CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

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The C/OH Instruction G	uide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:11
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Mr. Wesley NICKNAME LAST Faulkner	MI E. SUFFIX	Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	7500 Dedrick Dr	uty; state; zip code ustin TX 78747	USTIN CITY RECEIV
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (512) 522 - 8383	EXTENSION	Date Hand-delivered of Date Posimarked
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST Mr. Brian NICKNAME LAST LOh	M: 	Receipt # Amount \$ Date Processed Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SU 12610 Riata Trace Parkway 525	TTE #; CITY; STATE; Austin TX	ZIP CODE 78727
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 636 - 2984	EXTENSION	
9 REPORT TYPE	January 15 30th day before elec		 15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year 7 / 7 / 16	Month THROUGH 7	Day Year 15 / 16
11 ELECTION	ELECTION DATE Month Day Year Primary 11 8 16 Seneral	ELECTION TYPE Runoff Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (If known) City Council Men	
	GO TO	PAGE 2	

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME		15	Filer ID (Ethics Commission Filers)
Wesley E. Faulk	ner		
16 NOTICE FROM POLITICAL COMMITTEE(S)	SUPPORT THE CANE	NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITU XXATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITH DWSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS URES.	OUT THE CANDIDATE'S OR OFFICEHOLDER'S
	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL		
		COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
Additional Pages			
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE	
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 420.00
EXPENDITURE TOTALS	3. TOTAL F UNLESS	\$ 0	
	4. TOTAL	POLITICAL EXPENDITURES	\$ 1,332.16
CONTRIBUTION BALANCE	1	POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST D	^{AY} \$ 396.28
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF TH AY OF THE REPORTING PERIOD	E \$ 0
18 AFFIDAVIT			,
	CARLA LIRA My Commission Expi December 10, 2016	· White	
AFFIX NOTARY STAM	P/SEALABOVE	,	icth
		by the said WLODE FAUKN to certify which, witness my hand and seal of office.	lk this the Http:
Sidnatura at attians	J me	M (arla Lira Printed name of officer administering oath	NOTARY Title of officer administration onth
Signature of officer a	unimistering oath	Printed name of officer administering oath	Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER N/ Wesley	AME 7 E. Faulkner	20 Filer ID (Ethics Co	mmission Filers)
	· · · · · · · · · · · · · · · · · · ·		
	JLE SUBTOTALS F SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 420.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE E: LOANS		\$
5. 🔽	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CON		\$ 23.72
6. 🗸	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 1,278.88
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL (CONTRIBUTIONS	\$
8. 🗸	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 29.56
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUN	DS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A	BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTI RETURNED TO FILER	ONS	\$

The	e Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
		3 3 Filer ID (Ethics Commission Filers)
Wesley E	Faulkner	
Date 7/12/16	5 Full name of contributor out-of-state PAC (ID#:) John Johansen	7 Amount of contribution (\$)
	6 Contributor address; City; State; Zip Code	\$20.00
	2108 Phlox Ct Round Rock TX 78665	
Principal occ	upation / Job title (See Instructions) 9 Employer (See Instructions)	tions)
Date	Full name of contributor [] out-of-state PAC (ID#:)	Amount of contribution (\$)
7/12/16	Julie Gomoll Contributor address; City; State; Zip Code	\$20.00
	2811 Hardeman St. Austin TX 78704	
Principal occu	upation / Job title (See Instructions) Employer (See Instructions)	tions)
Date	Full name of contributor aut-of-state PAC (ID#:) Yvonne Young	Amount of contribution (\$)
7/13/16		\$5.00
	Contributor address; City; State; Zip Code 3208 Mossrock Dr. Austin TX 78757	
Principal occu	pation / Job title (See Instructions) Employer (See Instructions)	tions)
Date	Full name of contributor	Amount of contribution (\$)
7/13/16	Alayna Wadleigh	\$30.00
	Contributor address; City; State; Zip Code 9000 Briardale Dr. Austin TX 78758	
Principal occu	I	lions)

Th	e Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
PILER NAM	_	3 3 Filer ID (Ethics Commission Filers)
Date 7/13/16	5 Full name of contributor □ out-of-state PAC (ID#: Emily Schwenke 0 6 Contributor address; City; State; Zip Code 8731 Hollow Bay Ln. Austin TX 77095) 7 Amount of contribution (\$) \$20.00
Principal occ	supation / Job title (See Instructions) 9 Employer (See In	nstructions)
Date 7/13/16	Full name of contributor □ out-of-state PAC (ID#:	
Principal occi	upation / Job title (See Instructions) Employer (See In	nstructions)
Date 7/13/16	Full name of contributor □ out-of-state PAC (ID#: Ahmad Zaatari Contributor address; Contributor address; City; State; Zip Code 8818 Travis Hills Dr., Austin TX 78735	Amount of contribution (\$) \$100.00
Principal occu	Apt. 1132 upation / Job title (See Instructions) Employer (See In	nstructions)
Date 7/13/16	Full name of contributor	Armount of contribution (\$)
Principal occu	upation / Job title (See Instructions) Employer (See In	nstructions)

Г

			Total pages Schedule A1:
	e Instruction Guide explains how to complete this for		3
FILER NAM Wesley E.			Filer ID (Ethics Commission Filers)
Date 7/13/16	Stanislaus Ting		7 Amount of contribution (\$)
	6 Contributor address; City; State; 328 Vista Del Rey Drive El Paso TX	Zip Code	\$100.00
Principal oc	cupation / Job title (See Instructions) 9	Employer (See Instruction	ns)
Date	Full name of contributor Gut-of-state PAC (ID#		Amount of contribution (\$)
	Contributor address; City; State;	Zip Code	
Principal occ	upation / Job title (See Instructions)	Employer (See Instruction	s)
Date	Full name of contributor Dout-of-state PAC (ID#	:	Amount of contribution (\$)
	Contributor address; City; State; 2	Zip Code	
Principal occ	upation / Job title (See Instructions)	Employer (See Instruction	is)
Date	Full name of contributor Out-of-state PAC (ID#		Amount of contribution (\$)
	Contributor address; City: State; Z	lip Code	
Principal occ	upation / Job title (See Instructions)	Employer (See Instruction	S)
		<u> </u>	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

	EXPENDITURE CATEGO	RIES FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees C Food/Beverage Expense F y Gift/Awards/Memorials Expense F	oan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Now to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F1: 3	2 FILER NAME Wesley E. Faulkner		3 Filer ID (Ethics Commission Filers)
4 Date 7/12/16	5 Payee name DonateWay		
6 Amount (\$) \$1.30		Code 1703	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche Fees	Check if travelou	tside of Texas. Complete Schedule T. , TX, officeholder living expense or website donation processing/
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 7/12/16	Payee name DonateWay		
Amount (\$) \$1.30	Payee address; City; State; Zip (P.O. Box 301267 Austin TX 787	Code 703	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sche	Check if travel out	side of Texas. Complete Schedule T. TX, officeholder living expense or website donation processing/
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 7/13/16	Payee name DonateWay		
Amount (\$) \$0.56	Payee address; City; State; Zip (P.O. Box 301267 Austin TX 787		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sche Fees	Check if travelout Check if Austin, Campaign don handling fee	side of Texas. Complete Schedule T. TX, officeholder living expense Or website donation processing/
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 NEE	DED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

	EXPENDITURE CATEGORIES	FOR BOX 8(a)	
Advertising, Expense Accounting/Bánking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office O Food/Beverage Expense Polling E by Gift/Awards/Memorials Expense Printing E al Committee Legal Services Salaries/	Expense 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.	
1 Total pages Schedule F1: 3	Wesley E. Faulkner		3 Filer ID (Ethics Commission Filers)
4 Date 7/13/16	5 Payee name DonateWay		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$1.80	P.O. Box 301267 Austin TX 78703		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Fees	Check if travel o	utside of Texas. Complete Schedule T.
OF EXPENDITURE	rees		n, TX, officeholder living expense or website donation processing/
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name I	Office sought	Office held
Date	Payee name		
7/13/16	DonateWay		
Amount (\$)	Payee address; City; State; Zip Code	·	
\$1.30	P.O. Box 301267 Austin TX 78703		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Fees	Check if travel ou	itside of Texas. Complete Schedule T.
		Check if Austin	. TX, officeholder living expense
		Campaign done handling fee	or website donation processing/
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Рауее патте		
7/13/16	DonateWay		
Amount (\$)	Payee address; City; State; Zip Code		
\$5.30	P.O. Box 301267 Austin TX 78703		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE		Check if travel ou	tside of Texas, Complete Schedule T.
	Fees	Check if Austin	, TX, officeholder living expense
		Campaign donc handling fee	or website donation processing/
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 NEE	EDED

Forms provided by Texas Ethics Commission

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

	EXPENDITURE CATEGO	RIES FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Of Food/Beverage Expense Po Gift/Awards/Memorials Expense Pr al Committee Legal Services Sa The Instruction Guide explains h	oan Repayment/Reimbursement office Overhead/Rental Expense tolking Expense rinting Expense alaries/Wages/Contract Labor now to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category nol listed above)
1 Total pages Schedule F1: 3	2 FILER NAME Wesley E. Faulkner		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	I	
7/13/16	DonateWay		
6 Amount (\$) \$5.30	7 Payee address; City; State; Zip C P.O. Box 301267 Austin TX 787(
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sched Fees	Check if travel ou	utside of Texas. Complete Schedule T. n. TX, officeholder living expense or website donation processing/
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 7/13/16	Payee name DonateWay		
Amount (\$) \$1.56	Payee address; City; State; Zip C P.O. Box 301267 Austin TX 787	Code 703	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sched Fees	Check if travel outs	iside of Texas. Complete Schedule T. , TX, officeholder living expense or website donation processing/
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 7/13/16	Payee name DonateWay		
Amount (\$) \$5.30	Payee address; City; State; Zip C P.O. Box 301267 Austin TX 7870		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sched Fees	Check if travel outs	iside of Texas. Complete Schedule T. . TX, officeholder living expense or website donation processing/
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 NEE	DED

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

	••	- CYDCN				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica		Event Expense Fees Food/Beverage Gift/Awards/Me Legal Services	e Expense emorials Expense	Loan Repayment Office Overhead Polling Expense Printing Expense Salanes/Wages/	t/Reimbursement /Rental Expense e Gontract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
		The Instruc	tion Guide explai	ns how to compl	ele this form.	
1 Total pages Schedule F2: 1	2 FILER	NAME VY E. Faulki	ner			3 Filer ID (Ethics Commission Filers)
<u> </u>	<u> </u>					
4 TOTAL OF UNITEN	AIZED UN	PAID INCU	JRRED OBLI	GATIONS		\$
5 Date	6 Payee	name				
7/13/16	Huck T	ate	·	<u></u>		
7 Amount (\$)	8 Payee		City; State;	Zip Code		
\$900.00	3993 Woo Drive		Vadnais MN Heights	55127		
9 TYPE OF EXPENDITURE	۲ ۲	Political	E	Non-Political		
10	(a) Catego	VIV (See Categori	ies listed at the top of th	is schedule)	(b) Descriptio	30
PURPOSE	_			·		travel pulside of Texas. Complete Schedule T.
OF	Salaries	/wages/Co	ontract Labor			·
EXPENDITURE						if Austin, TX, officeholder living expense
					Graphics a	and Web Work
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OF		didate / Office	eholder name	Office	sought	Office held
Date 7/11/16	Payee Alt Crea					
Amount (\$) \$378.88	1 .	^{address;} West Blvd	City; State; I. Austin TX	Zip Code 78731		
TYPE OF EXPENDITURE	F	Political		Non-Political		
	Catego	ry (See Categori	es listed at the top of th	is schedule)	Descriptio	on .
PURPOSE	1 -	ising Expe		,	Check if	travel outside of Texas. Complete Schedule T.
OF	Auven	ising Exper	150		Check i	f Austin, TX, officeholder living expense
EXPENDITURE					Logo desig	n for campaign
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		didate / Office	eholder name	Office	sought	Office held
	ATTAC	H ADDITIO	NAL COPIES C	OF THIS SCHE	DULE AS NE	EDED
Forms provided by Texas Ethic	s Commissio	n	www.ethics	.state.tx.us		Revised 9/8/2015

	4		
	EXPENDITURE CATEGO	RIES FOR BOX 10(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Politi	Fees C Food/Beverage Expense P By Gilt/Awards/Memorials Expense P	can Repayment/Reimbursemen Office Overhead/Rental Expens Polling Expense Printing Expense Balaries/Wages/Contract Labor Now to complete this form	e Transportation Equipment & Related Exper Travel In District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F4: 1		· · · · ·	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITE	MIZED EXPENDITURES CHARGED TO	DACREDIT CARD	\$
5 Date 7/10/16	6 Payee name Namecheap, Inc.		
7 Amount (\$) \$19.72	8 Payee address; City; State; Zip 11400 W. Olympic Los CA 9 Blvd., Suite 200 Angeles	o Code 0064	
9 TYPE OF EXPENDITURE	Political	Non-Political	
10 PURPOSE	(a) Category (See Categories listed at the top of this so Advertising Expense		ption ack if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Campaig	eck if Austin, TX, officeholder living expense In website domain name on and hosting fees
11 Complete ONLY if direct	Candidate / Officeholder name	regionan	on and hooting loco
expenditure to benefit C/4		Office sought	Office held
Date	OH	Office sought	Office held
	он	Office sought	Office held
Date	OH Payee name Namecheap, Inc. Payee address; City; State; Zip		Office held
Date 7/14/16 Amount (\$)	OH Payee name Namecheap, Inc. Payee address; City; State; Zip 11400 W. Olympic Los CA 90	o Code	Office held
Date 7/14/16 Amount (\$) \$9.84 TYPE OF	OH Payee name Namecheap, Inc. Payee address: City; State; Zig 11400 W. Olympic Los CA 90 Blvd., Suite 200 Angeles	D Code 064 Non-Political hedule) Descri	ption ack if travel outside of Texas. Complete Schedule T. ack if Austin, TX, officeholder tiving expense I n website domain name
Date 7/14/16 Amount (\$) \$9.84 TYPE OF EXPENDITURE PURPOSE OF	Payee name Namecheap, Inc. Payee address: City; State; Zip 11400 W. Olympic Los CA 90 Blvd., Suite 200 Angeles Image: Category (See Categories listed at the top of this sc Advertising Expense Candidate / Officeholder name	D Code 064 Non-Political hedule) Descri	ption ack if travel outside of Texas. Complete Schedule T. ack if Austin, TX, officeholder tiving expense I n website domain name
Date 7/14/16 Amount (\$) \$9.84 TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	Payee name Namecheap, Inc. Payee address: City; State; Zip 11400 W. Olympic Los CA 90 Blvd., Suite 200 Angeles Image: Category (See Categories listed at the top of this sc Advertising Expense Candidate / Officeholder name	b Code 064 Non-Political hedule) Descri Che Campaig registrati	ption ack if travel outside of Texas. Complete Schedule T. ack if Austin, TX, officeholder fiving expense In website domain name On