## APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA PG<sub>1</sub>

	See	CTA Instruction Guide for detailed instructions.	1 Total pages filed:
2	CANDIDATE	MS / MRS MR FIRST MI	OFFICE USE ONLY
	NAME	NICKNAME LONNIE L. SUFFIX	Acct. #  DateRéceigne Financia Reporter
		HINZE	COLORA
3	CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX, APT / SUITE #; CITY, STATE, ZIP CODE 607 E. MAIN WEIMAR TX. 78962	ZOII DEC -5 PM 3: 40
_	CANDIDATE	AREA CODE PHONE NUMBER EXTENSION	Date Hand-delivered or Postmarked
	PHONE	(979) 725-6211	Date Processed
5	OFFICE HELD (if any)	CONSTABLE PCT. 2	Date Imaged
6	OFFICE	111323 1311 2	L
	SOUGHT (if known)	CONSTABLE PCT. 2	
7	CAMPAIGN TREASURER NAME	RENEE L. HINZE	LAST SUFFIX
	CAMPAIGN TREASURER STREET ADDRESS residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT/SUITE #: CITY; STATE:	78962
9	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION  (979) 725-6211	
10	CANDIDATE SIGNATURE	I am aware of the Nepotism Law, Chapter 573 of the Te	exas Government Code.
		I am aware of my responsibility to file timely reports as the Election Code.	s required by title 15 of
		I am aware of the restrictions in title 15 of the Election C from corporations and labor organizations.	Code on contributions
		Formie L. Hings Signature of Candidate	2- 5- 2011 Date Signed
		GO TO PAGE 2	

### **CANDIDATE / OFFICEHOLDER** CAMPAIGN FINANCE REPORT

The C/OH instruction G	duide explains how to complete this form.  1 ACCOUNT# (Ethics Commission filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER	MS / MRS MR FIRST MI	OFFICE USE ONLY
NAME	LONNIE L.  NICKNAME LAST SUFFIX  HINZE	Date Received COLLING
4 CANDIDATE/	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE; ZIP CODE	RAL
OFFICEHOLDER MAILING ADDRESS Change of Address	607 E. MAIN WEIMAR TX 78962	Date Hand-deliverager Date Postmaribes
5 CANDIDATE/	AREA CODE PHONE NUMBER EXTENSION	TEK TORI
OFFICEHOLDER PHONE	(979) 725-6211	Receipt # Arent
6 CAMPAIGN TREASURER NAME	MS MR FIRST MI L.	Date Imaged
IAPWIL	NICKNAME LAST SUFFIX HINZE	
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE;  607 E. MAIN WEIMAR TX	78962
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (979) 725-6211	
9 REPORTTYPE	January 15 30th day before election Runoff  July 15 8th day before election Excaeded \$500 limit	15th day after campaign treasurer appointment (officeholder only)  Final report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year THROUGH 1 / 15	/2012
11 ELECTION	Honth Day Year ELECTION TYPE  4/3/2012 Primary Runoff	General Special
12 OFFICE	OFFICE HELD (if any)  CONSTABLE PCT. 2  13 OFFICE SOUGHT (if know CONSTABLE)	
14 NOTICE OF DIRECT CAMPAIGN	Direct campaign expenditures are campaign expenditures made by others without Candidates are required to disclose this information only if they receive notification of the control o	the candidate's prior consent or approval.  If the direct campaign expenditure.
EXPENDITURE BY OTHER INDIVIDUALS	Name	
	Address / PO Box. Apt. / Suite #; City; State, Zip Code	
additional pages		
	GO TO PAGE 2	

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

P.O. Box 12070

14 C/OH NAME	S SC 1		5 ACCOUN	T # (Ethics Commission Filers)	
LONNIE	L. H1	NZE			
16 NOTICE FROM POLITICAL COMMITTEE(S)	CANDIDATE / OFFICE	CE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MAD HOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CAND ES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF	IDATE'S OR OF	FICEHOLDER'S KNOWLEDGE OR	
	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
	SPECIFIC	COMMITTEE ADDRESS			
		COMMITTEE CAMPAIGN TREASURER NAME			
additional pages					
		COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 CONTRIBUTION TOTALS		   POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAT   ES. LOANS, OR GUARANTEES OF LOANS). UNLESS ITEMIZE		0	
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0	
EXPENDITURE TOTALS	3. TOTAL F	POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEM	MIZED \$	6	
	4. TOTAL	POLITICAL EXPENDITURES	\$	37500	
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DORTING PERIOD	SAY \$	0	
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T AY OF THE REPORTING PERIOD	THE \$	D	
18 AFFIDAVIT					
		I swear, or affirm, under penalty of is true and correct and includes all me under Title 15, Election Code.			
Signature of Candidate or Officeholder					
Sworn to and sub		me, by the said	W75	, this the	
i oth		0 100	ny hand s		
day	of services	to certify which, witness r	J-Day	nty Clerk	
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath					

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

#### **POLITICAL EXPENDITURES**

SCHEDULE F

	Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense The Instruction Guid	Salaries/Wages/C Solicitation/Fundra Travel In District Travel Out Of Dis Office Overhead/I e explains how to	aising Expense trict Rental Expense	Contributions/Donation Candidate/Officeho OTHER (enter a category)	nent & Related Expense ns Made By older/Political Committee
1	Total pages Schedule F:	2 FILER NAME		•		Ethics Commission Filers)
_			HINZE			
4	Date	COLORADO Co.	REPUBL	ICAN	PARTY	
6	Amount (\$)		ate; Zip Code			
,	375.00					
8	PURPOSE	(a) Category (See categories listed at the to	p of this schedule)	(b) Description	(If travel outside of Texas, c	omplete Schedule T)
	OF EXPENDITURE	FILING FEE	•	1		
	Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name		Office sough	nt	Office held
	Date	Payee name				
,	Amount (\$)	Payee address; City; S	tate; Zip Code			
	PURPOSE OF EXPENDITURE	Category (See categories listed at the to	p of this schedule)	Description	(if travel outside of Texas, c	omplete Schedula T)
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name		Office sough	nt	Office held
	Date	Payee name				
•	Amount (\$)	Payee address; City; St	ate; Zip Code			
	PURPOSE OF EXPENDITURE	Category (See calegories listed at the to	p of this schedule)	Description	(If travel outside of Texas, c	omplete Schedule T)
	Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name		Office sough	nt	Office held
	Date	Payee name				
	Amount (\$)	Payee address; City; St	ate; Zip Code			
	PURPOSE OF EXPENDITURE	Category (See categories listed at the to	p of this schedule)	Description	(If travel outside of Texas, o	omplete Schedule T)
	Complete ONLY if direct expenditure to benefit C/	Candidate / Officeholder name OH		Office sough	nt	Office held
		ATTACH ADDITIONAL O	COPIES OF THIS	SCHEDULE AS	NEEDED	

### APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

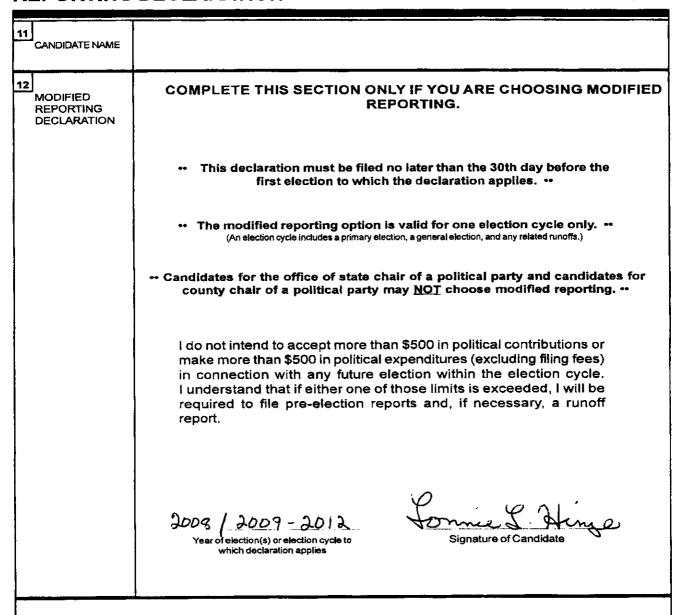
### FORM CTA PG 1

Se	ee CTA Instruction	1 Total pages filed:	
2		MS/MR\$TMR) FIRST MI	OFFICE USE ONLY
	CANDIDATE NAME	LONNIE L.	Acct. #
		NICKNAME LAST SUFFIX	Date Received
		HINZE	
3		ADDRESS / PO BOX, APT / SUITE #, CITY; STATE, ZIP CODE	PROBLEM PROBLEMS
	CANDIDATE MAILING	607 E. MAIN	
	ADDRESS	WEIMAR TX 78962	Z007 DEC 26 AH II: 19
			EGST DE CO MITTE 13
4		AREA CODE PHONE NUMBER EXTENSION	HOPM CULCKARDO CO. CLERK
	CANDIDATE PHONE	(979) 725-6211	Date Processed
		(111) 123 6411	Date Processed
5	OFFICE HELD	COLICE AD F POT 3	Date Imaged
	(if any)	CONSTABLE PCT 2	
6	OFFICE SOUGHT	CONSTABLE PCT 2	
	(if known)	MEMBERNE FIRST MI NICKNAME	LAST SUFFIX
7	CAMPAIGN		300000000000000000000000000000000000000
	TREASURER NAME	RENEE L. HI	NZE
		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE;	ZIP CODE
8	CAMPAIGN		
	TREASURER STREET	607 E. MAIN WEIMAR TX.	18965
	ADDRESS (Residence or business)	1	100
		AREA CODE PHONE NUMBER EXTENSION	
9	CAMPAIGN		
	TREASURER PHONE	(979) 725-6211	
40			
10	CANDIDATE	I am aware of the Nepotism Law, Chapter 573 of the Tex	as Government Code.
	SIGNATURE	20 20 20 20 20 20 20 20 20 20 20 20 20 2	11 00 17
		I am aware of my responsibility to file timely reports as the Election Code.	required by title 15 of
		I am aware of the restrictions in title 15 of the Election Co from corporations and labor organizations.	ode on contributions
		V2	,
		Jonne L' Hime	26/07
		Signature of Candidate	Date Signed
		GO TO PAGE 2	

### **CANDIDATE MODIFIED** REPORTING DECLARATION

P.O. Box 12070

FORM CTA PG 2



This appointment is effective on the date it is filed with the appropriate filing authority.

A2-2PM, Prescribed by Secretary of State, Sections 141.031, 172.021, Texas Election Code, 9/01
All information is required to be provided unless indicated as optional. (Se requires toda la Information, a menos que have algume indicación que no es obligatoria.)

APPLICATION FOR A PLACE ON THE DEMOCRATIC PARTY GENERAL PRIMARY BALLOT (APLICACION PARA UN LUGAR EN LA BOLETA DE LA PRIMARIA GENERAL DEL PARTIDO)					
TO: State/County Chair (A: Nombre o Tinulo del Propin I request that my name be placed on the above-nam (Solicito que mi nombre esté puesto en la arriba nombrada	o Oficial del Partido ned official prima	ry balint as	a candidate for	nomination to the office i	ndicated below.
OFFICE SOUGHT (PUESTO OFICIAL SOLICITADO) Include any place number or other distinguishing number. (Incluse cualquier número de bugar u otro número que hace al puesto oficial diferente a otros.)			INDICATE F	ULL OR UNEXPIRED T TERMINO DEL PUESTO GI	
CONSTABLE PCT	2		FULL	_ TERM	
FULL NAME (First, Middle, Last) (NOMBRE COMPLETO) (Nombre de Pila, Segunda Nombre	t, Apeilido)				O APPEAR ON THE BALLOT APAREZCA SOBRE LA BOLETA)
YOUN'E TANN H	NZE		Lo Po	VIE L. H	INZE
PERMANENT RESIDENCE ADDRESS (Street address and apartment number. If none, describe location of residence. Do not include "O. Box or Rural Rt.) (DIRECCION DE RESIDENCIA PERMANENTE: Calle y vero de Departamento: si no tiene, describa lo localidad de su residencia. No incluye coja postul o rata rural.)		(DIRECCION PO	DDRESS (If different i PSTAL (Si es diferente a su di	rom residence address) rección de residencia)	
GOTE MAIN WEIT		7896		T . TD	;
(CIUDAD), (ESTADO)	ZIP (ZONA POST.	4L)	CITY,S (CIUDAD).		ZIP GONA POSTAL)
OCCUPATION (EMPLEO)	DATE OF BII		COUNTY OF CONDADO DE	RESIDENCE RESIDENCIA	
CONSTABLE	08-03	<u>51</u>	COLORADO		
TELEPHONE NUMBER (Include area code) (COMMERO DE TELEFONO—Incluya el codigo de la area) OFFICE: 979-725-883 OFFICE: 979-725-62		0	Length of Continuous Residence as of Date Application Sworn Tienpo on que ha Raidide es un Sole Lugar en la Facha un que Pranti Auranemo Sobre la Solicinal  INSTATE IN COUNTY IN DISTRICT OR PRECINCT		
<b>\</b>	•	ÆN.	EL ESTADO)	(EN EL CONDADO)	(EN EL DISTRITO O PRECINTO)
HOME: 979-725-6211		2 3 3	yr(s) mos (s) (mes(es))	32 yr(s) 2 mas (eño(s) (mes(es))	32 yr(s) 2 mos (año(s) (mas(es))
Before me, the undersigned authority, on this duly sworn, upon oath says: "I, LONDIE candidate for the office of CONSTABLE States and of the State of Texas. I am a clitizen not been declared mentally incompetent as deternot been pardoned or had my full rights of citizen.	of the United S mined by final tenship restored	, swea: tates eligit judgment by other	r that I will sup lie to hold such of a court, nor official action. I	oport and defend the Constitution of the Constitution of the Constitution of the neport of the nepor	constitution and laws of the United fution and laws of this state. I have victed of a felony for which I have lism law, Chapter 573, Government
using a nickname as part of your name to at that my nickname does not constitute a slogan no known by this nickname for at least three yea	r does it indica rs prior to this	te a politic election.	al, economic, so	cial, or religious view or	lowing statements: I further swear refillation. I have been commonly
I further swear that the foregoing statements i (Anne mi, la abajo firmado autoridad, apareció en persona le					
"Yo dei	condado de			Teres siende	condidate none at assess affairt de
Unidos elegible para ocupar sal puesto oficial bajo la Constia corse, ni ha sido probado cuipable finalmente de una felonia pa acción oficial. Yo tengo conocimiento de la ley sobre el nepol	ución y las leyes de or la cual no he sido	este Estado. perdonado e	No ke sido declarad Por la cual no se m	n inconoriendo de la mente ca	tado de Tezes. Soy ciudadano de los Estados mo determinado por la decisión final de una sis derechos de ciudadanía por medio de otra
Para poder incluir un apodo como parte de su nombre comple anos. Ademas, juro que el apodo no es un lema político ni u	to el la papeleta, Ud	debera firm	ar la signiente consta	ncia: Ademas, juro que se mo s, economicas, sociales, o rell	ha conocido por este apodo por mas de tres eiosas.
Además juro que las pracedentes declaraciones que incluyo e	n mi solicitud son w	erdederas y			
:	SIGNATURE OF CANDIDATE (FIRMA DEL CANDIDATO)				
		s the	day of	Die .	8003
Signature of pfliefr administering oath	och "		otary +	ublic instering oath	MARY JAME ABENITZSCH MY CONTRESCO PURMES OCTOBER 07, 2004

TOBE COMPLETED BY CHAIR:  THIS APPLICATION IS ACCOMPANIED BY THE REQUIRED FILING FEE, PAID CHECK OR A PETITION IN LIEU OF FILING FEE (INCLUYO CANDIDATO, PAGADO POR CHEQUE DINERO DE CONTADO LE VEZ DEL PAGO REQUERIDO PARA REGISTRARSE COMO CANDIDATO  This document and 5 375.	RANZA POSTAL	CHEQUE CAJERO O U	GISTRARSE COMO INA PETICION EN
	12/3i/03	Polled Bus. Signature of chair	received.

### INSTRUCTIONS (INSTRUCCIONES)

An application to have the name of a candidate other than a candidate for the office of precinct chair placed on the ballot for any election may not be filed earlier than December 3, before the primary election. An application to have the name of a candidate for the office of precinct chair placed on the ballot may not be filed earlier than October 4. An application filed before that day is void. The filing deadline is January 2, of the general election year, at 6 p.m. Tex. Elec. Code Ann. §172.023.

If the deadline for filing falls on a Saturday, Sunday, or legal state holiday, the deadline is extended to the next regular business day.

The application shall be filed with the state chair for all statewide offices and all district offices which are filled by the choice of voters residing in more than one county. The application shall be filed with the county chair for all county and precinct offices and all district offices which are filled by the choice of voters residing in only one county or part of one county. The application may also be filed with the secretary of the county executive committee, if there is one. Tex. Elec. Code Ann. §172.022.

(Una aplicación para que el nombre de un candidato no siendo candidato para el puesto oficial de presidente del precinto aparezca en la boleta para cualquier elección no deberá registrarse antes de el 3 de diciembre de antes de la elección primaria. Una aplicación para que el nombre de un candidato para el puesto oficial de presidente de precinto aparezca en la boleta no podrá registrarse antes de el 4 de octobre. Una aplicación registrada antes de ese día se declarará invalida. El último día es le 2 de enero del año de la elección general a las 6 de la tarde. Tex. Elec. Code Ann. §172.023.)

(Si el último día para registrarse cae en un sabado, domingo, o un día oficial de vacación estatal, se extiende la registración al siguiente día laborable.)

(En el caso de todos puestos oficiales representando todo el Estado y todos puestos oficiales del distrito que se ocupan por la seleción de votantes que residen en más de un condado, la aplicación se registrará con el presidente del Estado. En el caso de todos puestos oficiales del condado y del precinto que se ocupan por la selección de votantes que residen en solamente un condado o parte de un condado, la aplicación se registrará con el presidente del condado. La solicitud también podrá presentarse al secretario del comité ejecutivo del condado, si aplicable. Tex. Elec. Code Ann. §172.022.)

#### **FOOTNOTE**

<sup>1</sup>All oaths, affidavits, or affirmations made within this State may be administered and a certificate of the fact given by a judge, clerk, or commissioner of any court of record; a notary public; a justice of the peace; and the Secretary of State of Texas.

#### NOTA AL PIE DE LA PAGINA

'Todo juramento, testimonio o afirmación hecho dentro de este Estado se podrá administrar y se podrá dar un certificado del hecho por un juez, escribano, o comisionado de alguna corte de registro; un notario público; un juez de paz; el Secretario del Estado de Texas.

# **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT**

# FORM C/OH

5711117410	THANGE REPORT		COVER SHEET PG 1
The C/OH INSTRUCTION this form.	N Guide explains how to complete	ACCOUNT# (Ethics Commission filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST	MI	OFFICE USE ONLY
NAME	MR LOUDIE NICKNAME LAST HINZE	SUFFIX	Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX: APT / SUITE #: CITY 607 E. MAIN WE	STATE: ZIP CODE  IMAR TX 78962	Date Hand-delivered or Date Postmarked
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (979) 725-6211	EXTENSION	Receipt # Amount
6 CAMPAIGN	M5/MRS/MR FIRST		Date Processed
TREASURER NAME	mrs renee	L	Date imaged
TVAIVE	HINZE	SUFFIX	
7 CAMPAIGN TREASURER ADDRESS (Residence or business)			ZIP CODE 78962
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (979) 725-6211	EXTENSION	
9 REPORTTYPE	January 15 30th day before election  July 15 8th day before election	Runoff  Exceeded \$500 limit	15th day after campaign treasurer appointment (officeholder only)  Final report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year THROUG	Month Day	Year / 04
11 ELECTION	Month Year ELECTION DATE  Year  Year  Primary	Runoff 🔀	General Special
12 OFFICE	CONSTABLE PLT 3	13 OFFICE SOUGHT (If known CONSTAB	_
14 NOTICE OF DIRECT CAMPAIGN	<ul> <li>Direct campaign expenditures are campaign expenditures</li> <li>Candidates are required to disclose this information only</li> </ul>	tures made by others without the cand r if they receive notification of the direc	ildate's prior consent or approval. cl campaign expenditure.
EXPENDITURE BY OTHER INDIVIDUALS	Name		
	Address / PO Box; Apt. / Suite #: City; State; Zip	Code	· · · · · · · · · · · · · · · · · · ·
additional pages			
	GO TO PA	AGE 2	

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

45.010111111				
	DNNIE	L. HINZE	16ACCOL	JNT # (Ethics Commission filers)
17 NOTICE FROM POLITICAL COMMITTEE(S)	may have been mad	otice of political expenditures by political committees to support the cand be without the candidate's or officeholder's knowledge or consent. Candidate if they receive notice of such expenditures.	idate / officeho ates and office	older. These expenditures sholders are required to report
COMMITTEE(G)	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC			
additional pages		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
18 CONTRIBUTION TOTALS	1. TOTAL PLEDGE	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0
EXPENDITURE TOTALS	3. TOTAL F	POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZE	\$	0
	4. TOTAL	POLITICAL EXPENDITURES	\$	0
CONTRIBUTION BALANCE	5. TOTAL F	POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DA DRTING PERIOD	\$	0
OUTSTANDING LOANTOTALS	6. TOTAL F	RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF TH Y OF THE REPORTING PERIOD	\$	0
19 AFFIDAVIT	FILED_	swear, or affirm, under penalty of p	erjury, that t	the accompanying report
<b>A</b>	JUL	2 7 2004 is true and correct and includes all in me under Title 15, Election Code.	iformation re	equired to be reported by
5		ek, County Clerk County, Texas Sonnie L. H	(no)	,
AFFIX NOTARY STAME	7 SEAL ABOVE	Signature of Candid	date or Office	eholder
Sworn to and subscrib			_, this the	37th day
of Court of Participation of Participati	to cert	ify which, witness my hand and seal of office.	'S)	المادمار
Signature of officer add	ministering oath	Printed name of officer administering oath Titl	e of officer a	dministering oath

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

15 C/OH NAME	E L. H	INZE	16ACCOUNT	# (Ethics Commission filer
17 NOTICE FROM POLITICAL COMMITTEE(S)  This box is for notice of political expenditures by political committees to support the candidate may have been made without the candidate's or officeholder's knowledge or consent. Candidates				. These expenditures ers are required to rep
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC			
additional pages		COMMITTEE CAMPAIGN TREASURER NAME		
-		COMMITTEE CAMPAIGN TREASURER ADDRESS		
18 CONTRIBUTION TOTALS	1. TOTAL PLEDG	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	
		POLITICAL CONTRIBUTIONS R THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0
EXPENDITURE TOTALS	3. TOTAL	POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZE	\$	0
	4. TOTAL	POLITICAL EXPENDITURES	\$	0
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DA ORTING PERIOD	\$	0
OUTSTANDING LOANTOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF TH AY OF THE REPORTING PERIOD	\$	0
10	Darlene Ho Colorad	I swear, or affirm, under penalty of positive and correct and includes all in me under Title 15, Election Code.  27 2004  Cayek, County Clerk  Co County, Texas  Signature of Candidate  The said Sign	tenze	red to be reported

#### (512)463-5800 1-800-325-8506 **CANDIDATE / OFFICEHOLDER** FORM C/OH **CAMPAIGN FINANCE REPORT** COVER SHEET PG 1 1 ACCOUNT# The C/OH INSTRUCTION GUIDE explains how to complete 2 Total pages filed: (Ethics Commission filers) this form. CANDIDATE / MS/MRS/MR FIRST Mi OFFICE USE ONLY OFFICEHOLDER NAME MR JONNIE Date Received NICKNAME SUFFIX HINZE ADDRESS / PO BOX; 4 CANDIDATE/ APT / SUITE #; CITY: STATE: ZIP CODE OFFICEHOLDER GOT E. MAIN WEIMAR TX 78962 MAILING **ADDRESS** Date Hand-delivered or Date Postmarked Change of Address AREA CODE 5 CANDIDATE/ PHONE NUMBER EXTENSION **OFFICEHOLDER** (979)725-6211 PHONE Receipt # Amount CAMPAIGN MS/MRS/MR FIRST М Date Processed TREASURER RENEE MRS Date Imaged NAME NICKNAME SUFFIX HINZE STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; 7 CAMPAIGN CITY: STATE: ZIP CODE **TREASURER** 607 E. MAIN WEIMAR 78962 **ADDRESS** (Residence or business) 8 CAMPAIGN AREA CODE PHONE NUMBER EXTENSION **TREASURER** (919) 125-6211PHONE 9 REPORTTYPE January 15 30th day before election 15th day after campaign treasurer appointment (officeholder only) July 15 8th day before election Exceeded \$500 limit Final report (Attach C/OH - FR) 10 PERIOD COVERED **THROUGH** 1/5/04 ELECTION DATE 11 ELECTION ELECTION TYPE Month Primary . Runoff General Special OFFICE HELD (if any) 12 OFFICE 13 OFFICE SOUGHT (if known) CONSTABLE PCT 2 CONSTABLE 14 NOTICE Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. OF DIRECT Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. CAMPAIGN EXPENDITURE **BY OTHER** INDIVIDUALS Address / PO Box; Apt. / Suite #; City; State: Zip Code additional pages **GO TO PAGE 2**

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

			OOVER	OHEET PG 2
15 C/OH NAME LUNNIE	L. Hi	N2E	16ACCOUN	Γ# (Ethics Commission filers)
17 NOTICE FROM POLITICAL COMMITTEE(S)	may have been mad	otice of political expenditures by political committees to support the candidate without the candidate's or officeholder's knowledge or consent. Candidate if they receive notice of such expenditures.	date / officeholde tes and officehol	er. These expenditures ders are required to report
COMMITTEE(3)	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL SPECIFIC	COMMITTEE ADDRESS		
	U di Edillo	COMMITTEE CAMPAIGN TREASURER NAME		
additional pages				
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
18 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	D
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	D
EXPENDITURE TOTALS	3. TOTAL F	POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZE	\$	0
	4. TOTAL	POLITICAL EXPENDITURES	\$	D
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DA ORTING PERIOD	\$	D
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF TH AY OF THE REPORTING PERIOD	\$	6
19 AFFIX NOTARY CTAM	Darlene I	is true and correct and includes all in me under Title 15, Election Code.  Hayek, County Clerkardo County, Texas  Signature of Candi	nformation requ	uired to be reported by
Sworn to and subscril	. 1		_, this the _	onth day
of Signature of officer ac	erkine	tify which, witness my hand and seal of office.  Printed name of officer administering oath  Tit	le of officer ad	where Clerk

# **CANDIDATE / OFFICEHOLDER** CAMPAIGN FINANCE REPORT

# FORM C/OH

		COVER SHEET PG 1
The C/OH INSTRUCTE	ON GUIDE explains how to complete 1 ACCOUNT# (Ethics Commission filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST MI MR LONNIE L	OFFICE USE ONLY
	NICKNAME LAST SUFFIX HINZE	Date Received
CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE 607 E. MAIN WEIMAR TX 78942	Date Hand-delivered or Date Postmarked
Change of Address		
OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (979) 725-6211	Receipt # Amount
CAMPAIGN TREASURER	MS/MRS/MR FIRST MI MRS RENEE L.	Date Processed
NAME	NICKNAME LAST SUFFIX HINZE	Date Imaged
CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE;	ZIP CODE 78962
CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (979) 725-6211	
REPORTTYPE	January 15 30th day before election Runoff  July 15 8th day before election Exceeded \$500 limit	15th day after campaign treasurer appointment (officeholder only)  Final report (Attach C/OH - FR)
PERIOD COVERED	Month Day Year THROUGH 3/1	Year
ELECTION	Selection DATE   ELECTION TYPE   Selection TYPE   Selecti	General Special
OFFICE	OFFICE HELD (If any)  CONSTABLE PCT 2  CONSTABLE	***
NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS	<ul> <li>Direct campaign expenditures are campaign expenditures made by others without the canc Candidates are required to disclose this information only if they receive notification of the direct</li> </ul> Name	didate's aciar consent or consent
□ additional pages	Address / PO Box: Apt. / Suite #; Crty; State; Zip Code	
	GO TO PAGE 2	

	TE/OFFICEHOLDER N FINANCE REPORT		FORM C/OH COVER SHEET PG 1			
The COOR INSTRUCTION	Guide explains how to complete	1 ACCOUNT# (Ethics Commission filers)	2 Total pages filed:			
3 CARDIDATE/ OFFICEHOLDER NAME	MS/MRS(M) FIRST LONDIE	L .	OFFICE USE ONLY			
NAME	NICKNAME LAST HINZE	SUFFIX	Date Received			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY		Date Hand-delivered or Date Postmarked			
5 CANDIDATE/ OFFICEHOLDER	AREA CODE PHONE NUMBER (919) 125-6211	EXTENSION				
6 CAMPAIGN TREASURER NAME	(919) 125-6211  MS MB / MR RENEE  NICKNAME LAST  HINZE	L <sup>M</sup> I.	Receipt # Amount  Date Processed  Date Imaged			
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE	DEIMAR TX	78962			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (919) 725-6211	EXTENSION				
9 REPORTTYPE	July 15 Sth day before election	Runoff  Exceeded \$500 limit	15th day after campaign treasurer appointment (officeholder only)  Final report (Attach C/OH - FR)			
10 PERIOD COVERED	Month Day Year THROW	GH ID /3	Year / 04			
11 ELECTION	Month Day Year ELECTION TYPE  Month Day Year Primary		General Special			
12 OFFICE	OFFICE MELD (Many)  CONSTABLE PCT 2	13 OFFICE SOUGHT (if known	E PCT 2			
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE	lidate's prior consent or approval. ct campaign expenditure. ••					
BY OTHER INDIVIDUALS	Name					
additional pages	Address / PO Box; Apt. / Suits #; City; State; Zi	p Code				
GO TO PAGE 2						

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

15 C/OH NAME			6ACCOUNT # (Ethics Commission (iters)				
17 NOTICE FROM POLITICAL	• This box is for notice of political expenditures 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 rep this information only if they receive notice of such expenditures.						
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME					
	GENERAL SPECIFIC	COMMITTEE ADDRESS					
☐ additional pages	4440	COMMITTEE CAMPAIGN TREASURER NAME					
: avolutial pages							
		COMMITTEE CAMPAIGN TREASURER ADDRESS					
18 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S. LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0				
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0				
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED \$						
	4. TOTAL	POLITICAL EXPENDITURES	\$ 0				
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY DRTING PERIOD	\$ 0				
OUTSTANDING LOANTOTALS	6. POTAL F	PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD	\$				
19 AFFIDAVIT	DEC	2 0004					
		i swear, or affirm, under penalty of pe is true and correct and includes all inf					
		yek, County Clerkme under Title 15, Election Code.					
	Colorade	County, Texas					
		Jonne d. Her	ate r Officeholder				
OMPRIX NOTARY STAM	P / SEAL ABOVE	•	are a mostroider				
Swosn to and subscrib	bed before me. by	the said LONNIS L. KINZE	this the 20th day				
(A) }	Sworn to and subscribed before me, by the said with the said with the said day of the said seal of office.						
Signature of officer ac	erbina	JEAN PERKING Chit	F Depart Cleak of Officer Hiministering oath				
L			· · · · · · · · · · · · · · · · · · ·				

CANDIDAT	FORM C/OH COVER SHEET PG 1				
The C/OH Instruction this form.	א Guide explains how to complete	1 ACCOUNT# (Ethics Commission filers)	2 Total pages filed:		
3 CANDIDATE/ OFFICEHOLDER	MS/MRS(MR) LOUNIE	MI	OFFICE USE ONLY		
NAME	NICKNAME LAST HINZE	SUFFIX	Date Received		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS /PO BOX; APT/SUITE #: CI	ITY: STATE: ZIPCODE  SIMAR TX 78962	Date Hand-delivered or Date Postmarked		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (979) 725-621(	EXTENSION	Receipt # Amount		
6 CAMPAIGN TREASURER NAME	MS PAR RENEE	SUFFIX	Date Processed  Date Imaged		
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	607 2 . 11111	TE #; CITY; STATE;	ZiP CODE コ 名 う と う		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (979) 725-6211	EXTENSION			
9 REPORTTYPE	January 15 30th day before election  July 15 8th day before election		15th day after campaign treasurer appointment (officeholder only)  Final report (Altach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THRO	UGH 11 / 2	year of		
11 ELECTION	Month Day Year ELECTION TY  Month Day Year  Primary		General Special		
12 OFFICE	OFFICE HELD (If any) CONSTABLE PLT 2	13 OFFICE SOUGHT (IF know	_		
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE	rdidate's prior consent or approval. ect campaign expenditure. •-				
BY OTHER INDIVIDUALS	Nаme Address / PO Box, Apt. / Suite #; City, State;	Zip Code			
additional pages					
	GO TO	PAGE 2			

# **CANDIDATE / OFFICEHOLDER REPORT:**

FORM C/OH

SUPPORT	& TOTAL	.S	COVER SHEET PG 2
15 C/OH NAME			16 ACCOUNT # (Ethics Commission filers)
17 NOTICE FROM POLITICAL	may have been mad	otice of political expenditures by political committees to support the candidate without the candidate's or officeholder's knowledge or consent. Candidate if they receive notice of such expenditures.	ate / officeholder. These expenditures es and officeholders are required to report
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL SPECIFIC	COMMITTEE ADDRESS	
additlenal pages		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
8 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTÉES OF LOANS), UNLESS ITEMIZED	\$ 0
		POLITICAL CONTRIBUTIONS  THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ ()
EXPENDITURE TOTALS	3. TOTAL	\$ 0	
	4. TOTAL	\$	
CONTRIBUTION BALANCE	5. TOTAL I	\$ 0	
OUTSTANDING LOANTOTALS	6. TOTAL	PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE	\$ 0
9 AFFIDAVIT	Qariene I Colord	I swear, or affirm, under penalty of peris true and correct and includes all informe under Title 15, Election Code.  Tayek, County Clerk  ado County, Texas  Signature of Candid	formation required to be reported by
Gwern to and subscrib	-/1	rtify which, witness my hand and seal of office.	this the <b>Squa</b> day

# APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA PG<sub>1</sub>

See CTA Instruction	Guide for detailed instructions.	1 Total pages filed:
366 CIV IIIsti ection		
2	TITLE FIRST MI	OFFICE USE ONLY
	CONSTABLE LONNIE L.	Acct. #
(AAIWC	NICKNAME LAST SUFFIX	Date Received
	HINZE	
<u> </u>	ADDRESS / PO BOX; APT / SUITE #: CITY: STATE: ZIP CODE	
CANDIDATE MAILING	607 E-MAIN WEIMAR TX 78962	· .
ADDRESS	•	e .
4	AREA CODE PHONE NUMBER EXTENSION	HO/PM .
CANDIDATE PHONE	(979) 725-6211	Date Processed
5		Date Imaged
OFFICE HELD	CONSTABLE PCT. 2	
6 OFFICE SOUGHT	CONSTABLE PCT. 2	
(if known)		
7	TITLE FIRST MI NICKNAME	LAST SUFFIX
TREASURER	RENEE L. HI	NZE
NAME	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
8	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: CITY: STATE:	ZIP CODE
CAMPAIGN		700.15
TREASURER ADDRESS	607 E. MAIN WEIMAR TX	18962
(Residence or business)		
	AREA CODE PHONE NUMBER EXTENSION	
CAMPAIGN		
TREASURER PHONE	(979) 725-6211	
10		
NEPOTISM STATEMENT	I am aware of the Nepotism Law, Chapter 573 of the Tex	xas Government Code.
and CANDIDATE	I am aware of my responsibility to file timely reports as	required by Title 15 of
SIGNATURE	the Election Code.	Dalista -
	FILED_	
	P ent	EC 31 2003
	Dormes 3, Honge	Hayek, County Clerk
	Signature of Candidate Doriene Color	rado County, Texas
	GO TO PAGE 2	
1		

## **CANDIDATE MODIFIED** REPORTING DECLARATION

FORM CTA PG 2

CANDIDATE NAME	
MODIFIED REPORTING DECLARATION	COMPLETE THIS SECTION ONLY IF YOU ARE CHOOSING MODIFIED REPORTING.
	This declaration must be filed no later than the 30th day before the first election to which the declaration applies
	The modified reporting option is valid for one election cycle only. ↔ (An election cycle includes a primary election, a general election, and any related runoffs.)
	I do not intend to accept more than \$500 in political contributions or make more than \$500 in political expenditures (excluding filing fees) in connection with any future election within the election cycle. I understand that if either one of those limits is exceeded, I will be required to file pre-election reports and, if necessary, a runoff report.
	Year of election(s) or election cycle to which declaration applies  Signature of Candidate
· · · · · · · · · · · · · · · · · · ·	

This appointment is effective on the date it is filed with the appropriate filing authority.

#### APPOINTMENT OF A CAMPAIGN TREASURER FORM CTA BY A CANDIDATE PG 1 1 Total pages filed: See CTA instruction Guide for detailed instructions. FIRST MI MS / MRS MR OFFICE USE ONLY CANDIDATE NAME Filer ID # DUN)E Date Received NICKNAME ADDRESS / PO BOX; CANDIDATE MAILING WEIMAR TX ADDRESS 78962 EXTENSION AREA CODE PHONE NUMBER CANDIDATE PHONE (979) 743-0318 Date Processed OFFICE Date Imaged HELD CONSTABLE PCT. (if any) **OFFICE** SOUGHT (if known) SUFFIX CAMPAIGN TREASURER rener NAME STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; ZIP CODE CAMPAIGN TREASURER WEIMAR, Tr. 78962 STREET **ADDRESS** (residence or business) AREA CODE PHONE NUMBER EXTENSION CAMPAIGN TREASURER PHONE (979) 743-0319 10 CANDIDATE I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code. SIGNATURE I am aware of my responsibility to file timely reports as required by title 15 of the Election Code. I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations. Signature of Candidate

# CANDIDATE MODIFIED REPORTING DECLARATION

FORM CTA PG 2

REPORTING	3 DECLARATION
11 CANDIDATE NAME	LONNIE L. HINZE
12 MODIFIED REPORTING DECLARATION	COMPLETE THIS SECTION ONLY IF YOU ARE CHOOSING MODIFIED REPORTING
	•• This declaration must be filed no later than the 30th day before the first election to which the declaration applies. ••
	→ The modified reporting option is valid for one election cycle only.   (An election cycle includes a primary election, a general election, and any related runoffs.)
	•• Candidates for the office of state chair of a political party may NOT choose modified reporting. ••
	I do not intend to accept more than \$500 in political contributions or make more than \$500 in political expenditures (excluding filing fees) in connection with any future election within the election cycle. I understand that if either one of those limits is exceeded, I will be required to file pre-election reports and, if necessary, a runoff report.
	Year of election (s) or election cycle to which declaration applies  Year of election cycle to which declaration applies  Year of election cycle to Signature of Candidate

This appointment is effective on the date it is filed with the appropriate filing authority.

TEC Filers may send this form to the TEC electronically at <a href="mailto:treasappoint@ethics.state.tx.us">treasappoint@ethics.state.tx.us</a>
or mall to
Texas Ethics Commission
P.O. Box 12070
Austin, TX 78711-2070

Non-TEC Filers must file this form with the local filing authority DO NOT SEND TO TEC

For more information about where to file go to: http://204.65.203.6/filinginfo/QuickFileAReport.php

### APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA PG 1

See	CTA Instruction Guide for detailed instructions.	1 Total pages filed:				
2 CANDIDATE	MS / MRS / MR FIRST MI	OFFICE USE ONLY				
NAME	LONNIE L. NICKNAME LAST SUFFIX	Acct. # Date Received				
3 CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE  607 E. MAIN WEIMAR TX 78962	FILED FOR RECORD COLORADO COUNTY, TX 2015 NOV 16 PM 2: 49				
4 CANDIDATE PHONE	AREA CODE PHONE NUMBER EXTENSION (979) 743-03/8	Date Hand-delivered or Postmarked KE COUNTY CLERK  Date Processed				
5 OFFICE HELD (if any)	CONSTABLE PCT 2 COLORADO 6.	Date Imaged				
6 OFFICE SOUGHT (if known)	CONSTABLE PCT2 COLORADO C	D.				
7 CAMPAIGN TREASURER NAME	RENEE L.	LAST SUFFIX				
8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT/SUITE #: CITY, STATE;	78962				
9 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION  (919) 743- 0319					
10 CANDIDATE SIGNATURE	I am aware of the Nepotism Law, Chapter 573 of the Te	xas Government Code.				
	I am aware of my responsibility to file timely reports as the Election Code.	required by title 15 of				
	I am aware of the restrictions in title 15 of the Election C from corporations and labor organizations.	code on contributions				
	Signature of Candidate	0 ov . 16 , 2 0 15 Date Signed				
GO TO PAGE 2						

# CANDIDATE MODIFIED REPORTING DECLARATION

FORM CTA PG 2

11 CANDIDATE NAME LONDIE L. HINZE 12 MODIFIED COMPLETE THIS SECTION ONLY IF YOU ARE REPORTING CHOOSING MODIFIED REPORTING DECLARATION .. This declaration must be filed no later than the 30th day before the first election to which the declaration applies. .. .. The modified reporting option is valid for one election cycle only. (An election cycle includes a primary election, a general election, and any related runoffs.) .. Candidates for the office of state chair of a political party may NOT choose modified reporting. .. I do not intend to accept more than \$500 in political contributions or make more than \$500 in political expenditures (excluding filing fees) in connection with any future election within the election cycle. I understand that if either one of those limits is exceeded, I will be required to file pre-election reports and, if necessary, a runoff report. Year of election(s) or election cycle to which declaration applies Signature of Candidate

This appointment is effective on the date it is filed with the appropriate filing authority.

(512) 463-5800

### CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

CAMPAIGI	I FINANCE RE	···OKI		000	ER SHEET PG I
The C/OH Instruction (	Guide explains how to comple	ete this form.	1 ACCOUNT #		al pages filed:
3 CANDIDATE /	MS/MR FIRE	ST		A1	OFFICE USE ONLY
OFFICEHOLDER NAME	NICKNAME LAS	NIE		Date Rec	D FOR RECORD ADO COUNTY, TX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	607 E, MAIN			2896 2 <sup>2015</sup> NO Date Ha	nd-delivered or Postmarked
change of address			EVERYOUN	Receipt	UNTY CLETRY
5 CANDIDATE/ OFFICEHOLDER PHONE	(979) 743-		EXTENSION	Date Pro	ocessed
6 CAMPAIGN TREASURER NAME	MS (MRS) MR FIR REN	EE	7	Date Ima	aged
		UZE			
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEAS)			. 78962	
8 CAMPAIGN TREASURER PHONE	(979) 743-C		EXTENSION		
9 REPORT TYPE	January 15 30th	day before election	Runoff	tre	th day after campaign easurer appointment ficeholder only)
	July 15 8th	day before election	Exceeded !	\$500 Fir	nal report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year	THROUGH	Month	Day Year /30 / 15	
11 ELECTION	Month Day Year 3 / 1 / 16	ELECTION TYPE Primary	Runoff	General	Special
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOL		
	CONSTABLE COLORADO C	PCT.2	1	RADO C	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
		GO TO PAG	3E 2		

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

14 C/OH NAME		11	5 ACCOUNT	# (Ethics Commission Filers)
LO NNIE	L. HIN	ZE		
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTI	CE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE HOLDER, THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIL ES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF TI	DATE'S OR OFFIC	CEHOLDER'S KNOWLEDGE OR
	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
	SPECIFIC	COMMITTEE ADDRESS		
		COMMITTEE CAMPAIGN TREASURER NAME		
additional pages				
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES. LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE		0
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	D
EXPENDITURE TOTALS	3. TOTAL F	OLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEM	ZED \$	0
	4. TOTAL	\$	0	
CONTRIBUTION BALANCE	5. TOTAL P OF REP	AY \$	0	
OUTSTANDING LOAN TOTALS	6. TOTAL P	HE \$	0	
18 AFFIDAVIT		I swear, or affirm, under penalty of is true and correct and includes all ime under Title 15, Election Code.  Signature of Cand	nformation re	equired to be reported by
	scribed before	me, by the said, to certify which, witness m	ΙΖΕ by hand ar	, this the
Signature of officer admi	Merbe	Printed name of officer administering oath	DOUN-	ficer administering oath

All information is required to be provided to	aines.	ON TO	- SEDITE	ICA NI	DADTY CEN	EDAI DE	INAADV DAI	LOT
APPLICATION FOR A PL	ACE	ON TH	PETUB	ILAN	PAKIY GEN	ERAL PR	MINIART DAL	LUI
TO: State/County Chair								
I request that my name be placed on the	abov	e-named	official primary b	allot as a ca	indidate for nomin	ation to th	ne office indicat	ed below.
OFFICE SOUGHT (Include any place numb	er o	other di	stinguishing num	ber, if any.)	INDICAT	ETERM		
					FULL			
CONSTABLE PCT	-	0	DIDEA	0 /				
	. 69		J. C. C.		ME AS YOU WANT	XPIRED	EAD ON THE B	ALLOT
FULL NAME (First, Middle, Last)				PRINT NA	VIE AS YOU WANT	II IU APP	EAR ON THE B	ALLOI
LONDIE LYNN HII	17	E		LON	NIE L.	HIN	ZE	
PERMANENT RESIDENCE ADDRESS (Do n			O. Box or Rural	PUBLIC MA	AILING ADDRESS (	Address fo	r which you re	ceive campaign
Route. If you do not have a residence	addr	ess, desc	ribe location of	related co	rrespondence.)			
residence.)				602	E. MAIA	1		
607 E. MAIN				0-1	C. IIININ			
CITY	STA	TF	ZIP	CITY			STATE	ZIP
	TX		- TIME	70.00			TX	78962
WEIMAR	1.8		78962		MAR			
PUBLIC EMAIL ADDRESS (If available)		OCCUP	ATION (Do not lea	eve blank)	DATE OF BIRTH		NUMBER <sup>1</sup> (C	STRATION VUID
		Com			00 100		NOWIDER 10	ptionary
		COP.	STABLE		08/03			
TELEPHONE CONTACT INFORMATION (C	ptio	nal)	LENGT		NUOUS RESIDENC		TERRITORY ELE	
Home: 979-725-6211				IN STAT		IN I		
	/			64 y	ear (s)		44	ear (s)
Work: 979-733-6661				3 m	111		0	nonth(s)
Cell: 979-743-0318					and the second second			
If using a nickname as part of your name	to a	ppear on	the ballot, you ar	e also signir	ng and swearing to	the follow	ving statements	s: I further swear
that my nickname does not constitute a	a slog	gan nor o	loes it indicate a	political, ec	onomic, social, or	religious	view or affiliat	ion. I have been
commonly known by this nickname for a	t leas	st three y	ears prior to this	election.				
Before me, the undersigned authority, o	n this	day per	conally anneared	(name) L	NNIE LY	NNH	INZE ,W	nho being by me
here and now duly sworn, upon oath say	/s:	s day per.	sorially appeared	(1101110)				
			_					200
"I, (name) LONDIE LYNN candidate for the office of CONSTA	_	INZ	of of	COLO	RAJO		County,	Texas, being a
candidate for the office of CONSTA	BL	EK	T. 2	sw	rear that I will supp	ort and d	lefend the Cons	stitution and laws
of the United States and of the State of this state. I have not been finally convic	Texa	s. I am a	citizen of the Uni	ted States e	rdoned or had my	full rights	of citizenship	restored by other
official action. I have not been determine	ted c	of a felony	r for which I have	not been po	g probate jurisdict	ion to be	totally mentally	incapacitated or
partially mentally incapacitated without	the	ight to vo	ote. I am aware o	f the nepoti	sm law, Chapter 57	3, Govern	ment Code.	
I further swear that the foregoing states	nent	s included	l in my applicatio	n are in all t	hings true and corr	rect."		
			V	4		1		
			Λ	for	med-	nen	2)	
					SIGNATURE	OF CANDII	DATE	
Sworn to and subscribed before me at _	6	100	this the	day	of Unv.	-7/6		SEAL
		7			Ja Dan			
Signature of Officer Administering Oath	2		Title	of Officer Ac	Iministering Oath	-	/	
TO BE COMPLETED BY CHAIR: THIS APPL	ICAT	ION IS AC	COMPANIED BY	THE REQUIR	ED FILING FEE PAIL	BY: C	ASH, CHECK	, MONEY
ORDER, CASHIERS CHECK, OR PET	ITIOI	N IN LIEU	OF FILING FEE.					
This document and \$ 375 filling fe	e or	a nomina	ting petition of_	is pag	es received.		M	
(See Section 1.007)	,		11-20	-15	10	m.	Mour	2_
Voter Registration Status Verified			Date Rec	eived		Signatur	re of Chair	
Voter Registration Status Vermeu								



# **OATH OF OFFICE**

In the name and by the authority of

# The State of Texas

I, <u>Lonnie L. Hinze</u>, do solemnly swear (or affirm), that I will faithfully execute the duties of the office of <u>Colorado County Constable</u>

<u>Precinct 2</u>, of the State of Texas, and will to the best of my ability preserve, protect, and defend the Constitution and laws of the United States and of this State, so help me God.

Lonnie L. Hinze

SWORN TO and subscribed before me by affiant on this 3<sup>rd</sup> day of January, 2017.

Signature of Officer Administering Oath

Printed Name

Γitle



# OFFICIAL BOND AND OATH STATE FARM FIRE AND CASUALTY COMPANY BLOOMINGTON, ILLINOIS

KNOW ALL PERSONS BY THESE PRESENTS:

Tha	t we, LONNIE L HINZE	of	
	Principal		
	ST WEIMAR TX 78962		
Street Address	City	State	zip
as Principal,	and STATE FARM FIRE AND CASUALTY COMPANY	of Bloomington, Illino	is, as surety, are held and firmly
bound unto	STATE OF TEXAS		
in the penal	sum of ONE THOUSAND FIVE HUNDRED AND NO/1	00	Dollars
(\$ 1,500.00	), for the payment of which,	well and truly to be m	ade, we do hereby severally bind
	our heirs, executors, administrators, successors, and as		
Sealed with	our Seals, and dated this 4TH day of 00	JOBER Z	016
THE CONDI	TION OF THIS OBLIGATION ARE SUCH, that, Whereas	s, the said Principal ha	s been elected or
appointed to	the office of CONSTABLE PRECINCT #2		
appointed to	the since of Contributing		
	for a term o	FOUR YEARS	Water the American State of the Control of the Cont
	beginning o	JANUARY 1, 2017	and
ending on C	DECEMBER 31, 2020	***************************************	
official durin	REFORE, if the said Principal shall well, truly and faiting the term aforesaid, the principal and the Surety here isions of such statute are hereby made a part of this ill force and effect.	by agreeing that if sai	d bond is required by any statute,
		Lonnie Hinze	Principal
		STATE FARM FIR	E AND CASUALTY COMPANY
	SEAL SEAL	By: Luya	M. Robertser
	Manufaran		_1
The within b	ond and the Surety thereon are hereby approved this	day o	of
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### OATH OF OFFICE

STATE OF	TEXAS				
		SS			
COUNTY	OF COLORADO				
		Lonnie L. Hinze			being
duly sworn	says that he/she will support the c		tes and of the State of	Texas	
	and	that he/she will faithfully, hor	nestly and impartially pe	rform and disch	arge the
duties of th	e office/position to which he/she ha Constable Precinct		he shall hold said office	l <sub>*:</sub>	
		Lonnie L. Hinze Sworn to by said	Signature of Principal Lonnie L. Hinze		
	The state of the s		Principal (print name)		
	A	before me, and subscribed	in my presence this		
	9 9 7	3rd day of	January	A.D.	2017
		Janubedel 11)	endo		
Keckerk	1	Kimberly Menke	MOMENCACHICA		
	<b>*</b>	Colorado County Cle	erk		
			CANADA MAKE		