKNAME</td> <td style="text-align: center; font-size: 1.2em;">Gilley</td> <td style="font-size: 8px;">SUFFIX</td> </tr> </table>	MS / MRS / MR	FIRST	MI		Rockie		NICKNAME	Gilley	SUFFIX	<div style="text-align: center; border: 1px solid black; padding: 5px; font-weight: bold; font-size: 1.2em;">RECEIVED</div> <p style="text-align: center; color: red; font-weight: bold;">JUL 16 2018</p> <p style="text-align: center; font-weight: bold;">BY: <u>K. Roberson</u></p>						
MS / MRS / MR	FIRST	MI															
	Rockie																
NICKNAME	Gilley	SUFFIX															
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="font-size: 8px;">ADDRESS / PO BOX;</td> <td style="font-size: 8px;">APT / SUITE #;</td> <td style="font-size: 8px;">CITY;</td> <td style="font-size: 8px;">STATE;</td> <td style="font-size: 8px;">ZIP CODE</td> </tr> <tr> <td colspan="5" style="text-align: center; background-color: black; height: 40px;">[REDACTED]</td> </tr> </table>	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	[REDACTED]					Date Received					
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[REDACTED]																	
5 CANDIDATE / OFFICEHOLDER PHONE	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="font-size: 8px;">AREA CODE</td> <td style="font-size: 8px;">PHONE NUMBER</td> <td style="font-size: 8px;">EXTENSION</td> </tr> <tr> <td colspan="3" style="text-align: center; background-color: black; height: 30px;">[REDACTED]</td> </tr> </table>	AREA CODE	PHONE NUMBER	EXTENSION	[REDACTED]			Date Hand-delivered or Date Postmarked									
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[REDACTED]																	
6 CAMPAIGN TREASURER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; font-size: 8px;">MS / MRS / MR</td> <td style="width:30%; font-size: 8px;">FIRST</td> <td style="width:10%; font-size: 8px;">MI</td> </tr> <tr> <td></td> <td style="text-align: center; font-size: 1.2em;">Richard</td> <td></td> </tr> <tr> <td style="font-size: 8px;">NICKNAME</td> <td style="text-align: center; font-size: 1.2em;">Weber</td> <td style="font-size: 8px;">SUFFIX</td> </tr> </table>	MS / MRS / MR	FIRST	MI		Richard		NICKNAME	Weber	SUFFIX	Receipt #	Amount \$					
MS / MRS / MR	FIRST	MI															
	Richard																
NICKNAME	Weber	SUFFIX															
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="font-size: 8px;">STREET ADDRESS (NO PO BOX PLEASE);</td> <td style="font-size: 8px;">APT / SUITE #;</td> <td style="font-size: 8px;">CITY;</td> <td style="font-size: 8px;">STATE;</td> <td style="font-size: 8px;">ZIP CODE</td> </tr> <tr> <td colspan="5" style="text-align: center; background-color: black; height: 40px;">[REDACTED]</td> </tr> </table>	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE;	ZIP CODE	[REDACTED]					Date Processed					
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9 REPORT TYPE	<table style="width:100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</td> </tr> <tr> <td><input checked="" type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded \$500 limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table>			<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)						
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10 PERIOD COVERED	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="font-size: 8px;">Month</td> <td style="font-size: 8px;">Day</td> <td style="font-size: 8px;">Year</td> <td style="font-size: 8px;">THROUGH</td> <td style="font-size: 8px;">Month</td> <td style="font-size: 8px;">Day</td> <td style="font-size: 8px;">Year</td> </tr> <tr> <td style="text-align: center;">01</td> <td style="text-align: center;">/ 01</td> <td style="text-align: center;">/ 2018</td> <td></td> <td style="text-align: center;">06</td> <td style="text-align: center;">/ 30</td> <td style="text-align: center;">/ 2018</td> </tr> </table>			Month	Day	Year	THROUGH	Month	Day	Year	01	/ 01	/ 2018		06	/ 30	/ 2018
Month	Day	Year	THROUGH	Month	Day	Year											
01	/ 01	/ 2018		06	/ 30	/ 2018											
11 ELECTION	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="font-size: 8px;">ELECTION DATE</td> <td style="font-size: 8px;">ELECTION TYPE</td> </tr> <tr> <td style="font-size: 8px;">Month    Day    Year</td> <td> <input type="checkbox"/> Primary    <input type="checkbox"/> Runoff    <input type="checkbox"/> Other Description  <input type="checkbox"/> General    <input type="checkbox"/> Special                 </td> </tr> <tr> <td style="text-align: center;">/    /    /</td> <td></td> </tr> </table>	ELECTION DATE	ELECTION TYPE	Month    Day    Year	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	/    /    /											
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/    /    /																	
12 OFFICE	OFFICE HELD (if any) Kennedale City Council - Place 1	13 OFFICE SOUGHT (if known)															

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME

Rockie Gilley

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.

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

SPECIFIC

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

\$ 10-

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

\$ 10-

EXPENDITURE  
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$ 10-

4. TOTAL POLITICAL EXPENDITURES

\$ 10-

CONTRIBUTION  
BALANCE

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

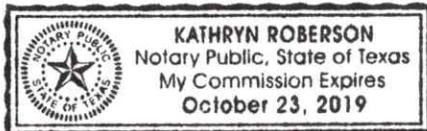
\$ 429.47

OUTSTANDING  
LOAN TOTALS

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

\$ 660.00

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.

*[Handwritten Signature]*

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Rockie Gilley, this the 16 day of July, 20 16, to certify which, witness my hand and seal of office.

*[Handwritten Signature]*

Signature of officer administering oath

*Kathryn Roberson*

Printed name of officer administering oath

*Deputy City Secretary*

Title of officer administering oath

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME

Rockie Gilley

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	<input type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$
5.	<input type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
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 type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
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	\$