

# 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:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR      FIRST      MI <i>MR.</i> <i>ROY</i> <i>H</i> ----- NICKNAME      LAST      SUFFIX <i>WILLIAMS</i> <i>JR.</i>	<b>OFFICE USE ONLY</b>	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;    APT / SUITE #;    CITY;    STATE;    ZIP CODE <i>10455 N. CENTRAL EXPRESSWAY 2</i> <i>DALLAS, TX 75231-1109 #109-201</i>	RECEIVED DALLAS COUNTY ELECTIONS 2018 FEB 05 05:25 PM	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE      PHONE NUMBER      EXTENSION <i>(214) 498-3113</i>	Date Hand-delivered or Date Postmarked	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR      FIRST      MI <i>MR.</i> <i>ROY</i> <i>H</i> ----- NICKNAME      LAST      SUFFIX <i>WILLIAMS</i> <i>JR.</i>	Receipt #	Amount \$
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);    APT / SUITE #;    CITY;    STATE;    ZIP CODE <i>523 PALOMINO WAY GRANDPRAIRIE, TX 75052</i>		
8 CAMPAIGN TREASURER PHONE	AREA CODE      PHONE NUMBER      EXTENSION <i>(214) 498-3113</i>		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" 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	Month    Day    Year      THROUGH      Month    Day    Year <i>01 / 01 / 2018</i> <i>2 / 5 / 2018</i>		
11 ELECTION	ELECTION DATE Month    Day    Year <i>3 / 16 / 2018</i>	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)  <i>SHERIFF</i>	

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

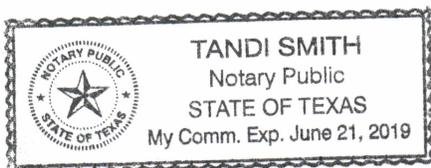
FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME	15 Filer ID (Ethics Commission Filers)
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16 NOTICE FROM POLITICAL COMMITTEE(S)  <input type="checkbox"/> Additional Pages	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

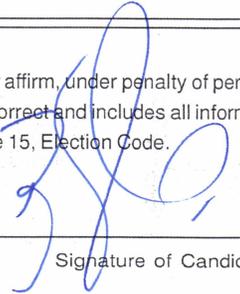
17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 3,225.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 7,036.31
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 1,613.94
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

18 AFFIDAVIT

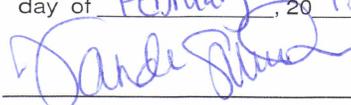


AFFIX NOTARY STAMP / SEAL ABOVE

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

Sworn to and subscribed before me, by the said Roy Williams, this the 5th day of February, 2018, to certify which, witness my hand and seal of office.

  
Signature of officer administering oath

Tandi Smith  
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>ROY H. WILLIAMS, Jr.</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>3,225<sup>00</sup></i>
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ <i>0</i>
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ <i>0</i>
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ <i>0</i>
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>7,036.31</i>
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ <i>0</i>
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>0</i>
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ <i>0</i>
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ <i>0</i>
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ <i>0</i>
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>0</i>
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ <i>0</i>

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

1 of 3

2 FILER NAME

ROY. H. WILLIAMS, JR.

3 Filer ID (Ethics Commission Filers)

4 Date

01.05.18

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

ROY WILLIAMS SR.

6 Contributor address; City; State; Zip Code

205 WINDWOOD DR  
DESO TO, TX 75115

7 Amount of contribution (\$)

250.00

8 Principal occupation / Job title (See Instructions)

RETIRED

9 Employer (See Instructions)

Date

01.10.18

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

LORENZO COLE

Contributor address; City; State; Zip Code

7008 GLACIER  
DALLAS, TX 75229

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

RETIRED

Employer (See Instructions)

Date

01.12.18

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

EMMA WALKER

Contributor address; City; State; Zip Code

2700 GREEN BROOK DR.  
ARLINGTON, TX 76018

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

PRIVATE CITIZEN

Employer (See Instructions)

Date

01.13.18

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

ARETHA HICKS

Contributor address; City; State; Zip Code

9645 CLUSTER DR.  
DALLAS, TX 75228

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

PRIVATE CITIZEN

Employer (See Instructions)

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:

2 of 3

2 FILER NAME

ROY H. WILLIAMS, JR.

3 Filer ID (Ethics Commission Filers)

4 Date

01.14.18

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

GARY GARCIA

7 Amount of contribution (\$)

100.00

6 Contributor address; City; State; Zip Code

704 BROOK HURST DR.  
DALLAS, TX 75218

8 Principal occupation / Job title (See Instructions)

PRIVATE CITIZEN

9 Employer (See Instructions)

Date

01.14.18

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

KEVIN J. WILLIAMS

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

605 RENAISSANCE  
CEDAR HILL, TX 75104

Principal occupation / Job title (See Instructions)

PRIVATE CITIZEN

Employer (See Instructions)

Date

01.19.18

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

KENICE JACKSON

Amount of contribution (\$)

25.00

Contributor address; City; State; Zip Code

1839 BROOK TERRACE  
DALLAS, TX 75232

Principal occupation / Job title (See Instructions)

PRIVATE CITIZEN

Employer (See Instructions)

Date

01.19.18

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

KATHLEEN WILLIAMS

Amount of contribution (\$)

400.00

Contributor address; City; State; Zip Code

2019 WILSHIRE DR  
IRVING, TX 75061

Principal occupation / Job title (See Instructions)

RETIRED

Employer (See Instructions)

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 of 3

2 FILER NAME

ROY H. WILLIAMS, JR.

3 Filer ID (Ethics Commission Filers)

4 Date

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

LIBBIE LEE

7 Amount of contribution (\$)

500.00

6 Contributor address; City; State; Zip Code

1317 CARRIAGE CREEK DR.  
DESOITE, TX 75115

01.21.18

8 Principal occupation / Job title (See Instructions)

PRIVATE CITIZEN

9 Employer (See Instructions)

Date

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

ROYCE WEST CAMPAIGN COMMITTEE

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code

5487 S. HAMPTON RD. STE # 255  
DALLAS, TX 75232

0.17.18

Principal occupation / Job title (See Instructions)

SENATOR

Employer (See Instructions)

STATE OF TEXAS

Date

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

SMITH PROTECTIVE SERVICES EMP.  
PAF.

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code

4440 BELTWAY DR.  
ADDISON, TX 75001

12.26.17

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

TED B. LYONS & ASSOCIATES

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code

18601 LBJ FRWY. STE 525  
MESQUITE, TX 75150

01.22.18

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# 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: <i>(3) 1003</i>	<b>2</b> FILER NAME <i>ROY H. WILLIAMS, JR.</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>01.16.18</i>	<b>5</b> Payee name <i>ALL-MARK IMPRESSIONS LTD</i>	
<b>6</b> Amount (\$) <i>441.12</i>	<b>7</b> Payee address; City; State; Zip Code <i>823 N. RIVERSIDE DRIVE FT. WORTH, TX 76111</i>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>ADVERTISING EXPENSE</i>	<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 <i>CAMPAIGN SHIRTS</i>

<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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Date <i>01.17.18</i>	Payee name <i>KER GRAPHICS</i>
Amount (\$) <i>1,677.88</i>	Payee address; City; State; Zip Code <i># 3915 MAIN ST DALLAS, TX 75226</i>

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>ADVERTISING EXPENSE</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>CAMPAIGN PRINTING/SIGNS</i>
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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 <i>01.30.18</i>	Payee name <i>ECO LATINO RADIO</i>
Amount (\$) <i>500.00</i>	Payee address; City; State; Zip Code <i>12900 PRESTON RD DALLAS, TX 75230</i>

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>ADVERTISING EXPENSE</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>RADIO ADVERTISING</i>
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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

# SCHEDULE F

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <b>(3) 2 of 3</b>	2 FILER NAME <b>ROY H. WILLIAMS, JR.</b>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <b>01.09.18</b>	5 Payee name <b>SKYLINE PRINTERS</b>
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6 Amount (\$) <b>1,704.93</b>	7 Payee address; City; State; Zip Code <b>3405 MAIN ST. DALLAS, TX 75226</b>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <b>PRINTING EXPENSE</b>	(b) Description (If travel outside of Texas, complete Schedule T) <b>ADVERTISING EXPENSE</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>01.11.18</b>	Payee name <b>CAMPAIGN TECHNIQUES</b>
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Amount (\$) <b>150.00</b>	Payee address; City; State; Zip Code <b>100 CRESCENT COURT STE. 700 DALLAS, TX 75202</b>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>CONSULTING EXPENSE</b>	Description (If travel outside of Texas, complete Schedule T)
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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>01.12.18</b>	Payee name <b>LOGO FACTORY</b>
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Amount (\$) <b>162.38</b>	Payee address; City; State; Zip Code <b>116 N.W. 15th St. GRAND PRAIRIE, TX 75050</b>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>ADVERTISING EXPENSE</b>	Description (If travel outside of Texas, complete Schedule T) <b>GRAPHICS FOR SHIRTS</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>02.02.18</b>	Payee name <b>DALLAS COUNTY EAST DEMS</b>
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Amount (\$) <b>\$75.00</b>	Payee address; City; State; Zip Code <b>2059 PECAN CREEK DR. MESQUITE, TX 75181</b>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>ADVERTISING EXPENSE</b>	Description (If travel outside of Texas, complete Schedule T) <b>ADVERTISING</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

# SCHEDULE F

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: 3 of 3	<b>2</b> FILER NAME ROY H. WILLIAMS, JR.	<b>3</b> ACCOUNT # (Ethics Commission Filers)
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<b>4</b> Date 01.30.18	<b>5</b> Payee name FAR NORTH DALLAS DEMOCRATS
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<b>6</b> Amount (\$) 25.00	<b>7</b> Payee address; City; State; Zip Code P.O. BOX 795247 DALLAS, TX 75379
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) FEES	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) DUES
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 01.31.18	Payee name OBAMA FEST
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Amount (\$) 2,000.00	Payee address; City; State; Zip Code 2504 PINE ST. DALLAS, TX
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE	Description (If travel outside of Texas, complete Schedule T) MAILERS
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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 02.01.18	Payee name PVL - NEW ERA
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Amount (\$) 250.00	Payee address; City; State; Zip Code P.O. BOX 398647 DALLAS, TX 75339
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) ADVERTISING	Description (If travel outside of Texas, complete Schedule T) MAILER
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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 02.02.18	Payee name TONI ROSE CAMPAIGN
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Amount (\$) 50.00	Payee address; City; State; Zip Code P.O. BOX 41867 DALLAS, TX 75241
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) GIFT CONTRIBUTION DONATION	Description (If travel outside of Texas, complete Schedule T) DONATION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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