

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filter ID (Ethics Commission Filers)	2 Total pages filed: 16
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Ms	FIRST Donna	MI <input checked="" type="checkbox"/>
	NICKNAME Albus	LAST	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1226 ANSON AVE Abilene, TX 79601		
	5 CANDIDATE / OFFICEHOLDER PHONE AREA CODE: (325) PHONE NUMBER: 660-8337 EXTENSION:		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Myrick	MI R
	NICKNAME Gloyna	LAST	SUFFIX
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 36 Augusta Drive Abilene TX 79606		
	8 CAMPAIGN TREASURER PHONE AREA CODE: (325) PHONE NUMBER: 269-9300 EXTENSION:		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" 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)		
10 PERIOD COVERED	Month / Day / Year Month / Day / Year 1 / 20 / 2020 THROUGH 3 / 31 / 2020		
11 ELECTION	ELECTION DATE Month / Day / Year 5 / 2 / 2020		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
	12 OFFICE OFFICE HELD (if any) Abilene City Council Place 3		13 OFFICE SOUGHT (if known) Abilene City Council Place 3

Abilene City Secretary
MAR 31 2020
Filed for Record

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

Donna Allus Campaign

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

GENERAL

SPECIFIC

COMMITTEE NAME

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, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED

\$ - 0 -

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

\$ 5870.00

EXPENDITURE
TOTALS

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

\$ - 0 -

4. TOTAL POLITICAL EXPENDITURES

\$ 3200.19

CONTRIBUTION
BALANCE

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

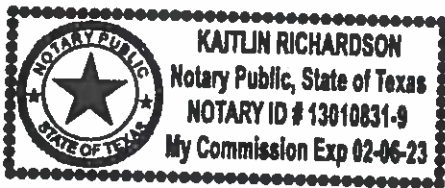
\$ 2669.81

OUTSTANDING
LOAN TOTALS

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

\$

18 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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.

Donna Allus
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said City Hall, this the March 31st day of March 2020, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

Kaitlin Richardson
Printed name of officer administering oath

Notary
Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME Donna Albus Campaign		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 5870.00
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	\$ 3200.19
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	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

1 of 11

2 FILER NAME

Donna Albus Campaign

3 Filer ID (Ethics Commission Filers)

4 Date

1/22/20

5 Full name of contributor

out-of-state PAC (ID#: _____)

Billye Proctor Shaw

7 Amount of contribution (\$)

\$ 500.00

6 Contributor address;

City;

State;

Zip Code

1760 River Oaks Abilene TX 79605

8 Principal occupation / Job title (See Instructions)

Retired

9 Employer (See Instructions)

Date

1/26/20

Full name of contributor

out-of-state PAC (ID#: _____)

Myra Dean

Amount of contribution (\$)

\$ 550.00

Contributor address;

City;

State;

Zip Code

4114 FM 89 Tuscola TX 79562

Principal occupation / Job title (See Instructions)

retired

Employer (See Instructions)

Date

2/13/20

Full name of contributor

out-of-state PAC (ID#: _____)

Glen H. Smyth & Helen Smyth

Amount of contribution (\$)

\$ 100.00

Contributor address;

City;

State;

Zip Code

2433 North 3rd # 130 Abilene, TX 79603

Principal occupation / Job title (See Instructions)

retired

Employer (See Instructions)

Date

2/10/20

Full name of contributor

out-of-state PAC (ID#: _____)

Audrey Perry

Amount of contribution (\$)

\$ 100.00

Contributor address;

City;

State;

Zip Code

1381 Amarillo Abilene, TX 79602

Principal occupation / Job title (See Instructions)

retired

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.

2

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 of 11

2 FILER NAME

Donna Albus Campaign

3 Filer ID (Ethics Commission Filers)

4 Date

3/11/20

5 Full name of contributor

Douglas Eichorst

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$ 50.00

6 Contributor address;

City;

State;

Zip Code

55 Stonegate Abilene TX 79606

8 Principal occupation / Job title (See Instructions)

retired

9 Employer (See Instructions)

Date

3/11/20

Full name of contributor

Leroy Bolt

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$ 200.00

Contributor address;

City;

State;

Zip Code

2201 Gathright Abilene, TX 79606

Principal occupation / Job title (See Instructions)

CPA/partner

Employer (See Instructions)

Condy and Company

Date

3/12/20

Full name of contributor

Bill Senter

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$ 100.00

Contributor address;

City;

State;

Zip Code

3 Turnberry Abilene TX 79606

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/10/20

Full name of contributor

William P. Wright Jr

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$ 50.00

Contributor address;

City;

State;

Zip Code

1415 Tanglewood Abilene, TX 79605

Principal occupation / Job title (See Instructions)

owner

Employer (See Instructions)

Wright Mineral Rights

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

2

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

3 of 11

2 FILER NAME

Donna Albus Campaign

3 Filer ID (Ethics Commission Filers)

4 Date

3/13/20

5 Full name of contributor

out-of-state PAC (ID#: _____)

Shelia Dankworth

6 Contributor address; City; State; Zip Code

3808 West Lake Rd Abilene TX 79601

7 Amount of contribution (\$)

\$ 100.00

8 Principal occupation / Job title (See Instructions)

Treasurer

9 Employer (See Instructions)

Pine Street Salvage

Date

3/14/20

Full name of contributor

out-of-state PAC (ID#: _____)

Jerry Smith

Contributor address; City; State; Zip Code

13 Hoylake Abilene TX 79606

Amount of contribution (\$)

\$ 25.00

Principal occupation / Job title (See Instructions)

retired

Employer (See Instructions)

Date

3/11/20

Full name of contributor

out-of-state PAC (ID#: _____)

Roger Huber

Contributor address; City; State; Zip Code

3702 High Meadows Abilene, TX 79605

Amount of contribution (\$)

\$ 10.00

Principal occupation / Job title (See Instructions)

retired

Employer (See Instructions)

Date

3/12/20

Full name of contributor

out-of-state PAC (ID#: _____)

Aliccann Phillips

Contributor address; City; State; Zip Code

#1 Wynrush Abilene, TX 79606

Amount of contribution (\$)

\$ 25.00

Principal occupation / Job title (See Instructions)

Retired

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.

3

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
4 of 11

2 FILER NAME

Donna Albus Campaign

3 Filer ID (Ethics Commission Filers)

4 Date

3/13/20

5 Full name of contributor out-of-state PAC (ID#: _____)

JACK D. Chamberlain

6 Contributor address; City; State; Zip Code

PO Box 3453 Abilene TX 79604

7 Amount of contribution (\$)

\$ 30.00

8 Principal occupation / Job title (See Instructions)

OWNER

9 Employer (See Instructions)

Bronco Properties

Date

3/11/20

Full name of contributor out-of-state PAC (ID#: _____)

Kay Alexander

Contributor address; City; State; Zip Code

29 Glen Abbey St Abilene, TX 79606

Amount of contribution (\$)

\$ 100.00

Principal occupation / Job title (See Instructions)

retired

Employer (See Instructions)

Date

3/13/20

Full name of contributor out-of-state PAC (ID#: _____)

Gay Bertscher

Contributor address; City; State; Zip Code

41 Cypress Pt Abilene TX 79606

Amount of contribution (\$)

\$ 100.00

Principal occupation / Job title (See Instructions)

retired

Employer (See Instructions)

Date

3/12/20

Full name of contributor out-of-state PAC (ID#: _____)

Charles A. Doby

Contributor address; City; State; Zip Code

28 Fairway Oaks Abilene TX 79606

Amount of contribution (\$)

\$ 250.00

Principal occupation / Job title (See Instructions)

President

Employer (See Instructions)

CADCO

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

4

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

5 of 11

2 FILER NAME

Donna Albus Campaign

3 Filer ID (Ethics Commission Filers)

4 Date

3/2/20

5 Full name of contributor out-of-state PAC (ID#: _____)

Susan Stroud

7 Amount of contribution (\$)

\$50.00

6 Contributor address; City; State; Zip Code

174 Bella Vista Abilene TX 79606

8 Principal occupation / Job title (See Instructions)

Financial Advisor / V.P.

9 Employer (See Instructions)

Morgan Stanley

Date

1/20/20

Full name of contributor out-of-state PAC (ID#: _____)

UNIQUE SIGNS, INC

Amount of contribution (\$)

\$100.00

Contributor address; City; State; Zip Code

32 Buttercup Drive Abilene, TX 79606

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/14/20

Full name of contributor out-of-state PAC (ID#: _____)

Marianne E Fincher

Amount of contribution (\$)

\$100.00

Contributor address; City; State; Zip Code

39 Lytle Place Abilene TX 79602

Principal occupation / Job title (See Instructions)

retired

Employer (See Instructions)

Date

1/22/20

Full name of contributor out-of-state PAC (ID#: _____)

Melody Hunt

Amount of contribution (\$)

\$200.00

Contributor address; City; State; Zip Code

1341 Sylvan Abilene TX 79605

Principal occupation / Job title (See Instructions)

owner

Employer (See Instructions)

Hunt Direct Marketing

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

5

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

6 of 11

2 FILER NAME

Donna Albus Campaign

3 Filer ID (Ethics Commission Filers)

4 Date

2/17/20

5 Full name of contributor out-of-state PAC (ID#: _____)

Kaye Spalding

6 Contributor address; City; State; Zip Code

1850 Elmwood Abilene TX 79605

7 Amount of contribution (\$)

\$ 100.00

8 Principal occupation / Job title (See Instructions)

retired

9 Employer (See Instructions)

Date

2/20/20

Full name of contributor out-of-state PAC (ID#: _____)

Susan Robinson

Contributor address; City; State; Zip Code

6109 Laurel Ct Abilene TX 79606

Amount of contribution (\$)

\$ 100.00

Principal occupation / Job title (See Instructions)

retired

Employer (See Instructions)

Date

2/19/20

Full name of contributor out-of-state PAC (ID#: _____)

Molly C. Clive

Contributor address; City; State; Zip Code

2706 Charter House Abilene, TX 79604

Amount of contribution (\$)

\$ 100.00

Principal occupation / Job title (See Instructions)

retired

Employer (See Instructions)

Date

1/24/20

Full name of contributor out-of-state PAC (ID#: _____)

Shirley Reed

Contributor address; City; State; Zip Code

4101 Amarillo Abilene TX 79602

Amount of contribution (\$)

\$ 500.00

Principal occupation / Job title (See Instructions)

retired

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.

6

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

7 of 11

2 FILER NAME

Donna Albus Campaign

3 Filer ID (Ethics Commission Filers)

4 Date

2/21/20

5 Full name of contributor out-of-state PAC (ID#: _____)

Donna Dougherty

6 Contributor address; City; State; Zip Code

913 Willow Wren Abilene, TX 79602

7 Amount of contribution (\$)

\$ 200.00

8 Principal occupation / Job title (See Instructions)

retired

9 Employer (See Instructions)

Date

3/15/20

Full name of contributor out-of-state PAC (ID#: _____)

Lynnda Calcote

Contributor address; City; State; Zip Code

5282 Wyndham Ct Abilene, TX 79606

Amount of contribution (\$)

\$ 50.00

Principal occupation / Job title (See Instructions)

retired

Employer (See Instructions)

Date

3/14/20

Full name of contributor out-of-state PAC (ID#: _____)

Bobbie Lee Wolfe

Contributor address; City; State; Zip Code

24 Avenida de Silva Abilene, TX 79602

Amount of contribution (\$)

\$ 50.00

Principal occupation / Job title (See Instructions)

CPA / Founding Shareholder

Employer (See Instructions)

Wolfe CPA

Date

3/10/20

Full name of contributor out-of-state PAC (ID#: _____)

Tucker Bradwell

Contributor address; City; State; Zip Code

1425 Tanglewood Abilene, TX 79605

Amount of contribution (\$)

\$ 250.00

Principal occupation / Job title (See Instructions)

Investor / Director

Employer (See Instructions)

Concho / Tucker Foundation

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

7

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

8 of 11

2 FILER NAME

Donna Albus Campaign

3 Filer ID (Ethics Commission Filers)

4 Date

3/13/20

5 Full name of contributor

Betty Hukill

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$ 50.00

6 Contributor address; City; State; Zip Code

1933 Highland Abilene TX 79605

8 Principal occupation / Job title (See Instructions)

Retired

9 Employer (See Instructions)

Date

3/16/20

Full name of contributor

Judy Garner

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$ 100.00

Contributor address; City; State; Zip Code

764 Kenwood Abilene TX 79601

Principal occupation / Job title (See Instructions)

Instructional Technology Specialist AISTD

Employer (See Instructions)

Date

3/14/20

Full name of contributor

Frederick Scott Dwyer

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$ 200.00

Contributor address; City; State; Zip Code

5 Glen Abbey Ct Abilene, TX 79606

Principal occupation / Job title (See Instructions)

Chairman / President

Employer (See Instructions)

First Financial Bank

Date

3/15/20

Full name of contributor

David Copeland

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$ 250.00

Contributor address; City; State; Zip Code

1451 Tanglewood Abilene, TX 79605

Principal occupation / Job title (See Instructions)

President

Employer (See Instructions)

Shelton Foundation

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

8

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

9 of 11

2 FILER NAME

Donna Albus Campaign

3 Filer ID (Ethics Commission Filers)

4 Date

3/15/20

5 Full name of contributor out-of-state PAC (ID#: _____)

Mike Schultz

7 Amount of contribution (\$)

\$ 100.00

6 Contributor address; City; State; Zip Code

1289 Kingsbury Abilene TX 79602

8 Principal occupation / Job title (See Instructions)

Engineer

9 Employer (See Instructions)

Date

3/14/20

Full name of contributor out-of-state PAC (ID#: _____)

Peggy Beckham

Amount of contribution (\$)

\$ 300.00

Contributor address; City; State; Zip Code

1416 Woodland Trail Abilene, TX 79605

Principal occupation / Job title (See Instructions)

retired

Employer (See Instructions)

Date

3/19/20

Full name of contributor out-of-state PAC (ID#: _____)

Linda Chase

Amount of contribution (\$)

\$ 100.00

Contributor address; City; State; Zip Code

9724 Coke Road Abilene, TX 79601

Principal occupation / Job title (See Instructions)

retired

Employer (See Instructions)

Date

3/14/20

Full name of contributor out-of-state PAC (ID#: _____)

Susan McDonald

Amount of contribution (\$)

\$ 200.00

Contributor address; City; State; Zip Code

11 Murfield Abilene, TX 79606

Principal occupation / Job title (See Instructions)

President

Employer (See Instructions)

Greathouse Foundation

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

9

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

10 of 11

2 FILER NAME

Donna Albus Campaign

3 Filer ID (Ethics Commission Filers)

4 Date

3/19/20

5 Full name of contributor out-of-state PAC (ID#: _____)

Gayla Neal

7 Amount of contribution (\$)

\$ 50.00

6 Contributor address; City; State; Zip Code

326 Country Place South Abilene, TX 79606

8 Principal occupation / Job title (See Instructions)

retired

9 Employer (See Instructions)

Date

3/20/20

Full name of contributor out-of-state PAC (ID#: _____)

Kay Spiva

Amount of contribution (\$)

\$ 100.00

Contributor address; City; State; Zip Code

4 Monarch Abilene TX 79606

Principal occupation / Job title (See Instructions)

realtor

Employer (See Instructions)

Stovall Realtors

Date

3/10/20

Full name of contributor out-of-state PAC (ID#: _____)

~~1250 ENT 10th #120~~ Robert Hunter

Amount of contribution (\$)

\$ 50.00

Contributor address; City; State; Zip Code

1250 EN 10th #120 Abilene, TX 79601

Principal occupation / Job title (See Instructions)

retired

Employer (See Instructions)

Date

3/19/20

Full name of contributor out-of-state PAC (ID#: _____)

Lawrence E. Gill

Amount of contribution (\$)

\$ 250.00

Contributor address; City; State; Zip Code

PO Box 176 Abilene, TX 79604

Principal occupation / Job title (See Instructions)

Grants Administrator

Employer (See Instructions)

Dodge Jones Foundation

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

10

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

11 of 11

2 FILER NAME

Donna Albus Campaign

3 Filer ID (Ethics Commission Filers)

4 Date

3/16/20

5 Full name of contributor

Beverly Vaughan

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$ 30.00

6 Contributor address; City; State; Zip Code

2434 Regent Abilene TX 79605

8 Principal occupation / Job title (See Instructions)

retired

9 Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

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.

11

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:	2 FILER NAME Donna Albus Campaign	3 Filer ID (Ethics Commission Filers)
----------------------------	---	---------------------------------------

4 Date 2/5/2020	5 Payee name First Financial Bank
---------------------------	---

6 Amount (\$) \$21.95	7 Payee address; 400 Pine Street	City; Abilene	State; TX	Zip Code 79601
---------------------------------	--	-------------------------	---------------------	--------------------------

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description check order
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check If Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date 2/14/2020	Payee name USPS - Southern Hills
--------------------------	--

Amount (\$) \$55.00	Payee address; 2501 Buffalo Gap Rd	City; Abilene	State; TX	Zip Code 79605
-------------------------------	--	-------------------------	---------------------	--------------------------

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fundraising	Description stamps
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<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 2/28/2020	Payee name First Financial Bank
--------------------------	---

Amount (\$) \$5.00	Payee address; 400 Pine Street	City; Abilene	State; TX	Zip Code 79601
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description Monthly maintenance Fee
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<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
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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:	2 FILER NAME Donna Albus Campaign	3 Filer ID (Ethics Commission Filers)
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4 Date 3/12/2020	5 Payee name UNIQUE SIGNS
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6 Amount (\$) 2381.99	7 Payee address; 32 Buttercup Drive	City; Abilene TX	State; TX	Zip Code 79606
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing	(b) Description Signs for Campaign
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/16/2020	Payee name Sally's Printing + Mail Service
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Amount (\$) \$686.25	Payee address; 1942 B Industrial Blvd	City; Abilene TX	State; TX	Zip Code 79602
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation / Fundraising	Description envelopes, postage, flier
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<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
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Date 3/20/2020	Payee name Jenet Payne
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Amount (\$) \$50.00	Payee address; 2510 Sunnibrook Ct	City; Abilene TX	State; TX	Zip Code 79601
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Reimbursement	Description fuel reimbursement for putting out all signs
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<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
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