

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed: **17**

### OFFICE USE ONLY

Date Received

Abilene City Secretary

**APR 29 2016**

Filed for Record

Date Hand-delivered or Date Postmarked

Receipt #

Amount \$

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR FIRST MI  
Mr. Steve J  
NICKNAME LAST SUFFIX  
"Stinky Steve" Savage N/A

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  
4810 Mary Lou Ln Abilene, TX 79606  
 Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION  
(325) 201-4100 N/A

6 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI  
Mrs. Cristi K  
NICKNAME LAST SUFFIX  
Savage

7 CAMPAIGN TREASURER ADDRESS  
(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  
4810 Mary Lou Ln Abilene, TX 79606

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION  
(325) 232-9212 N/A

9 REPORT TYPE

January 15  30th day before election  Runoff  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

Month Day Year Month Day Year  
03 / 29 / 2016 THROUGH APR / 27 / 2016

11 ELECTION

ELECTION DATE ELECTION TYPE  
Month Day Year  Primary  Runoff  Other Description  
05 / 07 / 2016  General  Special Abilene City Council - Place 6

12 OFFICE

OFFICE HELD (if any)  
Abilene City Council - Place 6

13 OFFICE SOUGHT (if known)

Abilene City Council - Place 6

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME Steve Savage 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.

GENERAL  
 SPECIFIC

COMMITTEE TYPE

COMMITTEE NAME  
Abilene Professional Fire Fighters Association

COMMITTEE ADDRESS  
1717 Butternut St. Abilene, TX 79602

COMMITTEE CAMPAIGN TREASURER NAME  
Ernie Locke

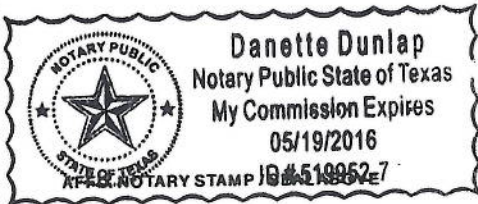
COMMITTEE CAMPAIGN TREASURER ADDRESS  
604 Adams Rd Stamford, TX 79553

Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ N/A
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7,770 <sup>00</sup>
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ N/A
	4. TOTAL POLITICAL EXPENDITURES	\$ 11,026 <sup>34</sup>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 2,058 <sup>63</sup>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ N/A $\emptyset$

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.



Steve Savage  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Steve Savage, this the 29th day of April, 2016, to certify which, witness my hand and seal of office.

Danette Dunlap Signature of officer administering oath  
Danette Dunlap Printed name of officer administering oath  
Notary Public Title of officer administering oath

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME

Steve Savage

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7,770 <sup>00</sup>
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	\$ 10,502 <sup>77</sup>
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	\$ 273 <sup>57</sup>
9.	<input checked="" type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 250 <sup>00</sup>
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: 9
2 FILER NAME Steve Savage		3 Filer ID (Ethics Commission Filers)
4 Date 29 MAR 2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (DR: _____) Alton Cooper 6 Contributor address; City; State; Zip Code 1710 Belmont Blvd Abilene, TX 76602	7 Amount of contribution (\$) \$ 50 <sup>00</sup>
8 Principal occupation / Job title (See instructions) Unknown		9 Employer (See instructions) Unknown
Date 30 MAR 2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (DR: _____) Rodney Fletcher Contributor address; City; State; Zip Code 3226 Roberts Abilene, TX 79605	Amount of contribution (\$) \$ 25 <sup>00</sup>
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A
Date 07 APR 2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (DR: _____) Paul Grohman Contributor address; City; State; Zip Code 2116 Kildare Dr. Pearland, TX 77581	Amount of contribution (\$) \$ 200 <sup>00</sup>
Principal occupation / Job title (See instructions) Unknown		Employer (See instructions) Unknown
Date 07 APR 2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (DR: _____) Ronnie Brown Contributor address; City; State; Zip Code 2809 San Miguel Abilene TX 79605	Amount of contribution (\$) \$ 100 <sup>00</sup>
Principal occupation / Job title (See instructions) Unknown		Employer (See instructions) Unknown

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
 If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **9**

2 FILER NAME

**Steve Savage**

3 Filer ID (Ethics Commission File#)

4 Date

**07 APR 2016**

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

**Kathy Walker**

7 Amount of contribution (\$)

**\$ 200<sup>00</sup>**

6 Contributor address; City; State; Zip Code

**297 Trail Creek Dr Abilene TX 79602**

8 Principal occupation / Job title (See Instructions)

~~Unknown~~ **Unknown**

9 Employer (See Instructions)

~~Unknown~~ **Unknown**

Date

**07 APR 2016**

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

**Dan + Lee Ann Ervin**

Amount of contribution (\$)

**\$ 250<sup>00</sup>**

Contributor address; City; State; Zip Code

**2602 Shoreline Dr Abilene TX 79602**

Principal occupation / Job title (See Instructions)

**OWNER(S)**

Employer (See Instructions)

**Abby's Bottles + Brew**

Date

**08 APR 2016**

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

**Kimberly Hall Ramirez**

Amount of contribution (\$)

**\$ 20<sup>00</sup>**

Contributor address; City; State; Zip Code

**3817 N. 9th Abilene, TX 79603**

Principal occupation / Job title (See Instructions)

**Unknown**

Employer (See Instructions)

**Unknown**

Date

**08 APR 2016**

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

**Bob Thomas**

Amount of contribution (\$)

**\$ 100<sup>00</sup>**

Contributor address; City; State; Zip Code

**100 Sheppard Cove Abilene, TX 79605**

Principal occupation / Job title (See Instructions)

**Unknown**

Employer (See Instructions)

**Unknown**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>9</b>
2 FILER NAME <b>Steve Savage</b>		3 Filer ID (Ethics Commission Filer)
4 Date <b>08 APR 2016</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (PAC #): <b>Cristi Savage</b>	7 Amount of contribution (\$) <b>\$100<sup>00</sup></b>
6 Contributor address; City, State, Zip Code <b>4810 Mary Lou Ln Abilene TX 79602</b>		
8 Principal occupation / Job title (See instructions) <b>Co-owner</b>		9 Employer (See instructions) <b>Stinky Steve's Septic</b>
Date <b>12 APR 2016</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (PAC #): <b>Dale + Nancy Morrison</b>	Amount of contribution (\$) <b>\$1,000<sup>00</sup></b>
Contributor address; City, State, Zip Code <b>209 C.R. 127 Tuscola, TX 79562</b>		
Principal occupation / Job title (See instructions) <b>owner</b>		Employer (See instructions) <b>Self employed various businesses</b>
Date <b>08 APR 2016</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (PAC #): <b>Annette Chambers</b>	Amount of contribution (\$) <b>\$25<sup>00</sup></b>
Contributor address; City, State, Zip Code <b>1649 Belmont Abilene, TX 79602</b>		
Principal occupation / Job title (See instructions) <b>Unknown</b>		Employer (See instructions) <b>Templeton</b>
Date <b>08 APR 2016</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (PAC #): <b>John Duncan</b>	Amount of contribution (\$) <b>\$25<sup>00</sup></b>
Contributor address; City, State, Zip Code <b>410 CR 685 Tuscola, TX 79562</b>		
Principal occupation / Job title (See instructions) <b>Unknown</b>		Employer (See instructions) <b>Unknown</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <u>9</u>
2 FILER NAME <u>Steve Savage</u>		3 Filer ID (Ethics Commission Filers)
4 Date <u>12 APR 2016</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Shirley Glandon</u> 6 Contributor address; City; State; Zip Code <u>1926 Green Ridge Ct Abilene, TX 79602</u>	7 Amount of contribution (\$) <u>\$100<sup>00</sup></u>
8 Principal occupation / Job title (See Instructions) <u>Unknown - Jim McVie's neighbor</u>		9 Employer (See Instructions) <u>Unknown</u>
Date <u>14 APR 2016</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Mark Shannon</u> Contributor address; City; State; Zip Code <u>4058 Avondale St Abilene TX 79605</u>	Amount of contribution (\$) <u>\$25<sup>00</sup></u>
Principal occupation / Job title (See Instructions) <u>Unknown</u>		Employer (See Instructions) <u>Unknown</u>
Date <u>15 APR 2016</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Stephanie Kim Bruno</u> Contributor address; City; State; Zip Code <u>1418 Riata Rd Abilene, TX 79602</u>	Amount of contribution (\$) <u>\$300<sup>00</sup></u>
Principal occupation / Job title (See Instructions) <u>Realtor</u>		Employer (See Instructions) <u>Remax</u>
Date <u>15 APR 2016</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Abilene Professional Fire Fighters Association</u> Contributor address; City; State; Zip Code <u>1717 Butternut St Abilene TX 79602</u>	Amount of contribution (\$) <u>\$2,000<sup>00</sup></u>
Principal occupation / Job title (See Instructions) <u>N/A</u>		Employer (See Instructions) <u>N/A</u>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>9</b>
2 FILER NAME <b>Steve Savage</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>21 APR 2016</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Johnny Johnson</b> 6 Contributor address; City; State; Zip Code <b>3534 Rhani Ct Abilene, TX 79602</b>	7 Amount of contribution (\$) <b>\$ 250<sup>00</sup></b>
8 Principal occupation / Job title (See Instructions) <b>OWNER</b>		9 Employer (See Instructions) <b>Big Johnson Liquor</b>
Date <b>21 APR 2016</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jimmy Partin</b> Contributor address; City; State; Zip Code <b>25 Juniper Circle Abilene TX 79605</b>	Amount of contribution (\$) <b>\$ 100<sup>00</sup></b>
Principal occupation / Job title (See Instructions) <b>Owner</b>		Employer (See Instructions) <b>Jimmy Partin Real Estate</b>
Date <b>21 APR 2016</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>J Lange Partin</b> Contributor address; City; State; Zip Code <b>24 Cherry Hills Abilene, TX 79606</b>	Amount of contribution (\$) <b>\$ 100<sup>00</sup></b>
Principal occupation / Job title (See Instructions) <b>OWNER</b>		Employer (See Instructions) <b>LAYNE TECH ROOFING</b>
Date <b>21 APR 2016</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Steve Savage</b> Contributor address; City; State; Zip Code <b>4810 Mary Lou Ln Abilene TX 79606</b>	Amount of contribution (\$) <b>\$ 250<sup>00</sup></b>
Principal occupation / Job title (See Instructions) <b>OWNER</b>		Employer (See Instructions) <b>Stinky Staves Septic</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>9</b>
2 FILER NAME <b>Steve Savage</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>22 APR 2016</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Billy Enriquez</b> 6 Contributor address; City; State; Zip Code <b>2049 Park Ave Abilene TX 79603</b>	7 Amount of contribution (\$) <b>\$100<sup>00</sup></b>
8 Principal occupation / Job title (See Instructions) <b>unknown</b>		9 Employer (See Instructions) <b>unknown</b>
Date <b>23 APR 2016</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jimmy Pickens</b> Contributor address; City; State; Zip Code <b>3209 Amvill St Abilene, TX 79602</b>	Amount of contribution (\$) <b>\$200<sup>00</sup></b>
Principal occupation / Job title (See Instructions) <b>Retired</b>		Employer (See Instructions) <b>N/A - Retired</b>
Date <b>25 APR 2016</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Lawayne Harris</b> Contributor address; City; State; Zip Code <b>P.O. Box 6205 Abilene, TX 79608</b>	Amount of contribution (\$) <b>\$100<sup>00</sup></b>
Principal occupation / Job title (See Instructions) <b>Retired</b>		Employer (See Instructions) <b>Retired</b>
Date <b>4-25-2016</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Waylan Jackson</b> Contributor address; City; State; Zip Code <b>617 C.R. 127 Tuscola, TX 79562</b>	Amount of contribution (\$) <b>\$50<sup>00</sup></b>
Principal occupation / Job title (See Instructions) <b>OWNER</b>		Employer (See Instructions) <b>JACKSON BROTHERS FEED</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>9</b>
2 FILER NAME <b>Steve Savage</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4-25-16</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jerry Hallmark</b> 6 Contributor address; City; State; Zip Code <b>1110 Iberis Rd S.W. Tuscola, TX 79562</b>	7 Amount of contribution (\$) <b>\$ 250<sup>00</sup></b>
8 Principal occupation / Job title (See Instructions) <b>OWNER</b>		9 Employer (See Instructions) <b>SELF</b>
Date <b>4-25-16</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Winston Ohlhausen</b> Contributor address; City; State; Zip Code <b>426 Ohlhausen Abilene, TX 79606</b>	Amount of contribution (\$) <b>\$ 1050<sup>00</sup></b>
Principal occupation / Job title (See Instructions) <b>Owner - Ohlhausen</b>		Employer (See Instructions) <b>Self</b>
Date <b>4-26-16</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Chad Carter</b> Contributor address; City; State; Zip Code <b>6442 Todd Run Abilene TX 79606</b>	Amount of contribution (\$) <b>\$ 250<sup>00</sup></b>
Principal occupation / Job title (See Instructions) <b>Professional Engineer</b>		Employer (See Instructions) <b>TXDOT</b>
Date <b>4-26-2016</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Leslie Savage</b> Contributor address; City; State; Zip Code <b>2101 Continental Ave Abilene, TX 79601</b>	Amount of contribution (\$) <b>\$ 100<sup>00</sup></b>
Principal occupation / Job title (See Instructions) <b>Retired</b>		Employer (See Instructions) <b>NIA</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>9</b>
2 FILER NAME <b>Steve Savage</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4-26-2016</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jeff. + Susan Hallmark</b> 6 Contributor address; City; State; Zip Code <b>149 Parker Ave Abilene, TX 79602</b>	7 Amount of contribution (\$) <b>\$ 100<sup>00</sup></b>
8 Principal occupation / Job title (See Instructions) <b>Mgr / Accountant</b>		9 Employer (See Instructions) <b>Hastings / Jones Larry Lesalle</b>
Date <b>4-26-2016</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Doug Kreidler</b> Contributor address; City; State; Zip Code <b>2817 Potosi Rd Abilene, TX 79602</b>	Amount of contribution (\$) <b>\$ 100<sup>00</sup></b>
Principal occupation / Job title (See Instructions) <b>Welder</b>		Employer (See Instructions) <b>Self</b>
Date <b>4-27-16</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Kendall + Colie Hollowell</b> Contributor address; City; State; Zip Code <b>3134 Cherry Bark Abilene, TX 79606</b>	Amount of contribution (\$) <b>\$ 100<sup>00</sup></b>
Principal occupation / Job title (See Instructions) <b>Plumber</b>		Employer (See Instructions) <b>Kendall The Plumber</b>
Date <b>4-27-16</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Tony Rayburn</b> Contributor address; City; State; Zip Code <b>3466 Santa Monica Abilene, TX 79605</b>	Amount of contribution (\$) <b>\$ 100<sup>00</sup></b>
Principal occupation / Job title (See Instructions) <b>Self / construction</b>		Employer (See Instructions) <b>(Self)</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>9</b>
2 FILER NAME <b>Steve Savage</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4-27-16</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>David Dyson</b>	7 Amount of contribution (\$) <b>\$ 50<sup>00</sup></b>
6 Contributor address; City; State; Zip Code <b>4818 Mary Ln, Abilene, TX 79606</b>		
8 Principal occupation / Job title (See Instructions) <b>OWNER</b>		9 Employer (See Instructions) <b>3D Fence</b>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)  Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)  Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)  Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
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# 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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>3</b>	2 FILER NAME <b>Steve Savage</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>31 MAR 2016</b>	5 Payee name <b>Conley Printing</b>	
6 Amount (\$) <b>1,026<sup>05</sup></b>	7 Payee address: City; State; Zip Code <b>P.O. Box 6606 Abilene, TX 79608</b>	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Printing Expense</b>	(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 <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: <b>Steve Savage</b> Office sought: <b>Abilene City Council place b</b> Office held: <b>← SAME</b>	
Date <b>31 MAR 2016</b>	Payee name <b>Nexstar Broadcasting</b>	
Amount (\$) <b>1,000<sup>00</sup></b>	Payee address: City; State; Zip Code <b>4510 S. 14th St. Abilene, TX 79605</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</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 <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: <b>Steve Savage</b> Office sought: <b>Abilene City Council place b</b> Office held: <b>← SAME</b>	
Date <b>22 APR 2016</b>	Payee name <b>Circle 66 Outfitters</b>	
Amount (\$) <b>648<sup>13</sup></b>	Payee address: City; State; Zip Code <b>P.O. Box 4183 Abilene, TX 79608</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</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 <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: <b>Steve Savage</b> Office sought: <b>Abilene City Council Place b</b> Office held: <b>Abilene City Council - Place b</b>	

**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: <b>3</b>	2 FILER NAME <b>Steve Savage</b>	3 Filer ID (Ethics Commission Filers)	
4 Date <b>4-22-2016</b>	5 Payee name <b>KTXS</b>		
6 Amount (\$) <b>4,272.50</b>	7 Payee address: City; State; Zip Code <b>4420 N. Clark St. Abilene, TX 79601</b>		
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>		
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Steve Savage</b>	Office sought <b>Abilene City Council - Place 6</b>	Office held <b>Abilene City Council - Place 6</b>
Date <b>4-26-2016</b>	Payee name <b>LaVoz / Extreme Media</b>		
Amount (\$) <b>600<sup>00</sup></b>	Payee address: City; State; Zip Code <b>209 S. Denville Ste A-100 Abilene, TX 79605</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>		Description <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 <b>Steve Savage</b>	Office sought <b>Abilene City Council - Place 6</b>
Date <b>MAY 2 - 29, 2016 - APR 27, 2016</b>	Payee name <b>Pay Pal</b>		
Amount (\$) <del>6059</del> <b>6059</b>	Payee address: City; State; Zip Code <b>Online Website - unknown Address - internet</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Fees (transaction fees for Online Donations)</b>		Description <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 <b>Steve Savage</b>	Office sought <b>Abilene City Council - Place 6</b>

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# 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.

<b>1</b> Total pages Schedule F1: 3	<b>2</b> FILER NAME Steve Savage	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 27 APR 2016	<b>5</b> Payee name KTAB / KRBC	
<b>6</b> Amount (\$) 2949.50	<b>7</b> Payee address; City; State; Zip Code 4510 S. 14 <sup>th</sup> St. Abilene, TX 79605	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <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: Steve Savage Office sought: Abilene City Council - Prec 6 Office held: Abilene City Council Prec 6	
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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <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: _____	

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# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee

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 F4: 1	<b>2</b> FILER NAME Steve Savage	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ N/A
<b>5</b> Date 31 MAR 2016	<b>6</b> Payee name Facebook	
<b>7</b> Amount (\$) \$ 273.57	<b>8</b> Payee address; City; State; Zip Code Unknown - online internet service	
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Steve Savage	Office sought Abilene City Council - Place 6
		Office held SAME
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>TYPE OF EXPENDITURE</b>	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political	
<b>PURPOSE OF EXPENDITURE</b>	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
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
		Office held

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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### 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.

<b>1</b> Total pages Schedule G: 1	<b>2</b> FILER NAME Steve Savage	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 4-22-16	<b>5</b> Payee name Orlando Estrada	
<b>6</b> Amount (\$) 150 <sup>00</sup> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 1134 S. 6 <sup>th</sup> (B) Abilene, TX 79605	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Steve Savage	Office sought Abilene City Council - Place 6
		Office held Abilene City Council Place 6
Date 4-27-2016	Payee name Billy Stoecker	
Amount (\$) 100 <sup>00</sup> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1702 Oak St. Abilene TX 79605	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/wages/contract labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Steve Savage	Office sought Abilene City Council - Place 6
		Office held Abilene City Council - Place 6
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<input type="checkbox"/> Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
		Office held

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