

# SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

## FORM SPAC COVER SHEET PG 1

The SPAC Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed:  <div style="text-align: center; font-size: 2em;">2</div>
3 COMMITTEE NAME  <div style="font-size: 1.5em; font-family: cursive;">Good Jobs for Abilene</div>		<div style="text-align: center; font-weight: bold; font-size: 0.8em;">OFFICE USE ONLY</div> <div style="text-align: center; font-size: 0.8em;">Date Received: Abilene City Secretary</div> <div style="text-align: center; font-size: 1.5em; font-weight: bold; color: red;">JAN 13 2017</div> <div style="text-align: center; font-size: 0.8em; color: blue;">Filed for Record</div>	
4 COMMITTEE ADDRESS  <input type="checkbox"/> change of address	ADDRESS / PO BOX, APT / SUITE #, CITY, STATE, ZIP CODE  <div style="font-size: 1.2em; font-family: cursive;">P.O. Box 2993 Abilene, TX 79604-2993</div>		
5 CAMPAIGN TREASURER NAME  MS / MRS / MR      FIRST      MI <div style="font-size: 1.2em; font-family: cursive;">Mr.      Ray</div> NICKNAME      LAST      SUFFIX <div style="font-size: 1.2em; font-family: cursive; margin-left: 100px;">Ferguson</div>	OFFICE USE ONLY CONTINUED Date Hand-delivered or Postmarked Receipt #      Amount Date Processed Date Imaged		
6 CAMPAIGN TREASURER'S STREET ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE), APT / SUITE #, CITY, STATE, ZIP CODE  <div style="font-size: 1.2em; font-family: cursive;">2533 Lincoln Dr., Abilene, TX 79601</div>		
7 CAMPAIGN TREASURER'S MAILING ADDRESS  <input type="checkbox"/> change of address	STREET OR PO BOX, APT / SUITE #, CITY, STATE, ZIP CODE  <div style="font-size: 1.2em; font-family: cursive;">Same</div>		
8 CAMPAIGN TREASURER PHONE	AREA CODE      PHONE NUMBER      EXTENSION  <div style="font-size: 1.2em; font-family: cursive;">(325)      677-6251</div>		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input checked="" type="checkbox"/> Dissolution (attach PAC-DR) <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination		
10 PERIOD COVERED	Month      Day      Year      THROUGH      Month      Day      Year  <div style="font-size: 1.5em; font-family: cursive;">7 / 1 / 16      THROUGH      12 / 31 / 16</div>		
11 ELECTION	ELECTION DATE      ELECTION TYPE Month      Day      Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special  <div style="font-size: 1.5em; font-family: cursive;">/ /      / / /</div>		

GO TO PAGE 2

# SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

**FORM SPAC  
COVER SHEET PG 2**


12 COMMITTEE NAME	ACCOUNT # (Ethics Commission Filers)
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<b>13 COMMITTEE PURPOSE</b>  (Attach lists on plain paper to complete this report if necessary.)  <input type="checkbox"/> SUPPORT (Candidate or Measure)  <input type="checkbox"/> OPPOSE (Candidate or Measure)  <input type="checkbox"/> ASSIST (Officeholder)	<input type="checkbox"/> CANDIDATE  <input type="checkbox"/> OFFICEHOLDER	CANDIDATE / OFFICEHOLDER NAME  <hr/> OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)
	<input type="checkbox"/> MEASURE	BALLOT IDENTIFICATION / #
		ELECTION DATE Month / Day / Year
		DESCRIPTION

14 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)	\$
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 36479
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ - 0 -
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

**15 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.



AFFIX NOTARY STAMP / SEAL ABOVE

*[Signature]*  
Signature of Campaign Treasurer

Sworn to and subscribed before me, by the said Ray Ferguson, this the 13<sup>th</sup> day of January, 2017, to certify which, witness my hand and seal of office.

*[Signature]*  
Signature of officer administering oath

Tiffni Herrera  
Printed name of officer administering oath

Notary  
Title of officer administering oath

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1	2 FILER NAME Good Jobs for Abilene	3 Filer ID (Ethics Commission Filers)
4 Date 12-30-16	5 Payee name Condley and Company, LLP	
6 Amount (\$) 36429	7 Payee address; City; State; Zip Code P.O. Box 2993 Abilene, TX 79604	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL COMMITTEE  
AFFIDAVIT OF DISSOLUTION**

**FORM PAC - DR**

The Instruction Guide explains how to complete this form.  
-- Complete only if "Report Type" on page 1 is marked "Dissolution" --

1 COMMITTEE NAME

*Good Jobs for Abilene*

2 Filer ID (Ethics Commission Filers)

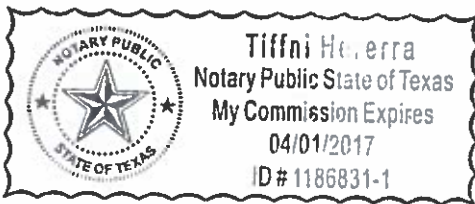
3 Affidavit of Dissolution

I, the undersigned campaign treasurer, do not expect the occurrence of any further reportable activity by this political committee for this or any other campaign or election for which reporting under the Election Code is required. I declare that all of the information required to be reported by me has been reported. I understand that designating a report as a dissolution report terminates the appointment of campaign treasurer. I further understand that a political committee may not make or authorize political expenditures or accept political contributions without having an appointment of campaign treasurer on file.

*[Handwritten Signature]*

Signature of Campaign Treasurer

**DO NOT SIGN UNLESS POLITICAL  
COMMITTEE IS TO BE DISSOLVED**



AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ray Ferguson, this the 13<sup>th</sup> day of January, 2017, to certify which, witness my hand and seal of office.

*[Handwritten Signature]*

Signature of officer administering oath

*Tiffni Herrera*

Printed name of officer administering oath

*Notary*

Title of officer administering oath