# **CANDIDATE / OFFICEHOLDER**

## FORM C/OH

	GN FINANCE REPORT		COVER SHEET PG 1
The C/OH Instruction	on Guide explains how to complete this form.	1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDE NAME	MS/MRS/MR) Braddock NICKNAME Brad Schofield	MI Suffix	OFFICE USE ONLY Date Received
4 CANDIDATE / OFFICEHOLDE MAILING ADDRESS Change of address	ADDRESS / PO BOX; APT / SUITE #; CITY;	STATE; ZIP CODE	Date Hand-delivered or Postmarked
5 CANDIDATE/ OFFICEHOLDE PHONE	R (817) 521 9427	EXTENSION	Receipt # Amount  Date Processed
6 CAMPAIGN TREASURER NAME	MS/MRS (MR) Braddock NICKNAME Brad Schofield	SUFFIX	Date imaged
CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO POBOX PLEASE); APT/SUITE#, 409 Shumard Oak trail	city; state; Her TX	76248
CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (817) 5219427	EXTENSION	
REPORT TYPE	January 15 30th day before election  July 15 8th day before election	Runoff  Exceeded \$500   limit	15th day after campaign treasurer appointment (officeholder only)  Final report (Attach C/OH - FR)
PERIOD COVERED	Month Day Year H 3 / 12 THROUGH	Month Day 5 / 2 /	Year 12
ELECTION	Month Day Year ELECTION TYPE  Month Day Year Primary	Runoff Ge	neral Special
	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	

#### **CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS**

FORM C/OH COVER SHEET DG 2

				ER Cheel PG Z
14 C/OH NAME Braddock	"Brod"	Anderson Schoffeld 1	5 ACCOUNT	T# (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 METICALE THE CANDIDATE OF THE CANDIDATE.			
	COMMITTEE TYPE  GENERAL  SPECIFIC	COMMITTEE NAME  COMMITTEE ADDRESS		
additional pages		COMMITTEE CAMPAIGN TREASURER NAME	<del></del>	
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
17 CONTRIBUTION TOTALS	1. TOTAL I	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE	\$	Ø
	2. TOTAL (OTHER	POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	Ø
EXPENDITURE TOTALS	3. TOTAL F	OLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEM	IZED \$	Ø
	4. TOTAL	POLITICAL EXPENDITURES	\$	6,399.23
CONTRIBUTION BALANCE	5. TOTAL P OF REPO	OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DA DRTING PERIOD	AY \$	1,211,27
OUTSTANDING LOAN TOTALS	6. TOTAL P LAST DA	RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF TH Y OF THE REPORTING PERIOD	<sup>1E</sup> \$	2,000.00
18 AFFIDAVIT			<del></del>	
		I swear, or affirm, under penalty of p is true and correct and includes all in me under Title 15, Election Code.  Signature of Candi	nformation re	equired to be reported by
		ne, by the said <u>Bradoock "Brad" M</u>	-	·
		Janathan Rodrianez	NOTA	on Lien in
Signature of officer admin	istering oath	Printed name of officer administering pan	Nota	At ACONGUEZering path ary Public
vww.ethics.state.tx.us		G. C.	STATE My Comm. I	Exp. May 28, 1362 0 28/2011

LOANS				SCHEDULE E
The	Instruction Guide explains how to com	plete this form.	1 Total pa	ges Schedule E:
2 FILER NAME			3 ACCOU	NT # (Ethics Commission Filers)
Braddo	ck "Brod" Anderson	Schofield		
<b>4</b> тот/	AL OF UNITEMIZED LOANS:		₽	\$
5 Date of loan		out-of-state PAC (ID#:	)	9 Loan Amount (\$)
4/24/12	Brad A. Schofield			2,000.00
6 Is lender a financial	8 Lender address; City; State;			10 Interest rate
Institution?	409 Shumard Oak	trail		N(A
Y 🕜	Keller, TX 76248			NIA
12 Principal occupat	ion / Job title (See Instructions)	13 Employer (See Instructions)	<u>.</u>	
Account	ant	ACM		
14 Description of Col	lateral	15 Check if personal funds were	deposited	into political account
none none		<b>X</b>		
16 GUARANTOR INFORMATION	17 Name of guarantor			19 Amount Guaranteed (\$)
not applicable	18 Guarantor address; City;	State; Zip Code		
20 Principal Occupat	ion (See Instructions)	21 Employer (See Instructions)		
Date of loan	Name of lender	out-of-state PAC (ID#		Loan Amount (\$)
ls lender a financial Institution?	Lender address; City; State;	Zip Code		Interest rate
Y N				Maturity date
Principal occupati	on / Job title (See Instructions)	Employer (See Instructions)	1	· · · · · · · · · · · · · · · · · · ·
Description of Colla	ateral	Check if personal funds were o	deposited in	nto political account
GUARANTOR INFORMATION	Name of guarantor			Amount Guaranteed (\$)
not applicable	Guarantor address; City;			
Principal Occupati	on (See Instructions)	Employer (See Instructions)		
If lend	ATTACH ADDITIONAL COPII ler is out-of-state PAC, please see instr	ES OF THIS SCHEDULE AS NEED		lirements

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

### **POLITICAL EXPENDITURES**

SCHEDULE F

		draising Expense  Contributions (Ponstions Media Pro-	
Event Expense Fees	Polling Expense Travel Out Of District Candidate/Officeholder/Political Commi		
1 663	Printing Expense Office Overhea  The Instruction Guide explains how	d/Rental Expense OTHER (enter a category not listed above)	
1 Total pages Schedule F:	2 FILER NAME		
3	Braddock "Brad" Anderson	Schofield 3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4 7 1 1 2	5 Payee name Staples		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
4.86	8000 Denton Hwy Juite 108		
	Watauga, 1 X 1/6/148		
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)	
EXPENDITURE	Event Expense	Clipboards for Crawfish festival	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name OH	Office sought Office held	
Date 4   9   17	Payee name Sign-A - Rama		
Amount (\$)	Payee address; City; State; Zip Code		
	750 S. main St. Ste 14:	<del>-</del> -	
1,785.00	Keller, TX 76248	>	
PURPOSE OF	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)	
EXPENDITURE	Advertising Expense	Yard and Road Signs	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH	Office sought Office held	
Date	Payee name		
4/11/12	GoDaddy		
Amount (\$)	Payee address; City; State; Zip Code		
0	14455 N. Hayden Rd. Ste	2 <b>2</b> C	
ソヘしんに	1 1 10 10 10 10 10 10 10 10 10 10 10 10		
201,66			
PURPOSE	Scottsdale, AZ 85260 Category (See categories listed at the top of this schedule)		
	Scottsdale, AZ 85260 Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)	
PURPOSE OF	Scottsdale, AZ 85260 Category (See categories listed at the top of this schedule) Adversing Expense Candidate / Officeholder name		
PURPOSE OF EXPENDITURE Complete ONLY if direct	Scottsdale, AZ 85260 Category (See categories listed at the top of this schedule) Adversing Expense Candidate / Officeholder name	Description (If travel outside of Texas, complete Schedule T) Web Site and email	
PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/O	Scottsdale, A2 85260 Category (See categories listed at the top of this schedule) Adversing Expense Candidate / Officeholder name  Payee name	Description (If travel outside of Texas, complete Schedule T) Web Site and email	
PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/O	Scottsdale, AZ 85260 Category (See categories listed at the top of this schedule) Adversing Expense Candidate / Officeholder name  Payee name	Description (If travel outside of Texas, complete Schedule T) Web Site and email	
PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/O  Date 41312  Amount (\$)	Category (See categories listed at the top of this schedule)  Adversing Expense  Candidate / Officeholder name  Payee name  Academy Sports  Payee address; City; State; Zip Code	Description (If travel outside of Texas, complete Schedule T) Web Site and email	
PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/O  Date 41312	Category (See categories listed at the top of this schedule)  Adversing Expense  Candidate / Officeholder name  Payee name  Academy Sports  Payee address; City; State; Zip Code  5836 N. Tarrant Pkwy	Description (If travel outside of Texas, complete Schedule T) Web Site and email	
PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/O  Date 4 13 12  Amount (\$)  28 1.41  PURPOSE	Category (See categories listed at the top of this schedule)  Adversing Expense  Candidate / Officeholder name  Payee name  Academy Sports  Payee address; City; State; Zip Code	Description (If travel outside of Texas, complete Schedule T)  Web Site and emoul  Office sought  Office held	
PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/O  Date 4 13 12  Amount (\$)  281.41	Category (See categories listed at the top of this schedule)  Adversing Expense  Candidate / Officeholder name  Payee name  Academy Sports  Payee address; City; State; Zip Code  5836 N. Tarrant Pkwy  Fort worth, tx 76137  Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)  Web Site and emou  Office sought  Office held  Description (If travel outside of Texas, complete Schedule T)	
PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/O  Date 4 13 12  Amount (\$)  28   4    PURPOSE OF	Category (See categories listed at the top of this schedule)  Adversing Expuse  Candidate / Officeholder name  Payee name  Academy Sports  Payee address; City; State; Zip Code  5836 N. Tarrant Pkwy  Fort worth, tx 76137  Category (See categories listed at the top of this schedule)  Event Expense  Candidate / Officeholder name	Description (If travel outside of Texas, complete Schedule T)  Web Site and emoul  Office sought  Office held	

### **POLITICAL EXPENDITURES**

#### SCHEDULE F

Advantaine Forces	EXPENDITURE CATEGO	, , ,
Advertising Expense		ages/Contract Labor Loan Repayment/Reimbursement
Accounting/Banking Consulting Expense		/Fundraising Expense Transportation Equipment & Related Expense
Event Expense	Food/Beverage Expense Travel In D Polling Expense Travel Out	District Contributions/Donations Made By
Fees	- ,	The state of the s
		rhead/Rental Expense OTHER (enter a category not listed above)
	The Instruction Guide explains h	ow to complete this form.
1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
	Braddock "Brad" Ande	rson Schotled
4 Date	5 Payee name	
4/13/12	Party Coty	
11.01.0		
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
	7620 Denton Highway:	Suite Calla
557.51	MINTANNA TY ACINO	
	Watauga, TX 26148	
8 PURPOSE	(a) Category (See categories listed at the top of this schedule	(b) Description (If travel outside of Texas, complete Schedule T)
OF EXPENDITURE	Travil Transport	
EXPENDITORE	Event Expense	Helium Ballons for Crowfish festive
9 Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
expenditure to benefit C/	ОН	
D-4-		
Date	Payee name	
4114112	EmbroidMe	
Amount (\$)	Payee address; City; State; Zip Co	de
	800 S. main St.	
129 00	BOO S. MICHAY St.	
129.90	Keller, TX 76248	
PURPOSE	Category (See categories listed at the top of this schedule	
OF		Description (If travel outside of Texas, complete Schedule T)
EXPENDITURE	Event Expense	T-Shirts for Crowfish Festival
Complete ONLY if direct	Candidate / Officeholder name	
	·	Office sought Office held
expenditure to benefit C/C	·	Office sought Office held
	·	Office sought Office held
expenditure to benefit C/0	DH The state of th	Office sought Office held
Date 4 116 12	Payee name Payty City	
expenditure to benefit C/0	Payee name Payty City Payee address; City; State; Zip Coo	de
Date 4 116 12	Payee name Payty City Payee address; City; State; Zip Coo	de
Date 4 116 12	Payee name Party City Payee address; City; State; Zip Coo 7620 Denton Highway	de
Date 4 116 12	Payee name Party City Payee address; City; State; Zip Coo 7620 Denton Highway wataya, TX 76148	se Svite (e16
Date 4   16   12 Amount (\$) PURPOSE	Payee name Party City Payee address; City; State; Zip Coo 7620 Denton Highway	se Svite (e16
Date 4   16   12  Amount (\$)  PURPOSE OF	Payee name Party City Payee address; City; State; Zip Coo 7620 Denton Highway wataya TX 76148 Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Date 4   16   12 Amount (\$) PURPOSE	Payee name Party City Payee address; City; State; Zip Coo 7620 Denton Highway wataya, TX 76148	se Svite Collo
Date 4   16   12  Amount (\$)  PURPOSE OF EXPENDITURE  Complete ONLY if direct	Payee name Party City Payee address; City; State; Zip Coo 7620 Denton Highway watarga TX 76148 Category (See categories listed at the top of this schedule) OTHER - OVEr Charge Candidate / Officeholder name	Description (If travel outside of Texas, complete Schedule T)
Date 4   16   12  Amount (\$)  PURPOSE OF EXPENDITURE	Payee name Party City Payee address; City; State; Zip Coo 7620 Denton Highway watarga TX 76148 Category (See categories listed at the top of this schedule) OTHER - OVEr Charge Candidate / Officeholder name	Description (If travel outside of Texas, complete Schedule T)  Charged twice on 4/13 parchase
Date 4   16   12  Amount (\$)  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/C	Payee name Party City Payee address; City; State; Zip Coo 7620 Denton Highway wataya 7x 76148 Category (See categories listed at the top of this schedule OTHER - OVEr Charge Candidate / Officeholder name	Description (If travel outside of Texas, complete Schedule T)  Charged twice on 4/13 parchase
Date 4   16   12  Amount (\$)  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/O	Payee name Party City Payee address; City; State; Zip Coo 7620 Denton Highway watarga TX 76148 Category (See categories listed at the top of this schedule) OTHER - OVEr Charge Candidate / Officeholder name	Description (If travel outside of Texas, complete Schedule T)  Charged twice on 4/13 parchase
Date 4   16   12  Amount (\$)  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/C	Payee name Party City Payee address; City; State; Zip Coo 7620 Denton Highway wataya 7x 76148 Category (See categories listed at the top of this schedule OTHER - OVEr Charge Candidate / Officeholder name	Description (If travel outside of Texas, complete Schedule T)  Charged twice on 4/13 parchase
Date 4   16   12  Amount (\$)  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/O	Payee name Party City Payee address; City; State; Zip Coo 7620 Denton Highway wataya, Tx 76148 Category (See categories listed at the top of this schedule) OTHER - OVEr Charge Candidate / Officeholder name  Payee name Home Depot	Description (If travel outside of Texas, complete Schedule T)  Charged twice on 4/13 purchase  Office sought  Office held
Date 4   16   12  Amount (\$)  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/C	Payee name Party City Payee address; City; State; Zip Coo 7620 Denton Highway watarga, Tx 76148 Category (See categories listed at the top of this schedule) OTHER - OVEr Charge Candidate / Officeholder name  Payee name Home Depot Payee address; City; State; Zip Cod	Description (If travel outside of Texas, complete Schedule T)  Charged twice on 4/13 purchase  Office sought  Office held
Date 4   16   12  Amount (\$)  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/C	Payee name Party City Payee address; City; State; Zip Coo 7620 Denton Highway wataya, Tx 76148 Category (See categories listed at the top of this schedule) OTHER - OVEr Charge Candidate / Officeholder name  Payee name Home Depot	Description (If travel outside of Texas, complete Schedule T)  Charged twice on 4/13 purchase  Office sought  Office held
Date 4   16   12  Amount (\$)  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/C	Payee name Party City Payee address; City; State; Zip Coo 7620 Denton Highway Watauga, TX 76148 Category (See categories listed at the top of this schedule) OTHER - OVEr Charge Candidate / Officeholder name  Payee name Home Depot Payee address; City; State; Zip Cod 2013 Hwy 377	Description (If travel outside of Texas, complete Schedule T)  Charged twice on 4/13 purchase  Office sought  Office held
Date 4   16   12  Amount (\$)  454,   1  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/O  Date 4   24   11  Amount (\$)  37,31	Payee name Party City Payee address; City; State; Zip Coo 7620 Denton Highway Wataya, TX 76148 Category (See categories listed at the top of this schedule) OTHER - Over Charge Candidate / Officeholder name  Payee name Home Depot Payee address; City; State; Zip Cod 2013 Hwy 377 Keller, TX 76248	Description (If travel outside of Texas, complete Schedule T)  Charged twice on 4/13 parchase  Office sought  Office held
Date 4   16   12  Amount (\$)  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/C	Payee name Party City Payee address; City; State; Zip Coo 7620 Denton Highway Watauga, TX 76148 Category (See categories listed at the top of this schedule) OTHER - OVEr Charge Candidate / Officeholder name  Payee name Home Depot Payee address; City; State; Zip Cod 2013 Hwy 377 Keller, TX 76248 Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)  Charged twice on 4/13 purchase  Office sought  Office held
Date 4   16   12  Amount (\$)  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/O  Date 4   24   11  Amount (\$)  37.31  PURPOSE	Payee name Party City Payee address; City; State; Zip Coo 7620 Denton Highway Wataya, TX 76148 Category (See categories listed at the top of this schedule) OTHER - OVEr Charge Candidate / Officeholder name  Payee name Home Depot Payee address; City; State; Zip Cod 2013 Hwy 377 Keller, TX 76248 Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)  Charged twice on 4/13 purchase  Office sought  Office held  Description (If travel outside of Texas, complete Schedule T)
Date 4   16   12  Amount (\$)  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/C  Date 4   24   11  Amount (\$)  37.31  PURPOSE OF EXPENDITURE	Payee name Party City Payee address; City; State; Zip Coo 7620 Denton Highway Wataya, TX 76148 Category (See categories listed at the top of this schedule) OTHER - OVEr Charge Candidate / Officeholder name  Payee name Home Depot Payee address; City; State; Zip Cod 2013 Hwy 377 Keller, TX 76248 Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T)  Charged twice on 4/13 parchase  Office sought  Office held  Description (If travel outside of Texas, complete Schedule T)  Ties far Road Signs
Date 4   16   12  Amount (\$)  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/O  Date 4   24   11  Amount (\$)  37.31  PURPOSE OF EXPENDITURE  Complete ONLY if direct complete ONLY if direct dire	Payee name Party City Payee address; City; State; Zip Coo 7620 Denton Highway Wataya, TX 76148 Category (See categories listed at the top of this schedule) OTHER - OVEr Charge Candidate / Officeholder name  Payee name Home Depot Payee address; City; State; Zip Cod 2013 Hwy 377 Keller, TX 76248 Category (See categories listed at the top of this schedule) Advertising Expense Candidate / Officeholder name	Description (If travel outside of Texas, complete Schedule T)  Charged twice on 4/13 purchase  Office sought  Office held  Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF EXPENDITURE  Date 4 16 12  Amount (\$)  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/C  Date 4 24 11  Amount (\$)  37.31  PURPOSE OF EXPENDITURE	Payee name Party City Payee address; City; State; Zip Coo 7620 Denton Highway Wataya, TX 76148 Category (See categories listed at the top of this schedule) OTHER - OVEr Charge Candidate / Officeholder name  Payee name Home Depot Payee address; City; State; Zip Cod 2013 Hwy 377 Keller, TX 76248 Category (See categories listed at the top of this schedule) Advertising Expense Candidate / Officeholder name	Description (If travel outside of Texas, complete Schedule T)  Charged twice on 4/13 parchase  Office sought  Office held  Description (If travel outside of Texas, complete Schedule T)  Ties for Road Signs
Date 4   16   12  Amount (\$)  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/C  Date 4   24   11  Amount (\$)  37.31  PURPOSE OF EXPENDITURE  Complete ONLY if direct	Payee name Party City Payee address; City; State; Zip Coo 7620 Denton Highway Wataya, TX 76148 Category (See categories listed at the top of this schedule) OTHER - OVEr Charge Candidate / Officeholder name  Payee name Home Depot Payee address; City; State; Zip Cod 2013 Hwy 377 Keller, TX 76248 Category (See categories listed at the top of this schedule) Advertising Expense Candidate / Officeholder name	Description (If travel outside of Texas, complete Schedule T)  Charged twice on 4/13 purchase  Office sought  Office held  Description (If travel outside of Texas, complete Schedule T)  Ties far Road Signs  Office sought  Office held

Advertising Expense

Accounting/Banking

Consulting Expense

#### POLITICAL EXPENDITURES

P.O. Box 12070

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Gift/Awards/Memorials Expense Legal Services	Salaries/Wages/Contract Labor Solicitation/Fundraising Expense	Loan Repayment/Reimbursement	
Food/Beverage Expense	Travel In District	Transportation Equipment & Related Expense Contributions/Donations Made By	
Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee	
Printing Evnense	Office Overhead/Dental Evaces	OTHER (see a see a	

ations Made By eholder/Political Committee **Event Expense** Pollin Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Braddock "Brad" Anderson Schofield 1 Total pages Schedule F: 2 FILER NAME 3 ACCOUNT # (Ethics Commission Filers) 4 Date Sign-A-Round
7 Payee address; City; State; Zip Code 4 26 12 6 Amount (\$) 750 S. main St. Ste, 145 1,785.00 Keller TX 76248

(a) Category (See categories listed at the top of this schedule) **PURPOSE** (b) Description (If travel outside of Texas, complete Schedule T) Advertising Expense Yard and Road Signs **EXPENDITURE** 9 Complete ONLY if direct expenditure to benefit C/OH Payee name 4/28/12 Home Depot Payee address; Ci Amount (\$) City; State; Zip Code 2013 Huby 377 Keller, TX 76248 Category (See categories listed at the top of this schedule) 30,86 **PURPOSE** Description (If travel outside of Texas, complete Schedule T) Ties for Road Signs Advertising Expense EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH 4|22|12 Amount (\$) Lowe's
Payee address; City; State; Zip Code 600 N. Tarrant Pkwy Keller TX 76248 Category (See categories listed at the top of this schedule) 809.37 Description (If travel outside of Texas, complete Schedule T) **PURPOSE** OF T-Post for Road signs Advertising Expense
Candidate / Officeholder name EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Allegra
Payee address; City; State; Zip Code Amount (\$) 7124 mid Cities Blud 117.99 North Richland Hills, TX 76180

Category (See categories listed at the top of this schedule)

Description **PURPOSE** Description (If travel outside of Texas, complete Schedule T) OF Advertising Expense EXPENDITURE Complete ONLY if direct Office held expenditure to benefit C/OH

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

## POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

#### SCHEDULE G

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. 2 FILER NAME 1 Total pages Schedule G: 3 ACCOUNT # (Ethics Commission Filers) Broddock "Brod" Anderson Schofield 4 Date Direct Promotionals

Payee address; City; State; Zip Code 6 Amount (\$) 2327 Englert Dr Sixte 302 170.25 Reimbursement from Durham, NC 27713 political contributions intended **PURPOSE** (b) Description (If travel outside of Texas, complete Schedule T) Advertising Expense **EXPENDITURE** magnets to Remember the date Date Timarron Country Club
Payee address; City; State; Zip Code Amount (\$) 34,00 1400 Byron Nelson Parkway Southlake, TX 76092

Description (If travel outside of Texas, complete Schedule T)

1:1-10 Farty Reimbursement from political contributions intended **PURPOSE** OF Food/Beverage Expense | RWNT Candidate Forum **EXPENDITURE** Date Payee name Amount (\$) Pavee address: City; State; Zip Code Reimbursement from political contributions intended Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** OF **EXPENDITURE** Date Pavee name Amount (\$) Pavee address: City; State; Zip Code Reimbursement from political contributions intended Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** OF **EXPENDITURE** ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

#### INTEREST EARNED, OTHER CREDITS/GAINS/ REFUNDS, AND PURCHASE OF INVESTMENTS

#### SCHEDULE K

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule K:
2 FILER NAME Bradd	ock "Brad" Anderson Schofield	3 ACCOUNT # (Ethics Commission Filers)
4 Date	5 Name of person from whom amount is received	8 Amount
4/10/12	Party City 6 Address of person from whom amount is received; City; State; Zip Code	0,00
	7620 Denton Highway Suite (ell	a
	watarga, TX 76148	
	7 Purpose for which amount is received  Return of unused Ballons (Credi	t)
Date	Name of person from whom amount is received	Amount
4/16/12	Party City  Address of person from whom amount is received; City; State; Zip Code  7620 Devitor Highway Sirke (e)	
	watarga, TX 76148	
	Return of unused Helium and	deposit (credit)
Date	Name of person from whom amount is received	Amount (\$)
4/16/12	Party City  Address of person from whom amount is received; City; State; Zip Code  7620 Denton Highway Suite (el	454.11
	watauga,TX 76148	
	Purpose for which amount is received  Credit for over charge on 4/16/12 (	see Schedule F)
Date	Name of person from whom amount is received	Amount (\$)
4/21/12	A cademy Sports  Address of person from whom amount is received; City; State; Zip Code  5836 N. Tarrant Pkwy  Fort Worth, TX 76137	238.12
	Purpose for which amount is received Refund on Broken Canopy for cro	usfish festival (credit)
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE	AS NEEDED