



# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

13 C/OH NAME Hardin, Shane (Mr.)

14 ACCOUNT # (Ethics Commission filers)  
00050747

15 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures 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

16 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 95.00
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 895.00
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 390.46
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4. TOTAL POLITICAL EXPENDITURES	\$ 706.13
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CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 970.00
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OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
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17 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.

*[Handwritten Signature]*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Shane Hardin, this the 2 day of May, 2014, to certify which, witness my hand and seal of office.

Diana C. Pyron  
Signature of officer administering oath

Diana C. Pyron  
Print name of officer administering oath

notary public  
Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 3/4	
2 FILER NAME Hardin, Shane (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00050747	
4 Date  04/18/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chibli, Eduardo (Mr.)  6 Contributor address; City; State; Zip Code 101 Quail Run Street Colleyville, TX 76034	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Owner		10 Employer (See Instructions) Chibli Stone Works	
Date  04/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mid-Cities Democrats  Contributor address; City; State; Zip Code P.O. Box 271 Bedford, TX 76095	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  04/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mid-Cities Democrats  Contributor address; City; State; Zip Code P.O. Box 271 Bedford, TX 76095	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  04/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morales, Shelley (Mrs.)  Contributor address; City; State; Zip Code 2806 Highcrest Drive Grapevine, TX 76051	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Arlington ISD	
Date  04/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pacleb, Calvin (Mr.)  Contributor address; City; State; Zip Code 714 E. Wall Street Apt. 109 Grapevine, TX 76051	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Treasury Analyst		Employer (See Instructions) Santander Consumer USA	

**POLITICAL EXPENDITURES**

**SCHEDULE F**

**EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 1/1 Report: 4/4		<b>2</b> FILER NAME Hardin, Shane (Mr.)		<b>3</b> ACCOUNT # (TEC filers) 00050747
<b>4</b> Date 04/22/2014	<b>5</b> Payee name Speedy Signs			
<b>6</b> Amount (\$) \$315.67	<b>7</b> Payee address City; State; Zip Code 162 SW Spencer Court Suite 107 Lake City, FL 32024			
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Large Signs	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held: