

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed: 12
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR MR FIRST: <i>Richard</i> MI: <i>S.</i> NICKNAME: LAST: <i>Easingwood</i> SUFFIX: <i>Jr.</i>	OFFICE USE ONLY Date Received: FEB 24 2014 Date Hand-delivered or Postmarked: Receipt # Amount: Date Processed: Date Imaged:	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE: <i>P.O. Box 1587 San Angelo, TX, 76902</i>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE: <i>(325)</i> PHONE NUMBER: <i>617-2173</i> EXTENSION:		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR MR FIRST: <i>Roy</i> MI: <i>Larry</i> NICKNAME: LAST: <i>Evans</i> SUFFIX:		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE: <i>2824 W. Beauregard, San Angelo, Tx., 76901</i>		
8 CAMPAIGN TREASURER PHONE	AREA CODE: <i>(325)</i> PHONE NUMBER: <i>716-9909</i> EXTENSION:		
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 \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year <i>01 24 2014 THROUGH 02 22 2014</i>		
11 ELECTION	ELECTION DATE Month Day Year <i>03 04 2014</i>	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) <i>County Judge</i>	

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**JUDICIAL CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM JC/OH
COVER SHEET PG 2**

14 C/OH NAME Richard S. Easingwood, Jr. 15 ACCOUNT # (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
 GENERAL
 SPECIFIC

COMMITTEE NAME
 COMMITTEE ADDRESS
 COMMITTEE CAMPAIGN TREASURER NAME
 COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 158 ⁰⁰ / _{XX}
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 5020 ⁰⁰ / _{XX}
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ -0-
	4. TOTAL POLITICAL EXPENDITURES	\$ 5496 ⁶⁹ / _{XX}
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 3174 ⁶² / _{XX}
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.

Richard S. Easingwood, Jr.
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Richard S. Easingwood Jr, this the 24 day of February, 20 14, to certify which, witness my hand and seal of office.

Vona McKelley Signature of officer administering oath
Vona McKelley Notary Public, State of Texas
 My Commission Expires November 20, 2014

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 6	
2 FILER NAME Richard S. Easingwood, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 01/27/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stephen and Ellen Brown	7 Amount of contribution (\$) \$200⁰⁰	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 4705 Timber Ridge, San Angelo, Tx, 76904		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Retired		10 Contributor's job title Consultant/Grant Writer	
11 Contributor's employer/law firm		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 02/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Geo George A. Alexander	Amount of contribution (\$) \$250⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2338 Sul Ross, San Angelo, Tx, 76904		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Builder/Construction		Contributor's job title Owner	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 02/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Anna M. Thomas	Amount of contribution (\$) \$100⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 213 W. Beavregard, San Angelo, Tx, 76902		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Certified Public Accountant		Contributor's job title Owner	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J):	
2 FILER NAME <i>Richard S. Easingwood, Jr.</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>02/06/2014</i>	5 Full name of contributor <input type="checkbox"/> but-of-state PAC (ID# _____) <i>Ricky Jordan</i>	7 Amount of contribution (\$) <i>\$500⁰⁰</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>27 Southridge Dr., San Angelo, Tx., 76904</i>		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation <i>Oilfield Supply Equip.</i>		10 Contributor's job title <i>Owner</i>	
11 Contributor's employer/law firm		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date <i>02/06/2014</i>	Full name of contributor <input type="checkbox"/> but-of-state PAC (ID# _____) <i>Charles Becker</i>	Amount of contribution (\$) <i>\$100⁰⁰</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2500 N. Bryant, San Angelo, Tx., 76903</i>		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation <i>Plumbing Supply</i>		Contributor's job title <i>Owner</i>	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date <i>02/11/2014</i>	Full name of contributor <input type="checkbox"/> but-of-state PAC (ID# _____) <i>Earlene Neeley</i>	Amount of contribution (\$) <i>\$500⁰⁰</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>11123 Pinehurst Dr. Apt. C. Austin, Tx., 78747</i>		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation <i>Real Estate</i>		Contributor's job title <i>Owner</i>	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J):

2 FILER NAME

Richard S. Easingwood, Jr.

3 ACCOUNT # (Ethics Commission Filers)

4 Date

02/15/2014

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

Virginia B. Hudspeth

7 Amount of contribution (\$)

\$100⁰⁰

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

11482 Twin Lakes Ln., San Angelo, Tx, 76904

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation

Ranching

10 Contributor's job title

Retired/Owner

11 Contributor's employer/law firm

12 Law firm of contributor's spouse (if any)

13 If contributor is a child, law firm of parent(s) (if any)

Date

02/15/2014

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

Condry Hartman

Amount of contribution (\$)

\$60⁰⁰

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

2301 N. Chadbourne, San Angelo, Tx, 76903

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation

Restaurant Supply

Contributor's job title

Salesman

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

02/18/2014

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

Mike U. Ellington

Amount of contribution (\$)

\$250⁰⁰

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

P.O. Box 60287, San Angelo, Tx, 76906

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation

Distilled Spirits

Contributor's job title

Owner

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J):	
2 FILER NAME <i>Richard S. Easingwood, Jr.</i>			3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>02/18/2014</i>	5 Full name of contributor <i>Steve and Jane Wardlaw</i>	7 Amount of contribution (\$) <i>\$300⁰⁰</i>		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>1532 River Ridge, San Angelo, Tx., 76904</i>		(If travel outside of Texas, complete Schedule T)		
9 Contributor's principal occupation <i>Ranching</i>		10 Contributor's job title <i>Owner</i>		
11 Contributor's employer/law firm		12 Law firm of contributor's spouse (if any)		
13 If contributor is a child, law firm of parent(s) (if any)				
Date <i>02/18/2014</i>	Full name of contributor <i>Betty Zentner</i>	Amount of contribution (\$) <i>\$200⁰⁰</i>		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1901 Knickerbocker Rd, San Angelo, Tx., 76904</i>		(If travel outside of Texas, complete Schedule T)		
Contributor's principal occupation <i>Restrauntar</i>		Contributor's job title <i>Owner</i>		
Contributor's employer/law firm		Law firm of contributor's spouse (if any)		
If contributor is a child, law firm of parent(s) (if any)				
Date <i>02/19/2014</i>	Full name of contributor <i>Jane Turner Doggett</i>	Amount of contribution (\$) <i>\$1000⁰⁰</i>		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>800 W. Ave. D, Apt. 7, San Angelo, Tx., 76903</i>		(If travel outside of Texas, complete Schedule T)		
Contributor's principal occupation <i>Ranching/Oils Gas</i>		Contributor's job title <i>Owner</i>		
Contributor's employer/law firm		Law firm of contributor's spouse (if any)		
If contributor is a child, law firm of parent(s) (if any)				

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL) SCHEDULE A (J)**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J):	
2 FILER NAME <i>Richard S. Easingwood, Jr.</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>02/19/2014</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <i>Troy Noel</i>	7 Amount of contribution (\$) <i>\$200⁰⁰</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>1317 S. Jackson, San Angelo, Tx., 76901</i>		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation <i>Restaurant</i>		10 Contributor's job title <i>Line Specialist</i>	
11 Contributor's employer/law firm		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date <i>02/20/2014</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <i>Ted Weatherford</i>	Amount of contribution (\$) <i>\$200⁰⁰</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>7464 Spillway Rd., San Angelo, Tx., 76904</i>		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation <i>Farming</i>		Contributor's job title <i>Owner</i>	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date <i>02/21/2014</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <i>Charles and Julie Hughes</i>	Amount of contribution (\$) <i>\$1000⁰⁰</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1104 W. Beauregard, San Angelo, Tx., 76901</i>		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation <i>Ranching/Oil & Gas</i>		Contributor's job title <i>Owners</i>	
Contributor's employer/law firm <i>Hughes</i>		Law firm of contributor's spouse (if any) <i>Hughes</i>	
If contributor is a child, law firm of parent(s) (if any)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A(J):

2 FILER NAME *Richard S. Easingwood, Jr.* 3 ACCOUNT # (Ethics Commission Filers)

4 Date *02/24/2014* 5 Full name of contributor out-of-state PAC (ID# _____) *Ernestino M. Torres* 7 Amount of contribution (\$) *\$60⁰⁰* 8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code *147095. FM. 2335, San Angelo, TX., 76901* (If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation 10 Contributor's job title

11 Contributor's employer/law firm 12 Law firm of contributor's spouse (if any)

13 If contributor is a child, law firm of parent(s) (if any)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code		
(If travel outside of Texas, complete Schedule T)			

Contributor's principal occupation Contributor's job title

Contributor's employer/law firm Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code		
(If travel outside of Texas, complete Schedule T)			

Contributor's principal occupation Contributor's job title

Contributor's employer/law firm Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

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

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials 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 Total pages Schedule F: <u>4</u>		2 FILER NAME <u>Richard S. Easingwood, Jr</u>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <u>01/27/2014</u>		5 Payee name <u>Albertson's Food Center</u>			
6 Amount (\$) <u>\$25⁹⁴/_{xx}</u>		7 Payee address; City; State; Zip Code <u>3121 Sunset, San Angelo, Tx., 76904</u>			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <u>Food/Beverages Expense</u>		(b) Description (If travel outside of Texas, complete Schedule T) <u>Cookies/Chips & Dip</u>		
	Candidate / Officeholder name		Office sought Office held		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date <u>01/28/2014</u>		Payee name <u>Subway Sandwiches</u>			
Amount (\$) <u>50⁰⁰/_{xx}</u>		Payee address; City; State; Zip Code <u>1717 S. Bryant Blvd, San Angelo, Tx., 76903</u>			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <u>Food/Beverages</u>		Description (If travel outside of Texas, complete Schedule T) <u>Sandwiches</u>		
	Candidate / Officeholder name		Office sought Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date <u>01/28/14</u>		Payee name <u>Dudra Butler</u>			
Amount (\$) <u>\$40⁰⁰/_{xx}</u>		Payee address; City; State; Zip Code <u>1701 Cordell Drive, San Angelo, Tx., 76901</u>			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <u>Event Expense</u>		Description (If travel outside of Texas, complete Schedule T) <u>NAACP Scholarship Banquet</u>		
	Candidate / Officeholder name		Office sought Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date <u>02/02/2014</u>		Payee name <u>Walgreens</u>			
Amount (\$) <u>\$10⁸³/_{xx}</u>		Payee address; City; State; Zip Code <u>2828 12 N. Abe, San Angelo, Tx., 76903</u>			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <u>Food/Beverages</u>		Description (If travel outside of Texas, complete Schedule T) <u>Soft Drinks</u>		
	Candidate / Officeholder name		Office sought Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials 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 Total pages Schedule F:		2 FILER NAME <i>Richard S. Easingwood, Jr</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>02/05/2014</i>		5 Payee name <i>Fed Ex Office</i>			
6 Amount (\$) <i>\$63³³_{XX}</i>		7 Payee address; City; State; Zip Code <i>4532 Sherwood Way, San Angelo, Tx, 76901</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Advertising Expense</i>		(b) Description (If travel outside of Texas, complete Schedule T) <i>Ad Slicks</i>	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <i>02/05/14</i>		Payee name <i>La Unica Broadcasting</i>			
Amount (\$) <i>\$600⁰⁰_{XX}</i>		Payee address; City; State; Zip Code <i>209 W. Beavregard, San Angelo, Tx, 76903</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Advertising Expense</i>		Description (If travel outside of Texas, complete Schedule T) <i>Radio Spots</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <i>02/05/2014</i>		Payee name <i>ADDA ADACCV</i>			
Amount (\$) <i>\$60⁰⁰_{XX}</i>		Payee address; City; State; Zip Code <i>3553 Houston Harte Expwy, San Angelo, Tx, 76901</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Event Expense</i>		Description (If travel outside of Texas, complete Schedule T) <i>Banquet</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <i>02/07/2014</i>		Payee name <i>Town Square Media</i>			
Amount (\$) <i>\$1752⁰⁰_{XX}</i>		Payee address; City; State; Zip Code <i>1301 S. Abe. Street, San Angelo, Tx, 76903</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Advertising Expense</i>		Description (If travel outside of Texas, complete Schedule T) <i>Radio Spots</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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 Total pages Schedule F:		2 FILER NAME Richard S. Easingwood, Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 02/07/2014		5 Payee name Foster Communications			
6 Amount (\$) \$1240 ⁰⁰ / _{xx}		7 Payee address; City; State; Zip Code 2824 Sherwood Way, San Angelo, Tx., 76901			
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) Radio Spots	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 02/11/2014		Payee name Q's Printing & Design			
Amount (\$) \$232 ⁷⁴ / _{xx}		Payee address; City; State; Zip Code 20 Howard, Suite 8, San Angelo, Tx., 76901			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) Door Hangers	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 02/11/2014		Payee name Fed Ex Office			
Amount (\$) \$63 ³³ / _{xx}		Payee address; City; State; Zip Code 4532 Sherwood Way, San Angelo, Tx., 76901			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) Ad Slicks	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 02/12/2014		Payee name San Angelo Standard Times			
Amount (\$) \$1050 ⁰⁰		Payee address; City; State; Zip Code 34 West Harris, San Angelo, Tx., 76903			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) Advertisement	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials 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 Total pages Schedule F:		2 FILER NAME <i>Richard S. Easingwood, Jr.</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>02/20/14</i>		5 Payee name <i>Q's Printing & Design</i>			
6 Amount (\$) <i>\$75²⁸_{xx}</i>		7 Payee address; City; State; Zip Code <i>20 Howard, Suite B, San Angelo, Tx., 76901</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Advertising Expense</i>		(b) Description (If travel outside of Texas, complete Schedule T) <i>Ad Design</i>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>02/20/2014</i>		Payee name <i>Q's Printing & Design</i>			
Amount (\$) <i>\$232²⁴_{xx}</i>		Payee address; City; State; Zip Code <i>20 Howard, Suite B, San Angelo, Tx., 76901</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Advertising Expense</i>		Description (If travel outside of Texas, complete Schedule T) <i>T-Shirts</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED