

**SPECIFIC-PURPOSE COMMITTEE
CAMPAIGN FINANCE REPORT**

**FORM SPAC
COVER SHEET PG 1**

The SPAC Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 12	
3 COMMITTEE NAME Aquifer-Parks Proposition 2015			OFFICE USE ONLY	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address			Date Received	
ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 300 Convent #2500 San Antonio, TX 78205			Date Hand-delivered or Date Postmarked	
			Receipt #	Amount
			Date Processed	
			Date Imaged	
5 CAMPAIGN TREASURER NAME		MS / MRS / MR	FIRST	MI
Tim Hixon				
NICKNAME		LAST	SUFFIX	
6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>		STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #; CITY; STATE; ZIP CODE
		315 E. Commerce St., San Antonio, TX 78205		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address		STREET OR PO BOX;		APT / SUITE #; CITY; STATE; ZIP CODE
		315 E. Commerce St., San Antonio, TX 78205		
8 CAMPAIGN TREASURER PHONE		AREA CODE	PHONE NUMBER	EXTENSION
		210	220-1339	
9 REPORT TYPE		<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded \$500 Limit <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input checked="" type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination		
10 PERIOD COVERED		Month Day Year	THROUGH	Month Day Year
		04/30/2015		06/30/2015
11 ELECTION		ELECTION DATE		ELECTION TYPE
		Month Day Year	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
		05/09/2015		

RECEIVED
 CITY OF SAN ANTONIO
 CITY CLERK
 2015 JUL 14 PM 3:11

GO TO PAGE 2

**SPECIFIC-PURPOSE COMMITTEE REPORT:
PURPOSE AND TOTALS**

FORM SPAC
COVER SHEET PG 2

12 COMMITTEE NAME
Aquifer-Parks Propositions 2015

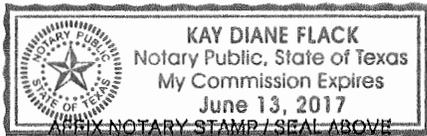
13 Filer ID

14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder)	<input type="checkbox"/> Candidate <input type="checkbox"/> Officeholder	CANDIDATE / OFFICEHOLDER NAME null	
		OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)	
	<input checked="" type="checkbox"/> Measure	BALLOT IDENTIFICATION / #	ELECTION DATE Month Day Year 05/09/2015
		DESCRIPTION	

RECEIVED
 CITY OF SAN ANTONIO
 CITY CLERK
 2015 JUL 14 PM 3: 11

15 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)	\$	\$23,696.25
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	\$0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	\$13,336.94
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	\$0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	\$0.00

16 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.

George C. Hixon
 Signature of Campaign Treasurer

Sworn to and subscribed before me, by the said George C. Hixon, this the 13th day of July, 2015, to certify which, witness my hand and seal of office.

Kay Diane Flack Kay Diane Flack Notary Public
 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

**SPECIFIC-PURPOSE COMMITTEE REPORT:
PURPOSE**

**FORM SPAC
ADDENDUM**

Page 3 of 12

12 COMMITTEE NAME Aquifer-Parks Propositions 2015	13 Filer ID
--	-------------

14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholders only)	<input type="checkbox"/> CANDIDATE <input type="checkbox"/> OFFICE HOLDER	CANDIDATE / OFFICE HOLDER NAME null	
	OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)		
	<input checked="" type="checkbox"/> MEASURE	BALLOT IDENTIFICATION	ELECTION DATE MONTH DAY YEAR 05/09/2015
DESCRIPTION			

RECEIVED
 CITY OF SAN ANTONIO
 CITY CLERK
 2015 JUL 14 PM 3:11

SUBTOTALS - SPAC

**FORM SPAC
COVER SHEET PG 3**
4 of 12

17 COMMITTEE NAME Aquifer-Parks Propositions 2015		18 Filer ID
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,815.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 18,881.25
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 13,336.94
9.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
10.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
12.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK
2015 JUL 14 PM 3:11

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

2015 JUL 14 PM 3:12

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/2 Rpt: 5/12
2 FILER NAME Aquifer-Parks Propositions 2015		3 Filer ID
4 Date 06/08/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freetail Brewing Co. 6 Contributor address; City; State; Zip Code 4036 N. Loop 1604 Suite 105 San Antonio, TX 78257	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammer, Gregory Contributor address; City; State; Zip Code 6413 Brookway Dr San Antonio, TX 78240	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klitchon, Sable Contributor address; City; State; Zip Code 12018 Las Nubes San Antonio, TX 78233	Amount of Contribution (\$) \$210.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayes, Thomas Contributor address; City; State; Zip Code 13231 Regency Way San Antonio, TX 78249	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/11/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) San Antonio Apartment Association Contributor address; City; State; Zip Code 7625 Babcock Rd San Antonio, TX 78249	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

RECEIVED
 CITY OF SAN ANTONIO
 CITY CLERK SCHEDULE A1

2015 JUL 14 PM 3:12

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/2 Rpt: 6/12
2 FILER NAME Aquifer-Parks Propositions 2015		3 Filer ID
4 Date 05/19/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) USAA 6 Contributor address; City; State; Zip Code 9800 Fredericksburg Rd San Antonio, TX 78288	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL
CONTRIBUTIONS

SCHEDULE A2

2015 JUL 14 PM 3: 12

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 7/12	
2 FILER NAME Aquifer-Parks Propositions 2015		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 05/11/2015	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clear Channel Outdoor	8 Amount of contribution (\$) \$18,881.25	9 In-kind contribution description Digital Billboards
	7 Contributor address; City; State; Zip Code 3714 N. Pan Am Expressway San Antonio, TX 78219	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

CITY CLERK

SCHEDULE F1

2015 JUL 14 PM 3: 12

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made by - Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental 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: Sch: 1/4 Rpt: 8/12	2 FILER NAME Aquifer-Parks Propositions 2015	3 Filer ID
---	--	-------------------

4 Date 05/19/2015	5 Payee name CSG, Inc.
-----------------------------	----------------------------------

6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 715 S. St. Mary's Street San Antonio, TX 78205
----------------------------------	---

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office rent
---------------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 05/19/2015	Payee name CSG, Inc.
--------------------	-------------------------

Amount (\$) \$500.00	Payee address; City; State; Zip Code 715 S. St. Mary's Street San Antonio, TX 78205
-------------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office rent
------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 06/15/2015	Payee name CSG, Inc.
--------------------	-------------------------

Amount (\$) \$500.00	Payee address; City; State; Zip Code 715 S. St. Mary's Street San Antonio, TX 78205
-------------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office expenses
------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

2015 JUL 14 PM 3: 12

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---|---|---|---|
| Advertising Expense
Accounting/Bookkeeping
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services | Loan Repayment/Reimbursement
Office Overhead/Rental 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: Sch: 2/4 Rpt: 9/12	2 FILER NAME Aquifer-Parks Propositions 2015	3 Filer ID
4 Date 06/16/2015	5 Payee name CSG, Inc.	
6 Amount (\$) \$886.34	7 Payee address; City; State; Zip Code 715 S. St. Mary's Street San Antonio, TX 78205	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office overhead
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
4 Date 05/19/2015	5 Payee name CSG, Inc.	
6 Amount (\$) \$1,050.00	7 Payee address; City; State; Zip Code 715 S. St. Mary's Street San Antonio, TX 78205	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Pushcard/design & printing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office held
4 Date 05/19/2015	5 Payee name CSG, Inc.	
6 Amount (\$) \$2,000.00	7 Payee address; City; State; Zip Code 715 S. St. Mary's Street San Antonio, TX 78205	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website design
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

2015 JUL 14 PM 3:12

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By -
Candidate/Officeholder/Political Committee

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: Sch: 3/4 Rpt: 10/12	2 FILER NAME Aquifer-Parks Propositions 2015	3 Filer ID
4 Date 05/19/2015	5 Payee name CSG, Inc.	
6 Amount (\$) \$3,000.00	7 Payee address; City; State; Zip Code 715 S. St. Mary's Street San Antonio, TX 78205	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/19/2015	Payee name CSG, Inc.	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 715 S. St. Mary's Street San Antonio, TX 78205	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/19/2015	Payee name Facebook	
Amount (\$) \$250.00	Payee address; City; State; Zip Code PO Box 10005 Palo Alto, CA 94303	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Facebook ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

2015 JUL 14 PM 3:12

EXPENDITURE CATEGORIES FOR BOX 0(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee

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: Sch: 4/4 Rpt: 11/12	2 FILER NAME Aquifer-Parks Propositions 2015	3 Filer ID
4 Date 05/19/2015	5 Payee name GoDaddy	
6 Amount (\$) \$141.30	7 Payee address; City; State; Zip Code 14455 N. Hayden Rd Scottsdale, AZ 85260	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Domain registration & hosting
9 Complete ONLY if direct expenditure to benefit C/OH		
Date 05/19/2015	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$1,500.00	Payee name MoveSA Payee address; City; State; Zip Code 174 Sherwood Dr San Antonio, TX 78201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense voter guide printing
Complete ONLY if direct expenditure to benefit C/OH		
Date 05/15/2015	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$9.30	Payee name Office Max Payee address; City; State; Zip Code 255 E Basse Rd San Antonio, TX 78209	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies
Complete ONLY if direct expenditure to benefit C/OH		

POLITICAL COMMITTEE
AFFIDAVIT OF DISSOLUTION

FORM PAC-DR

2015 JUL 14 PM 3: 12

12 of 12

The Instruction Guide explains how to complete this form. **Complete only
If "Report Type" on page 1 is marked "Dissolution" **

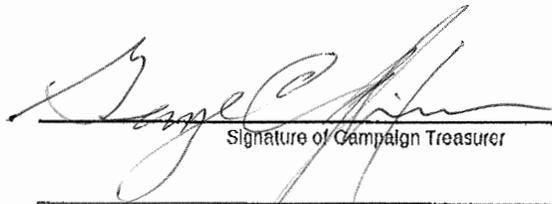
1 COMMITTEE NAME

Aquifer-Parks Propositions 2015

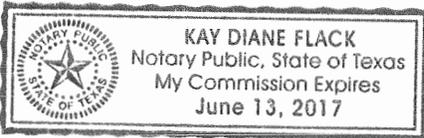
2 Filer ID

3 Affidavit of Dissolution

I, the undersigned campaign treasurer, do not expect the occurrence of any further reportable activity by this political committee for this or any other campaign or election for which reporting under the Election Code is required. I declare that all of the information required to be reported by me has been reported. I understand that designating a report as a dissolution report terminates the appointment of campaign treasurer. I further understand that a political committee may not make or authorize political expenditures or accept political contributions without having an appointment of campaign treasurer on file.


Signature of Campaign Treasurer

DO NOT SIGN UNLESS POLITICAL COMMITTEE IS TO BE DISSOLVED



AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said George C. Hixon, this the 13th day of July, 2015, to certify which, witness my hand and seal of office.

Kay Diane Flack
Signature of officer administering oath

Kay Diane Flack
Printed name of officer administering oath

Notary Public
Title of officer administering oath