

# 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: <span style="font-size: 2em; vertical-align: middle;">8</span>																
3 CANDIDATE / OFFICEHOLDER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; font-size: 8px;">MS / MRS / MR</td> <td style="width:30%;"><i>Mr.</i></td> <td style="width:15%; font-size: 8px;">FIRST</td> <td style="width:30%;"><i>Mike</i></td> <td style="width:10%; font-size: 8px;">MI</td> <td style="width:10%;"></td> </tr> <tr> <td style="font-size: 8px;">NICKNAME</td> <td></td> <td style="font-size: 8px;">LAST</td> <td><i>Cantrell</i></td> <td style="font-size: 8px;">SUFFIX</td> <td></td> </tr> </table>	MS / MRS / MR	<i>Mr.</i>	FIRST	<i>Mike</i>	MI		NICKNAME		LAST	<i>Cantrell</i>	SUFFIX		<b>OFFICE USE ONLY</b>					
MS / MRS / MR	<i>Mr.</i>	FIRST	<i>Mike</i>	MI															
NICKNAME		LAST	<i>Cantrell</i>	SUFFIX															
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS		<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; font-size: 8px;">ADDRESS / PO BOX;</td> <td style="width:25%; font-size: 8px;">APT / SUITE #;</td> <td style="width:25%; font-size: 8px;">CITY;</td> <td style="width:25%; font-size: 8px;">STATE;</td> <td style="width:20%; font-size: 8px;">ZIP CODE</td> </tr> <tr> <td colspan="5"><i>2109 Castleford Lane, Garland, TX 75040</i></td> </tr> </table>		ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	<i>2109 Castleford Lane, Garland, TX 75040</i>					Date Received					
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5 CANDIDATE / OFFICEHOLDER PHONE		<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; font-size: 8px;">AREA CODE</td> <td style="width:40%; font-size: 8px;">PHONE NUMBER</td> <td style="width:35%; font-size: 8px;">EXTENSION</td> </tr> <tr> <td><i>(972)</i></td> <td><i>530-1950</i></td> <td></td> </tr> </table>		AREA CODE	PHONE NUMBER	EXTENSION	<i>(972)</i>	<i>530-1950</i>		RECEIVED DALLAS COUNTY ELECTIONS  2019 JAN 02 11:32 AM									
AREA CODE	PHONE NUMBER	EXTENSION																	
<i>(972)</i>	<i>530-1950</i>																		
6 CAMPAIGN TREASURER NAME		<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; font-size: 8px;">MS / MRS / MR</td> <td style="width:30%;"><i>Mr.</i></td> <td style="width:15%; font-size: 8px;">FIRST</td> <td style="width:30%;"><i>Don</i></td> <td style="width:10%; font-size: 8px;">MI</td> <td style="width:10%;"></td> </tr> <tr> <td style="font-size: 8px;">NICKNAME</td> <td></td> <td style="font-size: 8px;">LAST</td> <td><i>Buchholz</i></td> <td style="font-size: 8px;">SUFFIX</td> <td></td> </tr> </table>		MS / MRS / MR	<i>Mr.</i>	FIRST	<i>Don</i>	MI		NICKNAME		LAST	<i>Buchholz</i>	SUFFIX		Date Hand-delivered or Date Postmarked			
MS / MRS / MR	<i>Mr.</i>	FIRST	<i>Don</i>	MI															
NICKNAME		LAST	<i>Buchholz</i>	SUFFIX															
7 CAMPAIGN TREASURER ADDRESS		<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:45%; 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:10%; font-size: 8px;">ZIP CODE</td> </tr> <tr> <td colspan="5"><i>7712 Glenshannon Circle, Dallas, TX 75225</i></td> </tr> </table>		STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE;	ZIP CODE	<i>7712 Glenshannon Circle, Dallas, TX 75225</i>					Receipt #					
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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 colspan="2"><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 colspan="2"><input checked="" 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 checked="" type="checkbox"/> Final Report (Attach C/OH - FR)					
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10 PERIOD COVERED		<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; font-size: 8px;">Month</td> <td style="width:15%; font-size: 8px;">Day</td> <td style="width:15%; font-size: 8px;">Year</td> <td style="width:20%;"></td> <td style="width:15%; font-size: 8px;">Month</td> <td style="width:15%; font-size: 8px;">Day</td> <td style="width:15%; font-size: 8px;">Year</td> </tr> <tr> <td><i>7</i></td> <td><i>1</i></td> <td><i>18</i></td> <td style="text-align: center;">THROUGH</td> <td><i>12</i></td> <td><i>31</i></td> <td><i>18</i></td> </tr> </table>				Month	Day	Year		Month	Day	Year	<i>7</i>	<i>1</i>	<i>18</i>	THROUGH	<i>12</i>	<i>31</i>	<i>18</i>
Month	Day	Year		Month	Day	Year													
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11 ELECTION		<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%; font-size: 8px;">ELECTION DATE</td> <td colspan="3" style="width:70%; font-size: 8px;">ELECTION TYPE</td> </tr> <tr> <td style="font-size: 8px;">Month    Day    Year</td> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> Runoff</td> <td colspan="2"><input type="checkbox"/> Other Description</td> </tr> <tr> <td>  /  /  </td> <td><input type="checkbox"/> General</td> <td><input type="checkbox"/> Special</td> <td colspan="2"></td> </tr> </table>				ELECTION DATE	ELECTION TYPE			Month    Day    Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description		/  /	<input type="checkbox"/> General	<input type="checkbox"/> Special		
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Month    Day    Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description																
/  /	<input type="checkbox"/> General	<input type="checkbox"/> Special																	
12 OFFICE		13 OFFICE SOUGHT (if known)																	
<i>Dallas County Commissioner District 2</i>																			

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME Mike Cantrell 15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

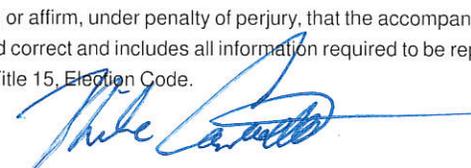
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

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

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ <u>— 0 —</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>— 0 —</u>
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ <u>— 0 —</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>7,909.69</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>— 0 —</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>— 0 —</u>

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.



Signature of Candidate or Officeholder



AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Mike Cantrell, this the 2nd day of Jan., 2019, to certify which, witness my hand and seal of office.

Kristi Padon Signature of officer administering oath  
Kristi Padon 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 <i>Mike Cantrell</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
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	\$ <i>7,909.69</i>
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	\$

# 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>1 of 4</b>	2 FILER NAME <b>Mike Cantrell</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>9-26-18</b>	5 Payee name <b>Bennie (Mitch) Lay</b>	
6 Amount (\$) <b>\$ 200.00</b>	7 Payee address; City; State; Zip Code <b>6450 Fm 36, Quinlan, TX 75474</b>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Gift/Awards/Memorial 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 <b>Anniversary Gift to Program Coordinator (Office staff)</b>
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <b>11-9-18</b>	Payee name <b>Perry's Restaurants</b>	
Amount (\$) <b>\$2,625.00</b>	Payee address; City; State; Zip Code <b>9805 Katy Freeway, Suite 650, Houston, TX 77024</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Food/Beverage Expense and Gift/Awards/Memorial 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 <b>Party Date 12-6-18 Payment required in advance. Christmas Party for Office Staff at 2000 McKinney Ave. Dallas, TX 75201 \$200 gift card to Darryl Martin - Court Administrator \$200 gift card to Gordon Nikel - Asst. Court Administrator</b>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held <b>411 Elm Street, Dallas, TX 75202</b>

Date <b>12-6-18</b>	Payee name <b>Traci Enna</b>	
Amount (\$) <b>\$1,000.00</b>	Payee address; City; State; Zip Code <b>8302 Cherry Hills, Rowlett, TX 75089</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Gift/Awards/Memorial 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 <b>Christmas Gift to Executive Assistant (Office Staff)</b>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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>2 of 4</b>	2 FILER NAME <b>Mike Cantrell</b>	3 Filer ID (Ethics Commission Filers)	
4 Date <b>12-6-18</b>	5 Payee name <b>Kristi Padon</b>		
6 Amount (\$) <b>\$1,000.00</b>	7 Payee address; City; State; Zip Code <b>4577 FM 35, Royse City, TX 75189</b>		
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Gift/Awards/Memorial 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 <b>Christmas Gift to Executive Assistant (office staff)</b>	
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought

Date <b>12-6-18</b>	Payee name <b>Tina Yampanis</b>		
Amount (\$) <b>\$1,000.00</b>	Payee address; City; State; Zip Code <b>4631 Ridgelaun, Dallas, TX 75214</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Gift/Awards/Memorial 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 <b>Christma Gift to Campaign Consultant</b>	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought

Date <b>12-6-18</b>	Payee name <b>Phyllis Vermillion</b>		
Amount (\$) <b>\$700.00</b>	Payee address; City; State; Zip Code <b>11928 Echo Drive, Balch Springs, TX 75180</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Gift/Awards/Memorial 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 <b>Christmas Gift to Office Manager (office staff)</b>	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought

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 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 of 4</b>	2 FILER NAME <b>Mike Cantrell</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>12-6-18</b>	5 Payee name <b>Bennie (Mitch) Lay</b>
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6 Amount (\$) <b>\$700.00</b>	7 Payee address; City; State; Zip Code <b>6450 FM 36, Quinlan, TX 75474</b>
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Gift/Awards/Memorial 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 <b>Christma Gift to Program Coordinator (office Staff)</b>
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>12-6-18</b>	Payee name <b>Audrey Miranda</b>
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Amount (\$) <b>\$400.00</b>	Payee address; City; State; Zip Code <b>101 N. Brookside Drive, #1509, Dallas, TX 75214</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Gift/Awards/Memorial 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 <b>Christma Gift to Executive Assistant (office Staff)</b>
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>12-11-18</b>	Payee name <b>Phylis Vermillion</b>
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Amount (\$) <b>\$150.00</b>	Payee address; City; State; Zip Code <b>11928 Echo Drive, Balch Springs, TX 75180</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Gift/Awards/Memorial 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 <b>Anniversary Gift to Office Manager (office Staff)</b>
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL 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>4 of 4</b>	2 FILER NAME <b>Mike Cantrell</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>12-28-18</b>	5 Payee name <b>Sali's Pizza</b>
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6 Amount (\$) <b>\$134.69</b>	7 Payee address; City; State; Zip Code <b>1238 Beltline Road, # 310, Garland, TX 75040</b>
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Food/Beverage 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 <b>Office Retirement Party</b>
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
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<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
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
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<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
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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**

# CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

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

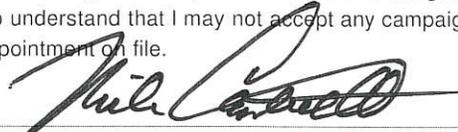
1 C/OH NAME

Mike Cantrell

2 Filer ID (Ethics Commission Filers)

3 SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.



Signature of Candidate / Officeholder

4 FILER WHO IS NOT AN OFFICEHOLDER

.. Complete A & B below *only* if you are not an officeholder. ..

A. CAMPAIGN FUNDS

Check only one:

I do not have unexpended contributions or unexpended interest or income earned from political contributions.

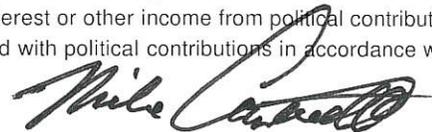
I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

B. ASSETS

Check only one:

I do not retain assets purchased with political contributions or interest or other income from political contributions.

I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.



Signature of Candidate

5 OFFICEHOLDER

.. Complete this section *only* if you are an officeholder ..

I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

Signature of Officeholder