

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: 14
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / <u>MR</u> FIRST: <u>Bryan</u> MI: <u>W.</u> NICKNAME: _____ LAST: _____ SUFFIX: _____ <u>Beavers</u>	OFFICE USE ONLY Date Received FILED FOR RECORD KAUFMAN CO. TEXAS 2020 FEB 24 PM 4:54 LAURA A. HUGHES COUNTY CLERK BY: _____ DEPUTY	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	Date Hand-delivered or Date Postmarked	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION	Receipt # Amount \$	
6 CAMPAIGN TREASURER NAME	MS / <u>MRS</u> / MR FIRST: <u>Monica</u> MI: <u>L.</u> NICKNAME: _____ LAST: _____ SUFFIX: _____ <u>Beavers</u>	Date Processed Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <u>513 S. Pearl St.</u> <u>Kemp</u> <u>TX</u> <u>75143</u>		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <u>(903)</u> <u>288-6679</u>		
9 REPORT TYPE	<input 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 checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year <u>01 / 24 / 2020</u> <u>02 / 22 / 2020</u>		
11 ELECTION	ELECTION DATE Month Day Year <u>03 / 03 / 2020</u>	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) <u>Sheriff</u>	13 OFFICE SOUGHT (if known) <u>Sheriff</u>	

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

Bryan Beavers

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.

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

17 CONTRIBUTION
TOTALS

1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)

\$ 0

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 7,075.⁰⁰

EXPENDITURE
TOTALS

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 23,752.⁹⁸

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

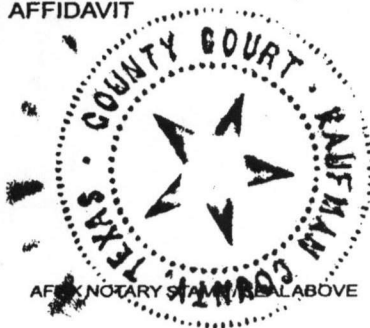
\$ 11,815.⁸⁴

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0

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]

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Bryan Beavers, this the 24th day of February 2020, to certify which, witness my hand and seal of office.

[Signature]

Signature of officer administering oath

Kylie Doss

Printed name of officer administering oath

Deputy Clerk

Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME Bryan Beavers		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7,075. ⁰⁰
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	\$ 23,463. ⁹⁵
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 checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 289. ⁰³
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: 1 of 4

2 FILER NAME **Bryan Beavers**

3 Filer ID (Ethics Commission Filers)

4 Date
01-26-2020

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

7 Amount of contribution (\$)

\$ 300.00

6 Contributor address; City; State; Zip Code

14271 CR 4012 Mabank TX 75147

8 Principal occupation / Job title (See Instructions)

business owner

9 Employer (See Instructions)

Date

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

Amount of contribution (\$)

01-29-2020

Matthew Parker

\$ 50.00

Contributor address; City; State; Zip Code

8932 CR 4084 Scurry TX 75158

Principal occupation / Job title (See Instructions)

retired

Employer (See Instructions)

Date

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

Amount of contribution (\$)

01-30-2020

Frank Deel

\$ 3,000.00

Contributor address; City; State; Zip Code

P.O. Box 309 Kaufman TX 75142

Principal occupation / Job title (See Instructions)

business owner

Employer (See Instructions)

Date

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

Amount of contribution (\$)

01-30-2020

Casey Risinger

\$ 100.00

Contributor address; City; State; Zip Code

551 FM 148 Terrell TX 75160

Principal occupation / Job title (See Instructions)

business owner

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 4**

2 FILER NAME **Bryan Beavers**

3 Filer ID (Ethics Commission Filers)

4 Date
01-31-2020

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

Cheryl Callewart

7 Amount of contribution (\$)

\$1,000.⁰⁰

6 Contributor address; City; State; Zip Code

3825 Stratford Ave. DALLAS TX 75205

8 Principal occupation / Job title (See Instructions)

business owner

9 Employer (See Instructions)

Date

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

01-31-2020

Richard Strange

Amount of contribution (\$)

\$200.⁰⁰

Contributor address; City; State; Zip Code

11675 CR 354 Terrell TX 75161

Principal occupation / Job title (See Instructions)

retired

Employer (See Instructions)

Date

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

01-31-2020

David Landua

Amount of contribution (\$)

\$225.⁰⁰

Contributor address; City; State; Zip Code

1500 CR 303 Terrell TX 75160

Principal occupation / Job title (See Instructions)

retired

Employer (See Instructions)

Date

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

02-08-2020

Kenneth Hanes

Amount of contribution (\$)

\$50.⁰⁰

Contributor address; City; State; Zip Code

11 Climbingtree Kaufman TX 75142

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 4**

2 FILER NAME **Bryan Beavers**

3 Filer ID (Ethics Commission Filers)

4 Date **02-10-2020**
 5 Full name of contributor out-of-state PAC (ID#: _____)
Julie Wages
 6 Contributor address; City; State; Zip Code
1656 Oak Bend Dr. Kaufman TX 75142

7 Amount of contribution (\$)
\$50.00

8 Principal occupation / Job title (See Instructions)
Administrator

9 Employer (See Instructions)

Date **02-10-2020**
 Full name of contributor out-of-state PAC (ID#: _____)
James Crouch
 Contributor address; City; State; Zip Code
Fm 2578 Terrell TX 75160

Amount of contribution (\$)
\$100.00

Principal occupation / Job title (See Instructions)
retired

Employer (See Instructions)

Date **02-10-2020**
 Full name of contributor out-of-state PAC (ID#: _____)
Lydia Searcy
 Contributor address; City; State; Zip Code
1255 Woodbine St. Kemp TX 75143

Amount of contribution (\$)
\$50.00

Principal occupation / Job title (See Instructions)
retired

Employer (See Instructions)

Date **02-11-2020**
 Full name of contributor out-of-state PAC (ID#: _____)
Donna Damkos
 Contributor address; City; State; Zip Code
14850 CR 4054 Kemp TX 75143

Amount of contribution (\$)
\$1,500.00

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: 4 of 4
2 FILER NAME Bryan Beavers		3 Filer ID (Ethics Commission Filers)
4 Date 02-13-2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) maerea Armstrong	7 Amount of contribution (\$) \$ 50.00
6 Contributor address; City; State; Zip Code 1959 meadowway Terrell TX 75160		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 02-21-2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jessie Richardson	Amount of contribution (\$) \$ 300.00
Contributor address; City; State; Zip Code 2109 LaJolla Kaufman TX 75142		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 02-21-2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rusty Grimes	Amount of contribution (\$) \$ 100.00
Contributor address; City; State; Zip Code 6655 FM429 Kaufman TX 75142		
Principal occupation / Job title (See Instructions) police officers		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> 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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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
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: 1 of 6 2 FILER NAME Bryan Beavers 3 Filer ID (Ethics Commission Filers)

4 Date 01-29-2020 5 Payee name Kaufman Herald

6 Amount (\$) \$ 925.00 7 Payee address; City; State; Zip Code
PO BOX 460 Kaufman TX 75142

8 PURPOSE OF EXPENDITURE
(a) Category (See Categories listed at the top of this schedule) advertising expense (b) Description newspaper ads
(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Bryan Beavers Office sought Sheriff Office held Sheriff

Date 02-03-2020 Payee name Terrell Tribune

Amount (\$) \$ 615.00 Payee address; City; State; Zip Code
P.O. Box 319 Willis Point TX 75169

PURPOSE OF EXPENDITURE
Category (See Categories listed at the top of this schedule) advertising expense Description newspaper ads
 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Bryan Beavers Office sought Sheriff Office held Sheriff

Date 02-04-2020 Payee name Wal-Mart

Amount (\$) \$ 132.09 Payee address; City; State; Zip Code
300 Kings Fort Parkway Kaufman TX 75142

PURPOSE OF EXPENDITURE
Category (See Categories listed at the top of this schedule) advertising expense Description Supplies
 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Bryan Beavers Office sought Sheriff Office held Sheriff

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: 2 of 6	2 FILER NAME Bryan Beavers	3 Filer ID (Ethics Commission Filers)
4 Date 02-04-2020	5 Payee name United States Postal Service	
6 Amount (\$) \$165.⁰⁰	7 Payee address; City; State; Zip Code 101 W. 9th St. Kemp TX 75143	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) advertising expense	(b) Description stamps
	(c) <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 Bryan Beavers	Office sought Sheriff
		Office held Sheriff
Date 02-04-2020	Payee name Forney Messenger	
Amount (\$) \$288.⁰⁰	Payee address; City; State; Zip Code 201 W. Broad St. Forney TX 75126	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising expense	Description Newspaper ads-inserts
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Bryan Beavers	Office sought Sheriff
		Office held Sheriff
Date 02-04-2020	Payee name Forney Messenger	
Amount (\$) \$718.⁰⁰	Payee address; City; State; Zip Code 201 W. Broad St. Forney TX 75126	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising expense	Description newspaper ads
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Bryan Beavers	Office sought Sheriff
		Office held Sheriff

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: 3 of 6	2 FILER NAME Bryan Beavers	3 Filer ID (Ethics Commission Filers)
4 Date 02-04-2020	5 Payee name KC Strategies, LLC	
6 Amount (\$) \$7,865.43	7 Payee address; City; State; Zip Code 3571 Far West Blvd # 196 Austin TX 78731	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) consulting expense	(b) Description mailouts /ground game
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Bryan Beavers	Office sought Sheriff
		Office held Sheriff
Date 02-05-2020	Payee name United States Postal Service	
Amount (\$) \$165.00	Payee address; City; State; Zip Code 101 W. 9th St. Kemp TX 75143	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising expense	Description Stamps
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Bryan Beavers	Office sought Sheriff
		Office held Sheriff
Date 02-05-2020	Payee name Kiwanis Club of Terrell	
Amount (\$) \$125.00	Payee address; City; State; Zip Code Po Box 12 Terrell TX 75160	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising expense	Description Sponsorship
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Bryan Beavers	Office sought Sheriff
		Office held Sheriff

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 of 6	2 FILER NAME Bryan Beavers	3 Filer ID (Ethics Commission Filers)
4 Date 02-11-2020	5 Payee name KC Strategies, LLC	
6 Amount (\$) \$6,485.07	7 Payee address; City; State; Zip Code 3571 Farwest Blvd #196 Austin TX 78731	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) advertising expense	(b) Description mailouts
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Bryan Beavers	Office sought Sheriff
		Office held Sheriff
Date 02-12-2020	Payee name Media One LLC	
Amount (\$) \$1,290.00	Payee address; City; State; Zip Code 1316 S. 3rd St. Mabank TX 75147	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising expense	Description newspaper ads
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Bryan Beavers	Office sought Sheriff
		Office held Sheriff
Date 02-12-2020	Payee name Slap N Good BBQ	
Amount (\$) \$1,623.75	Payee address; City; State; Zip Code Kemp TX 75143	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description meal
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Bryan Beavers	Office sought Sheriff
		Office held Sheriff

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: 5 of 6	2 FILER NAME Bryan Beavers	3 Filer ID (Ethics Commission Filers)
4 Date 02-13-2020	5 Payee name KC Strategies, LLC	
6 Amount (\$) \$633.²⁵	7 Payee address; City; State; Zip Code 3571 Far West Blvd # 196 Austin TX 78731	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) advertising expense	(b) Description mailouts
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Bryan Beavers	Office sought Sheriff
		Office held Sheriff
Date 02-14-2020	Payee name Brady Lauer	
Amount (\$) \$950.⁰⁰	Payee address; City; State; Zip Code Kemp TX 75143	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract labor	Description canvassing
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Bryan Beavers	Office held Sheriff
		Office sought Sheriff
Date 02-19-2020	Payee name Forney Messenger	
Amount (\$) \$288.⁰⁰	Payee address; City; State; Zip Code 201 W. Broad St. Forney TX 75126	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising expense	Description newspaper inserts
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Bryan Beavers	Office held Sheriff
		Office sought Sheriff

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: 6 of 6	2 FILER NAME Bryan Beavers	3 Filer ID (Ethics Commission Filers)
4 Date 02-21-2020	5 Payee name Brady Lauer	
6 Amount (\$) \$ 480.⁰⁰	7 Payee address; City; State; Zip Code Kemp TX 75143	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) salaries/wages/contract labor	(b) Description canvassing
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Bryan Beavers	Office sought Sheriff
		Office held Sheriff
Date 02-22-2020	Payee name Authorize.net	
Amount (\$) \$ 63.⁵¹	Payee address; City; State; Zip Code Authorize.net	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description credit card deposit fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Bryan Beavers	Office sought Sheriff
		Office held Sheriff
Date 02-22-2020	Payee name KC Strategies LLC.	
Amount (\$) \$ 651.⁰⁵	Payee address; City; State; Zip Code 3571 Farwest Blvd #196 Austin TX 78731	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising expense	Description CallHub peer-to-peer text service
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Bryan Beavers	Office sought Sheriff
		Office held Sheriff

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 G: 1 of 1	2 FILER NAME Bryan Beavers	3 Filer ID (Ethics Commission Filers)
4 Date 02222020	5 Payee name FaceBook	
6 Amount (\$) \$289.03 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code FaceBook.com	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) advertising expense	(b) Description promotions
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Bryan Beavers	Office sought Sheriff
		Office held Sheriff
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<input type="checkbox"/> Reimbursement from political contributions intended		
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
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
		Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<input type="checkbox"/> Reimbursement from political contributions intended		
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
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
		Office held

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