

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME <i>Justin J. Koch</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>1360</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	\$ <i>3625.89</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	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 3
2 FILER NAME Justin J. Koch		3 Filer ID (Ethics Commission Filers)
4 Date 10/29/18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chel: D Myers	7 Amount of contribution (\$) 60.00
6 Contributor address; City; State; Zip Code 3630 Pinehurst Cir Farmers Branch TX 75234		
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Wrightson, Johnson, Hadden & Williams Inc
Date 11/5/18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Mang	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 422 Ridgewood Richardson TX 75080		
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Richard Real Estate
Date 11/9/18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vicki Goode	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 3137 Longmeade Dr Dallas TX 75239		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/7/18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grant Welsh	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 3434 Westminister Ave Dallas TX 75205		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) C/Jane Meadows PLLC

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:

3

2 FILER NAME

Justin J. Koch

3 Filer ID (Ethics Commission Filers)

4 Date

11/2/18

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

Aaron Kaufman

7 Amount of contribution (\$)

250.00

6 Contributor address; City; State; Zip Code

5124 Sea Pines Dr.
Dallas TX 75287

8 Principal occupation / Job title (See Instructions)

Retired

9 Employer (See Instructions)

Retired

Date

11/7/18

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

Monica Nobles Espinosa

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

1015 Sunningdale
Richardson, TX 75081

Principal occupation / Job title (See Instructions)

retired

Employer (See Instructions)

retired

Date

11/7/18

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

Robert Sundmaker

Amount of contribution (\$)

25.00

Contributor address; City; State; Zip Code

9058 Longmont Dr.
Suite 800
Dallas TX 75238

Principal occupation / Job title (See Instructions)

Director

Employer (See Instructions)

Relocation Strategies

Date

12/08/18

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

TE Sumner

Amount of contribution (\$)

25.00

Contributor address; City; State; Zip Code

3416 Enterprise Dr. Unit 620
Rowlett, TX 75030

Principal occupation / Job title (See Instructions)

Real Estate

Employer (See Instructions)

SELF

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

3

2 FILER NAME

Justin J. Koch

3 Filer ID (Ethics Commission Filers)

4 Date

12/19/18

5 Full name of contributor

Barbara Foreman

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

7 Amount of contribution (\$)

100.00

6 Contributor address; City; State; Zip Code

3815 Waldorf Cir.
Dallas TX 75229

8 Principal occupation / Job title (See Instructions)

retired

9 Employer (See Instructions)

retired

Date

Full name of contributor

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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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.

1 Total pages Schedule F1: 4	2 FILER NAME Justin J. Koel	3 Filer ID (Ethics Commission Filers)
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4 Date 10/29/18	5 Payee name Mailchimp
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6 Amount (\$) 159.90	7 Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE Suite 500 Atlanta GA 30308
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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
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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 11/5/18	Payee name Campaign Marketing Strategies Inc.
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Amount (\$) 1409.15	Payee address; City; State; Zip Code 3290 Wilson Blvd Suite 202 Arlington VA 22201
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	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 4/13/18	Payee name Campaign Marketing Strategies Inc.
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Amount (\$) 1000.00	Payee address; City; State; Zip Code 3290 Wilson Blvd Suite 202 Arlington VA 22201
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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.

1 Total pages Schedule F1: 4	2 FILER NAME Justin J. Koch	3 Filer ID (Ethics Commission Filers)
4 Date 11/14/18	5 Payee name Smokey Rose	
6 Amount (\$) 54.55	7 Payee address; City; State; Zip Code 8602 Garland Rd Dallas TX 75218	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Justin J. Koch Office sought Justin J. Koch Office held	
Date 11/16/18	Payee name The UPS store	
Amount (\$) 264.00	Payee address; City; State; Zip Code 5706 E. Mockingbird Lane Dallas TX 75206	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) office overhead/ Retail expense	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 Justin J. Koch Office sought Justin J. Koch Office held	
Date 11/29/18	Payee name Mailchimp	
Amount (\$) 159.90	Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE suite 500 Atlanta GA 30308	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	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 Justin J. Koch Office sought Justin J. Koch Office held	

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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.

1 Total pages Schedule F1: 4	2 FILER NAME Justin J. Koch	3 Filer ID (Ethics Commission Filers)
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4 Date 12/13/18	5 Payee name Go Daddy
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6 Amount (\$) 255.58	7 Payee address; City; State; Zip Code 14455 North Hayden Rd suite 100 Scottsdale, AZ 85260
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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
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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 12/12/18	Payee name Dallas Eagle Forum
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Amount (\$) 100.00	Payee address; City; State; Zip Code PO Box 671201 Dallas TX 75367
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	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 12/21/18	Payee name Bank of America
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Amount (\$) 12.00	Payee address; City; State; Zip Code 6300 E. Mockingbird Ln Dallas TX 75214
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	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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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: 4	2 FILER NAME Justin J. Koch	3 Filer ID (Ethics Commission Filers)
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4 Date 12/3/18	5 Payee name Mailchimp
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6 Amount (\$) 159.90	7 Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE Suite 300 Atlanta GA 30308
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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
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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 12/12/18	Payee name Raise the Money
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Amount (\$) 52.71	Payee address; City; State; Zip Code PO Box 26966 Little Rock AR 72221
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	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
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	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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