

# 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: **6**

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / **MR**

FIRST

MI

**Bryan**

**W.**

NICKNAME

LAST

SUFFIX

**Beavers**

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX

APT / SUITE #

CITY

STATE

ZIP CODE

Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE

PHONE NUMBER

EXTENSION

6 CAMPAIGN TREASURER NAME

MS / **MRS** / MR

FIRST

MI

**Monica**

**L.**

NICKNAME

LAST

SUFFIX

**Beavers**

7 CAMPAIGN TREASURER ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #

CITY

STATE

ZIP CODE

(Residence or Business)

**513 S. Pearl St.**

**Kemp**

**TX**

**75143**

8 CAMPAIGN TREASURER PHONE

AREA CODE

PHONE NUMBER

EXTENSION

**(903) 288-6679**

9 REPORT TYPE

January 15

30th day before election

Runoff

15th day after campaign treasurer appointment (Officeholder Only)

July 15

8th day before election

Exceeded Modified Reporting Limit

Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month

Day

Year

Month

Day

Year

**01 / 01 / 2022**

THROUGH

**06 / 30 / 2022**

11 ELECTION

ELECTION DATE

Month

Day

Year

**11 / 08 / 2022**

ELECTION TYPE

Primary

Runoff

Other Description

General

Special

12 OFFICE

OFFICE HELD (if any)

**Sheriff**

13 OFFICE SOUGHT (if known)

**Sheriff**

14 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

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

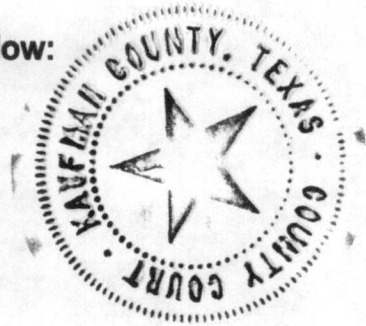
FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME <b>Bryan W. Beavers</b>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ $\emptyset$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ $\emptyset$
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ $\emptyset$
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,075. <sup>00</sup>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 1,736. <sup>61</sup>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ $\emptyset$

18 SIGNATURE 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.

*BWB*  
Signature of Candidate or Officeholder

Please complete either option below:



(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Bryan Beavers this the 12<sup>th</sup> day of July, 2022, to certify which, witness my hand and seal of office.

*[Signature]* \_\_\_\_\_  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

OR

(2) Unsworn Declaration

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.  
(street) (city) (state) (zip code) (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
(month) (year)

Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - C/OH

# FORM C/OH COVER SHEET PG 3

<b>19 FILER NAME</b> <span style="font-size: 1.2em; font-family: cursive;">Bryan W. Beavers</span>	<b>20 Filer ID (Ethics Commission Filers)</b>
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21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 211.44
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	\$ 1,075. <sup>00</sup>
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	\$

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <u>1</u>	
2 FILER NAME <u>BRYAN W. BEAVERS</u>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ <u>211.44</u>	
5 Date <u>06-30-22</u>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>George York</u>	8 Amount of Contribution \$ <u>\$211.44</u>	9 In-kind contribution description <u>website hosting fee for 6 months</u>
7 Contributor address; City; State; Zip Code <u>14062 BARTER LN. Mabank TX 75147</u>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <u>Law enforcement</u>		11 Employer (FOR NON-JUDICIAL)(See Instructions) <u>Kaufman Candy</u>	
12 Contributor's principal occupation (FOR JUDICIAL) <u>—</u>		13 Contributor's job title (FOR JUDICIAL)(See Instructions) <u>—</u>	
14 Contributor's employer/law firm (FOR JUDICIAL) <u>—</u>		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) <u>—</u>	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) <u>—</u>			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ..... Contributor address; City; State; Zip Code	Amount of Contribution \$	In-kind contribution description
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

**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

If the requested information is not applicable, DO NOT include this page in the report.

### 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: <b>2</b>	<b>2</b> FILER NAME <b>Bryan W. Beavers</b>	<b>3</b> Filer ID (Ethics Commission Filers)									
<b>4</b> Date <b>01-05-22</b>	<b>5</b> Payee name <b>Crandall FFA Parents &amp; Friends</b>										
<b>6</b> Amount (\$) <b>\$300.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>P.O. Box 635 Crandall TX 75114</b>										
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>Contribution/donation</b>	<b>(b)</b> Description <b>table sponsor</b>									
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense										
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought									
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%;">Date <b>03-11-22</b></td> <td style="width:80%;">Payee name <b>Crandall FFA Parents &amp; Friends</b></td> </tr> <tr> <td>Amount (\$) <b>\$100.00</b></td> <td>Payee address; City; State; Zip Code <b>P.O. Box 635 Crandall TX 75114</b></td> </tr> <tr> <td rowspan="2"><b>PURPOSE OF EXPENDITURE</b></td> <td>Category (See Categories listed at the top of this schedule) <b>Contribution/donation</b></td> </tr> <tr> <td>Description <b>donation to fund for purchasing animals</b></td> </tr> <tr> <td colspan="2"> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.           <input type="checkbox"/> Check if Austin, TX, officeholder living expense         </td> </tr> </table>			Date <b>03-11-22</b>	Payee name <b>Crandall FFA Parents &amp; Friends</b>	Amount (\$) <b>\$100.00</b>	Payee address; City; State; Zip Code <b>P.O. Box 635 Crandall TX 75114</b>	<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Contribution/donation</b>	Description <b>donation to fund for purchasing animals</b>	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Date <b>03-11-22</b>	Payee name <b>Crandall FFA Parents &amp; Friends</b>										
Amount (\$) <b>\$100.00</b>	Payee address; City; State; Zip Code <b>P.O. Box 635 Crandall TX 75114</b>										
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Contribution/donation</b>										
	Description <b>donation to fund for purchasing animals</b>										
<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	Office held									
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%;">Date <b>06-23-22</b></td> <td style="width:80%;">Payee name <b>Mabank Fire Department</b></td> </tr> <tr> <td>Amount (\$) <b>\$200.00</b></td> <td>Payee address; City; State; Zip Code <b>111 E. Masa St. Mabank TX 75147</b></td> </tr> <tr> <td rowspan="2"><b>PURPOSE OF EXPENDITURE</b></td> <td>Category (See Categories listed at the top of this schedule) <b>Contribution/donation</b></td> </tr> <tr> <td>Description <b>Rodeo Sponsor</b></td> </tr> <tr> <td colspan="2"> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.           <input type="checkbox"/> Check if Austin, TX, officeholder living expense         </td> </tr> </table>			Date <b>06-23-22</b>	Payee name <b>Mabank Fire Department</b>	Amount (\$) <b>\$200.00</b>	Payee address; City; State; Zip Code <b>111 E. Masa St. Mabank TX 75147</b>	<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Contribution/donation</b>	Description <b>Rodeo Sponsor</b>	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Date <b>06-23-22</b>	Payee name <b>Mabank Fire Department</b>										
Amount (\$) <b>\$200.00</b>	Payee address; City; State; Zip Code <b>111 E. Masa St. Mabank TX 75147</b>										
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Contribution/donation</b>										
	Description <b>Rodeo Sponsor</b>										
<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	Office held									

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

### 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: <b>2</b>	<b>2</b> FILER NAME <b>BRYAN W. BEAVERS</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>06-27-22</b>	<b>5</b> Payee name <b>Amazon</b>	
<b>6</b> Amount (\$) <b>\$ 170.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>Amazon.com</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>event expense</b>	<b>(b)</b> Description <b>candy for parade</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <b>06-30-22</b>	Payee name <b>Kaufman Lions Club</b>	
Amount (\$) <b>\$ 200.00</b>	Payee address; City; State; Zip Code <b>801 W. 6th St. Kaufman TX 75142</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Fees</b>	Description <b>membership dues</b>
	<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	Office sought      Office held
Date <b>06-30-22</b>	Payee name <b>Domain Registry</b>	
Amount (\$) <b>\$ 105.00</b>	Payee address; City; State; Zip Code <b>924 Bergen Ave. Suite #289 Jersey City NJ 07306</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>advertising expense</b>	Description <b>website domain</b>
	<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	Office sought      Office held

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