

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00069489	2 PAGE # 1 of 18
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Tony D.	MI
	NICKNAME	LAST Tinderholt	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;	APT / SUITE #;	CITY; STATE; ZIP CODE
	3800 Park Manor Ct. Arlington, TX 76017		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs.	FIRST Jan E.	MI
	NICKNAME	LAST Tyler	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY; STATE; ZIP CODE
	3705 Pimlico Dr. Arlington, TX 76017		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
(817) 465-2003			
8 REPORT TYPE	<input type="checkbox"/> January 15	<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff
	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit
<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
<input type="checkbox"/> Final report (Attach C/OH - FR)			
9 PERIOD COVERED	Month	Day	Year
	07/01/2014		09/25/2014
THROUGH			
10 ELECTION	ELECTION DATE	ELECTION TYPE	
	Month Day Year 11/04/2014	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)
			State Representative District 94

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Tinderholt, Tony D. (Mr.)	14 ACCOUNT # (Ethics Commission filers) 00069489
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> additional pages	.. 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. ..	
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	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	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 25,146.20
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 22,044.11
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 5,190.35
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 18,773.00

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.

Tony Tinderholt

 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Print name of officer administering oath

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: 1/10 Report: 3/18	
2 FILER NAME Tinderholt, Tony D. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00069489	
4 Date 08/18/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Adams, Kent 6 Contributor address; City; State; Zip Code Arlington, TX 76018	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) optometrist		10 Employer (See Instructions) self	
Date 08/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Altig, William Contributor address; City; State; Zip Code Newark, TX 76071	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) optometrist		Employer (See Instructions) self	
Date 09/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Anderson, Ann Contributor address; City; State; Zip Code Benbrook, TX 76126	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired	
Date 08/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Annuziato, Tom Contributor address; City; State; Zip Code Aledo, TX 76008	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) optometrist		Employer (See Instructions) self	
Date 08/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ashby, James Contributor address; City; State; Zip Code Eules, TX 76039	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/10 Report: 4/18	
2 FILER NAME Tinderholt, Tony D. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00069489	
4 Date 09/09/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bell Helicopter Textron inc PAC 6 Contributor address; City; State; Zip Code Fort Worth, TX 76101	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 09/17/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Blackridge 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 08/26/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contaldi, Mario 6 Contributor address; City; State; Zip Code N. Richland Hills, TX 76180	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) optometrist		10 Employer (See Instructions) self	
4 Date 08/17/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Czarowitz, Jon 6 Contributor address; City; State; Zip Code Arlington, TX 76017	7 Amount of contribution (\$) \$175.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Driver		10 Employer (See Instructions) Southern Shingles	
4 Date 08/26/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Driscoll, Richard 6 Contributor address; City; State; Zip Code Keller, TX 76262	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) optometrist		10 Employer (See Instructions) self	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/10 Report: 5/18	
2 FILER NAME Tinderholt, Tony D. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00069489	
4 Date 09/17/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Empower Texans PAC 6 Contributor address; City; State; Zip Code Austin, TX 78720	7 Amount of contribution (\$) \$5,000.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Erven & Yarbrough Contributor address; City; State; Zip Code Austin, TX 78701	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Evans, Paul Contributor address; City; State; Zip Code Arlington, TX 76016	Amount of contribution (\$) \$30.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Technology Mgt		Employer (See Instructions) ATCO Rubber Co.	
Date 09/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fort Worth Republican Women Contributor address; City; State; Zip Code Fort Worth, TX 76185	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Granite Public Affairs LLC Contributor address; City; State; Zip Code Austin, TX 78701	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/10 Report: 6/18	
2 FILER NAME Tinderholt, Tony D. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00069489	
4 Date 09/17/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Grusendorf, KentAust 6 Contributor address; City; State; Zip Code Austin, TX 78746	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) owner		10 Employer (See Instructions) self	
Date 08/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hanson, Mark (Dr.) Contributor address; City; State; Zip Code Arlington, TX 76012	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hanson, Mark Contributor address; City; State; Zip Code Arlington, TX 76012	Amount of contribution (\$) \$291.20	In-kind contribution description (if applicable) fundraiser food
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) optometrist		Employer (See Instructions) self	
Date 09/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hillco PAC Contributor address; City; State; Zip Code Austin, TX 78701	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Homepac of Texas Contributor address; City; State; Zip Code Austin, TX 78701	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/10 Report: 7/18	
2 FILER NAME Tinderholt, Tony D. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00069489	
4 Date 08/01/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lamont, Calvin 6 Contributor address; City; State; Zip Code Caddo Mills, TX 75135	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) Retired Military	
Date 08/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Latham, Jerry Contributor address; City; State; Zip Code Bedford, TX 76021	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) optometrist		Employer (See Instructions) self	
Date 08/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martin, Gary Contributor address; City; State; Zip Code Arlington, TX 76015	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 09/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Menikos, Tim Contributor address; City; State; Zip Code Mansfield, TX 76063	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired	
Date 07/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Merck PAC Contributor address; City; State; Zip Code Washington, DC 20004	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/10 Report: 8/18	
2 FILER NAME Tinderholt, Tony D. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00069489	
4 Date 08/22/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) MWB Properties 6 Contributor address; City; State; Zip Code Cleburne, TX 76033	7 Amount of contribution (\$) \$200.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 08/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nguyen, Steven Contributor address; City; State; Zip Code irving, TX 75063	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) optometrist		Employer (See Instructions) self	
Date 09/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nolan, William Contributor address; City; State; Zip Code Pantego, TX 76015	Amount of contribution (\$) \$25.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self	
Date 08/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Patel, Kumar Contributor address; City; State; Zip Code Wildorado, TX 79098	Amount of contribution (\$) \$50.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) optometrist		Employer (See Instructions) self	
Date 08/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Patrick, Mark Contributor address; City; State; Zip Code Fairview, TX 75069	Amount of contribution (\$) \$150.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) optometrist		Employer (See Instructions) self	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/10 Report: 9/18	
2 FILER NAME Tinderholt, Tony D. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00069489	
4 Date 09/22/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Patterson, Jared 6 Contributor address; City; State; Zip Code Sachse, TX 75048	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Manager		10 Employer (See Instructions) Rapid Power Mgt	
Date 08/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Prapta, Shawn Contributor address; City; State; Zip Code Houston, TX 77069	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) optometrist		Employer (See Instructions) self	
Date 08/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reagan Legacy Republican Women PAC Contributor address; City; State; Zip Code Arlington, TX 76003	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Republican Women of Arlington PAC Contributor address; City; State; Zip Code Arlington, TX 76094	Amount of contribution (\$) \$750.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sandefer, Jeff Contributor address; City; State; Zip Code Austin, TX 78703	Amount of contribution (\$) \$5,000.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions) self	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/10 Report: 10/18	
2 FILER NAME Tinderholt, Tony D. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00069489	
4 Date 08/15/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Brian (Dr.) 6 Contributor address; City; State; Zip Code Arlington, TX 76012	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) optometrist		10 Employer (See Instructions) self	
Date 08/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Cameron Contributor address; City; State; Zip Code Mansfield, TX 76063	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) optometrist		Employer (See Instructions) self	
Date 09/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Shawn Contributor address; City; State; Zip Code Madison, WI 53718	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions) MPI	
Date 07/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sobel, Ralph Contributor address; City; State; Zip Code Arlington, TX 76012	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 08/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Texans for Education Reform PAC Contributor address; City; State; Zip Code Austin, TN 78767	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/10 Report: 12/18	
2 FILER NAME Tinderholt, Tony D. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00069489	
4 Date 09/08/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Verizon Good Government Club-TX 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of contribution (\$) \$250.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 08/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vision Expo Group Contributor address; City; State; Zip Code Arlington, TX 76017	Amount of contribution (\$) \$250.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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.

1 PAGE # Schedule: 1/6 Report: 13/18		2 FILER NAME Tinderholt, Tony D. (Mr.)		3 ACCOUNT # (TEC filers) 00069489	
4 Date 08/01/2014	5 Payee name 80 West Storage				
6 Amount (\$) \$90.00	7 Payee address City; State; Zip Code 2912 W. Division Arlington, TX 76012				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> storage monthly fee		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 09/05/2014	Payee name 80 West Storage				
Amount (\$) \$90.00	Payee address City; State; Zip Code 2912 W. Division Arlington, TX 76012				
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> monthly storage fee		
	<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 09/16/2014	Payee name Active Impressions				
Amount (\$) \$1,675.08	Payee address City; State; Zip Code P.O. Box 171561 Arlington, TX 76003				
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> advertising		
	<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 09/19/2014	Payee name AISD Education Foundation				
Amount (\$) \$200.00	Payee address City; State; Zip Code 1141 Pioneer Parkway Arlington, TX 76013				
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> 2 tickets for Tailgate Party		
	<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:	

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.

1 PAGE # Schedule: 2/6 Report: 14/18		2 FILER NAME Tinderholt, Tony D. (Mr.)		3 ACCOUNT # (TEC filers) 00069489	
4 Date 09/16/2014	5 Payee name Allen, Blake				
6 Amount (\$) \$1,000.00	7 Payee address City; State; Zip Code Garland Garland, TX 75040				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> consultant <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 09/18/2014	Payee name Arlington Republican Club				
Amount (\$) \$250.00	Payee address City; State; Zip Code Arlington Arlington, TX 76012				
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> golf tournament sponsor <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 09/21/2014	Payee name Arlington Tea Party				
Amount (\$) \$1,000.00	Payee address City; State; Zip Code 3535 Marathon St. Pantego, TX 76013				
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> printing and distribution <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 09/23/2014	Payee name Cavaugh, Micah				
Amount (\$) \$119.05	Payee address City; State; Zip Code 31540 Smithson Valley Rd. Bulverde, TX 78163				
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> fundraiser dinner <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:	

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.

1 PAGE # Schedule: 3/6 Report: 15/18		2 FILER NAME Tinderholt, Tony D. (Mr.)		3 ACCOUNT # (TEC filers) 00069489	
4 Date 09/24/2014	5 Payee name Macias Strategies				
6 Amount (\$) \$8,750.00	7 Payee address City; State; Zip Code 31540 Smithson Valley rd. Bulverde, TX 78163				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> consultant <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 09/08/2014	Payee name Office Depot				
Amount (\$) \$17.26	Payee address City; State; Zip Code 3611 S. Cooper Arlington, TX 76015				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> envelopes for thank you notes <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 09/19/2014	Payee name Office Depot				
Amount (\$) \$17.27	Payee address City; State; Zip Code 3611 S. Cooper St. Arlington, TX 76015				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> paper for thank you notes <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 09/08/2014	Payee name Office Max				
Amount (\$) \$19.41	Payee address City; State; Zip Code 4619 s. Cooper Arlington, TX 76017				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> computer paper for thank you notes <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:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense	Gifts/Awards/Memorial 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 PAGE # Schedule: 4/6 Report: 16/18		2 FILER NAME Tinderholt, Tony D. (Mr.)		3 ACCOUNT # (TEC filers) 00069489	
4 Date 09/25/2014	5 Payee name Ownby, Craig				
6 Amount (\$) \$1,500.00	7 Payee address City; State; Zip Code Arlington Arlington, TX 76012				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> consultant		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 09/23/2014	Payee name Reagan Legacy Club				
Amount (\$) \$20.00	Payee address City; State; Zip Code Arlington Arlington, TX 76012				
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> luncheon ticket		
	<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 07/19/2014	Payee name Republican Club of Texas				
Amount (\$) \$100.00	Payee address City; State; Zip Code 2405 Gravel Dr. Fort Worth, TX 76118				
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> breakfast for block walkers		
	<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 09/25/2014	Payee name rolling Hills Country Club				
Amount (\$) \$30.00	Payee address City; State; Zip Code 401 E. Lamar Arlington, TX 76011				
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> ARC dinner		
	<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:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense	Gifts/Awards/Memorial 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 PAGE # Schedule: 5/6 Report: 17/18		2 FILER NAME Tinderholt, Tony D. (Mr.)		3 ACCOUNT # (TEC filers) 00069489	
4 Date 09/18/2014	5 Payee name RWA				
6 Amount (\$) \$35.00	7 Payee address City; State; Zip Code Arlington Arlington, TX 76012				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> membership dues		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 09/18/2014	Payee name RWA				
Amount (\$) \$40.00	Payee address City; State; Zip Code Arlington Arlington, TX 76012				
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> luncheon Republican Women of Arlington		
	<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 09/02/2014	Payee name Southern Flair				
Amount (\$) \$671.15	Payee address City; State; Zip Code 2214 W. Park Row Arlington, TX 76013				
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> push cards		
	<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 09/17/2014	Payee name Tinderholt, Tony				
Amount (\$) \$216.16	Payee address City; State; Zip Code 3800 Park Manor Ct. Arlington, TX 76017				
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Arlington Austin round trip fundraiser		
	<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:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gifts/Awards/Memorial 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 PAGE # Schedule: 6/6 Report: 18/18		2 FILER NAME Tinderholt, Tony D. (Mr.)		3 ACCOUNT # (TEC filers) 00069489	
4 Date 09/03/2014	5 Payee name Trivia Marketing				
6 Amount (\$) \$300.54	7 Payee address City; State; Zip Code 1100 W. Markham Little Rock, AR 72201				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> advertising		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 09/23/2014	Payee name Vici Media				
Amount (\$) \$854.39	Payee address City; State; Zip Code Austin Austin, TX 78701				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> website and graphics		
	<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 09/21/2014	Payee name WBTM				
Amount (\$) \$1,000.00	Payee address City; State; Zip Code 1111 Nathan Lowe Arlington, TX 76012				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> advertising		
	<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 09/23/2014	Payee name wishlist Direct Voter				
Amount (\$) \$4,048.80	Payee address City; State; Zip Code P.O. Box 312100 New Braunfels, TX 78131				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> mailer		
	<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:	