

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: <div style="text-align: center; font-size: 2em;">4</div>																		
3 CANDIDATE / OFFICEHOLDER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; font-size: 8px;">MS / MRS / MR</td> <td style="width:40%; font-size: 8px;">FIRST</td> <td style="width:20%; font-size: 8px;">MI</td> <td style="width:20%;"></td> </tr> <tr> <td style="font-size: 8px;">NICKNAME</td> <td style="font-size: 8px;">LAST</td> <td style="font-size: 8px;">SUFFIX</td> <td></td> </tr> <tr> <td style="text-align: center;">Mr.</td> <td style="text-align: center;">Anthony</td> <td></td> <td></td> </tr> <tr> <td></td> <td style="text-align: center;">Williams</td> <td></td> <td></td> </tr> </table>	MS / MRS / MR	FIRST	MI		NICKNAME	LAST	SUFFIX		Mr.	Anthony				Williams			<div style="border: 1px solid black; padding: 5px; text-align: center;"> OFFICE USE ONLY <hr/> Date Received <div style="border: 2px solid blue; padding: 5px; margin: 5px 0;"> Abilene City Secretary JAN 17 2017 Filed for Record </div> <hr/> Date Hand-delivered of 1/17/2017 Date Postmarked <hr/> Receipt # Amount \$ <hr/> Date Processed <hr/> Date Imaged </div>			
MS / MRS / MR	FIRST	MI																			
NICKNAME	LAST	SUFFIX																			
Mr.	Anthony																				
	Williams																				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%; font-size: 8px;">ADDRESS / PO BOX;</td> <td style="width:15%; font-size: 8px;">APT / SUITE #;</td> <td style="width:20%; font-size: 8px;">CITY;</td> <td style="width:10%; font-size: 8px;">STATE;</td> <td style="width:25%; font-size: 8px;">ZIP CODE</td> </tr> <tr> <td colspan="5" style="text-align: center;">1725 Wildlife Trail Parkway Abilene, TX 79601</td> </tr> </table>			ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	1725 Wildlife Trail Parkway Abilene, TX 79601												
ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE																	
1725 Wildlife Trail Parkway Abilene, TX 79601																					
5 CANDIDATE / OFFICEHOLDER PHONE	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; font-size: 8px;">AREA CODE</td> <td style="width:40%; font-size: 8px;">PHONE NUMBER</td> <td style="width:40%; font-size: 8px;">EXTENSION</td> </tr> <tr> <td colspan="3" style="text-align: center;">(325) 829. 4328</td> </tr> </table>			AREA CODE	PHONE NUMBER	EXTENSION	(325) 829. 4328														
AREA CODE	PHONE NUMBER	EXTENSION																			
(325) 829. 4328																					
6 CAMPAIGN TREASURER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; font-size: 8px;">MS / MRS / MR</td> <td style="width:40%; font-size: 8px;">FIRST</td> <td style="width:20%; font-size: 8px;">MI</td> <td style="width:20%;"></td> </tr> <tr> <td style="font-size: 8px;">NICKNAME</td> <td style="font-size: 8px;">LAST</td> <td style="font-size: 8px;">SUFFIX</td> <td></td> </tr> <tr> <td style="text-align: center;">Mr.</td> <td style="text-align: center;">Kris</td> <td></td> <td></td> </tr> <tr> <td></td> <td style="text-align: center;">Southward</td> <td></td> <td></td> </tr> </table>	MS / MRS / MR	FIRST	MI		NICKNAME	LAST	SUFFIX		Mr.	Kris				Southward						
MS / MRS / MR	FIRST	MI																			
NICKNAME	LAST	SUFFIX																			
Mr.	Kris																				
	Southward																				
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%; font-size: 8px;">STREET ADDRESS (NO PO BOX PLEASE);</td> <td style="width:15%; font-size: 8px;">APT / SUITE #;</td> <td style="width:20%; font-size: 8px;">CITY;</td> <td style="width:10%; font-size: 8px;">STATE;</td> <td style="width:25%; font-size: 8px;">ZIP CODE</td> </tr> <tr> <td colspan="5" style="text-align: center;">425 Cypress St. Abilene, TX 79601</td> </tr> </table>			STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE;	ZIP CODE	425 Cypress St. Abilene, TX 79601												
STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE;	ZIP CODE																	
425 Cypress St. Abilene, TX 79601																					
8 CAMPAIGN TREASURER PHONE	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; font-size: 8px;">AREA CODE</td> <td style="width:40%; font-size: 8px;">PHONE NUMBER</td> <td style="width:40%; font-size: 8px;">EXTENSION</td> </tr> <tr> <td colspan="3" style="text-align: center;">(325) 677-1231</td> </tr> </table>			AREA CODE	PHONE NUMBER	EXTENSION	(325) 677-1231														
AREA CODE	PHONE NUMBER	EXTENSION																			
(325) 677-1231																					
9 REPORT TYPE	<table style="width:100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded \$500 limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table>			<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)										
<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)																		
10 PERIOD COVERED	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; font-size: 8px;">Month</td> <td style="width:10%; font-size: 8px;">Day</td> <td style="width:10%; font-size: 8px;">Year</td> <td style="width:20%;"></td> <td style="width:10%; font-size: 8px;">THROUGH</td> <td style="width:10%; font-size: 8px;">Month</td> <td style="width:10%; font-size: 8px;">Day</td> <td style="width:10%; font-size: 8px;">Year</td> </tr> <tr> <td style="text-align: center;">07</td> <td style="text-align: center;">01</td> <td style="text-align: center;">2016</td> <td></td> <td></td> <td style="text-align: center;">12</td> <td style="text-align: center;">31</td> <td style="text-align: center;">2016</td> </tr> </table>			Month	Day	Year		THROUGH	Month	Day	Year	07	01	2016			12	31	2016		
Month	Day	Year		THROUGH	Month	Day	Year														
07	01	2016			12	31	2016														
11 ELECTION	<table style="width:100%; border-collapse: collapse;"> <tr> <td colspan="3" style="font-size: 8px;">ELECTION DATE</td> <td colspan="3" style="font-size: 8px;">ELECTION TYPE</td> </tr> <tr> <td style="width:10%; font-size: 8px;">Month</td> <td style="width:10%; font-size: 8px;">Day</td> <td style="width:10%; font-size: 8px;">Year</td> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> Other Description</td> </tr> <tr> <td style="text-align: center;">05</td> <td style="text-align: center;">06</td> <td style="text-align: center;">2017</td> <td><input checked="" type="checkbox"/> General</td> <td><input type="checkbox"/> Special</td> <td></td> </tr> </table>	ELECTION DATE			ELECTION TYPE			Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description	05	06	2017	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special			
ELECTION DATE			ELECTION TYPE																		
Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description																
05	06	2017	<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) Mayor, City of Abilene																			

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Mr. Anthony Williams 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.

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

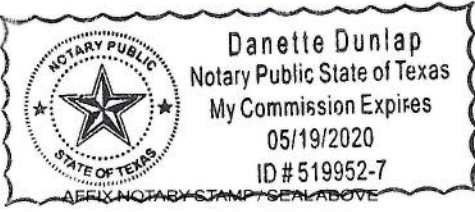
Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7,100.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 83.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 83.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 8,095.17
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

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.

Anthony Williams
Signature of Candidate or Officeholder



AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Anthony Williams, this the 17 day of January, 2017, to certify which, witness my hand and seal of office.

Danette Dunlap Danette Dunlap 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

19 FILER NAME <i>Mr. Anthony Williams</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>7,100.00</i>
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 type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
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

2 FILER NAME

Mr. Anthony Williams

3 Filer ID (Ethics Commission Filers)

4 Date

12.20.16

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

Mr. & Mrs. Charles Allred

6 Contributor address: City: State: Zip Code

998 S. Clack Abilene, TX 79605

7 Amount of contribution (\$)

\$ 5,000.00

8 Principal occupation / Job title (See Instructions)

Owner

9 Employer (See Instructions)

Frontier Motors

Date

12.20.16

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

Dr. & Mrs. Mel Hoiley

Contributor address: City: State: Zip Code

1210 Queen's Court Abilene, TX 79602

Amount of contribution (\$)

\$ 100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12.20.16

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

Mr. & Mrs. Gene Lantrip

Contributor address: City: State: Zip Code

298 Edge Cliff Court Abilene, TX 79606

Amount of contribution (\$)

\$ 1,000.00

Principal occupation / Job title (See Instructions)

Owner

Employer (See Instructions)

Lantrip's Custom Homes, Inc.

Date

12.20.16

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

Mr. & Mrs. Gene Lantrip

Contributor address: City: State: Zip Code

298 Edge Cliff Court Abilene, TX 79606

Amount of contribution (\$)

\$ 1,000.00

Principal occupation / Job title (See Instructions)

Owner

Employer (See Instructions)

Lantrip's Custom Homes, Inc.

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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