

# 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 Filer ID (Ethics Commission Filers)</b> | <b>2 Total pages filed:</b><br><br><b>5</b> |  |
| <b>3 CANDIDATE / OFFICEHOLDER NAME</b>  | MS / MRS / MR   | FIRST  | MI  | <b>OFFICE USE ONLY</b><br><br>Date Received<br><div style="border: 2px solid blue; padding: 5px; display: inline-block;"> <b>Abilene City Secretary</b><br/><br/> <span style="color: red; font-size: 1.2em;">JAN 13 2021</span><br/><br/>                     Filed for Record                 </div> |
|   |   | Ms.  | Alexandra                                   |  |
| NICKNAME  |   | LAST   | SUFFIX                                      |  |
|   | "Alex"  | Russell                                      |   |  |
| <b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>                             | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  |  |   |  |
|   | 1018 N. 5th Street, Abilene, TX 79601   |  |   |  |
| <input type="checkbox"/> Change of Address                                    |   |  |   |  |
| <b>5 CANDIDATE / OFFICEHOLDER PHONE</b>                                       | AREA CODE   | PHONE NUMBER                                 | EXTENSION                                   |  |
|   | ( 615 )   | 268-6096                                     |   |  |
| <b>6 CAMPAIGN TREASURER NAME</b>  | MS / MRS / MR   | FIRST  | MI  |  |
|   |   | Mr.  | Ray   |  |
| NICKNAME  |   | LAST   | SUFFIX                                      |  |
|   |   | Ferguson                                     |   |  |
| Date Hand-delivered or Date Postmarked  |   |  |   |  |
| Receipt #   |   | Amount \$                                    |   |  |
| Date Processed  |   |  |   |  |
| Date Imaged   |   |  |   |  |
| <b>7 CAMPAIGN TREASURER ADDRESS</b><br><small>(Residence or Business)</small> | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE   |  |   |  |
|   | 993 North 3rd, Abilene, TX 79601  |  |   |  |
| <b>8 CAMPAIGN TREASURER PHONE</b>   | AREA CODE   | PHONE NUMBER                                 | EXTENSION                                   |  |
|   | ( 325 )   | 677-6251                                     |   |  |
| <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  |  |
|   | 07  | 01   | 20  |  |
| THROUGH   |   | Month  | Day   |  |
| THROUGH   |   | 12   | 31  |  |
| <b>11 ELECTION</b>  | ELECTION DATE   |  | ELECTION TYPE                               |  |
|   | Month   | Day  | Year  |  |
|   | 5   | 5  | 18  |  |
|   |   | <input type="checkbox"/> Primary             | <input type="checkbox"/> Runoff             |  |
|   |   | <input checked="" type="checkbox"/> General  | <input type="checkbox"/> Special            |  |
|   |   | <input type="checkbox"/> Other Description   |   |  |
| <b>12 OFFICE</b>  | OFFICE HELD (if any)  |  | <b>13 OFFICE SOUGHT (if known)</b>          |  |
|   |   |  |   |  |
|   |   | City Council, Place 2                        |   |  |

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME **Ms. Alexandra "Alex" Terrell Russell** 15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

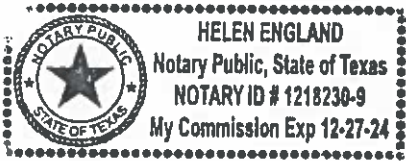
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO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

|                                   |                                      |
|-----------------------------------|--------------------------------------|
| COMMITTEE TYPE                    | COMMITTEE NAME                       |
| <input type="checkbox"/> GENERAL  |                                      |
| <input type="checkbox"/> 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 | \$ | 0.00     |
|                         | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)                                  | \$ | 0.00     |
| EXPENDITURE TOTALS      | 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED   | \$ | 0.00     |
|                         | 4. TOTAL POLITICAL EXPENDITURES   | \$ | 28.00    |
| CONTRIBUTION BALANCE    | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD                                    | \$ | 1,726.47 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD                         | \$ | 0.00     |

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]*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Alexandra Terrell Russell, this the 13<sup>th</sup> day of January, 2021, to certify which, witness my hand and seal of office.

Helen England      Helen England      Notary Public  
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

|  |   |   |
|--|---|---|
| <b>19 FILER NAME</b><br>Ms. Alexandra "Alex" Terrell Russell |   | <b>20 Filer ID (Ethics Commission Filers)</b> |
| <b>21 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE             |   | SUBTOTAL<br>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 checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS   | \$ 28.00                                      |
| 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 | \$  |

# 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.

|   |   |  |
|---|---|--|
| <b>1</b> Total pages Schedule F1:<br><b>1</b>                       | <b>2</b> FILER NAME<br><b>Ms. Alexandra "Alex" Terrell Russell</b>      | <b>3</b> Filer ID (Ethics Commission Filers)   |
| <b>4</b> Date   | <b>5</b> Payee name<br><b>See Attached List</b>                         |  |
| <b>6</b> Amount (\$)  | <b>7</b> Payee address; City; State; Zip Code                           |  |
| <b>8</b><br><b>PURPOSE OF EXPENDITURE</b>                           | <b>(a)</b> Category (See Categories listed at the top of this schedule) | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name   | Office sought                      Office held   |
| Date  | Payee name  |  |
| Amount (\$)   | Payee address; City; State; Zip Code                                    |  |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)            | Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense            |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   | Office sought                      Office held   |
| Date  | Payee name  |  |
| Amount (\$)   | Payee address; City; State; Zip Code                                    |  |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)            | Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense            |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   | Office sought                      Office held   |

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

## Alex Terrell Russell Campaign

| Date      | Payee Name           | Amount | Address         | City    | State | Zip   | Category           | Description         |
|-----------|----------------------|--------|-----------------|---------|-------|-------|--------------------|---------------------|
| 7/1/2020  | First Financial Bank | (3.00) | 400 Pine Street | Abilene | TX    | 79601 | Accounting/Banking | Paper Statement Fee |
| 8/1/2020  | First Financial Bank | (5.00) | 400 Pine Street | Abilene | TX    | 79601 | Accounting/Banking | Paper Statement Fee |
| 9/1/2020  | First Financial Bank | (5.00) | 400 Pine Street | Abilene | TX    | 79601 | Accounting/Banking | Paper Statement Fee |
| 10/1/2020 | First Financial Bank | (5.00) | 400 Pine Street | Abilene | TX    | 79601 | Accounting/Banking | Paper Statement Fee |
| 11/1/2020 | First Financial Bank | (5.00) | 400 Pine Street | Abilene | TX    | 79601 | Accounting/Banking | Paper Statement Fee |
| 12/1/2020 | First Financial Bank | (5.00) | 400 Pine Street | Abilene | TX    | 79601 | Accounting/Banking | Paper Statement Fee |