

# 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)	2 Total pages filed:  6
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR <input checked="" type="checkbox"/> MRS	FIRST Janet	MI D.
	NICKNAME McEntyre	LAST	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX:	APT / SUITE #:	CITY, STATE, ZIP CODE
	305 N Bishop San Angelo TX 76901		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(325)	374-1787	
6 CAMPAIGN TREASURER NAME	MS/MRS/MR <input checked="" type="checkbox"/> MRS	FIRST Janet	MI D.
	NICKNAME McEntyre	LAST	SUFFIX
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY, STATE, ZIP CODE		
	305 N Bishop San Angelo TX 76901		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(325)	374-1787	
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
	01	24	2014
THROUGH		Month	Day
		02	22
11 ELECTION	ELECTION DATE		ELECTION TYPE
	Month	Day	Year
03	04	2014	<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)  County Clerk
GO TO PAGE 2			

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

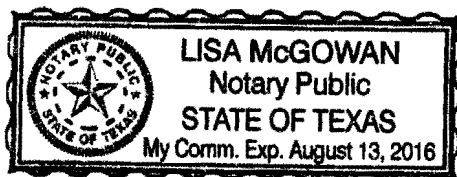
14 C/OH NAME <i>Janet D. McEntyre</i>	15 ACCOUNT # (Ethics Commission Filers)
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<b>16 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/> additional pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES 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
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0-
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 825. <sup>00</sup>
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 714.52
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 410.70
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

### 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.



*Janet McEntyre*  
\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Janet McEntyre, this the 24<sup>th</sup> day of February, 2014, to certify which, witness my hand and seal of office.

<i>[Signature]</i>	<u>Lisa McGowan</u>	<u>Notary Public</u>
Signature of officer administering oath	Printed 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 Total pages Schedule A: <p style="text-align: center;">1</p>	
2 FILER NAME <p style="text-align: center;">Janet D. McEntyre</p>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <p style="text-align: center;">1/28/2014</p>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <p style="text-align: center;">Bess Glenn</p>	7 Amount of contribution (\$) <p style="text-align: center;">\$300.<sup>00</sup></p>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <p style="text-align: center;">4803 Carole Ln Amarillo TX 79109</p>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <p style="text-align: center;">1/30/2014</p>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <p style="text-align: center;">Robert &amp; Sue Baulos</p>	Amount of contribution (\$) <p style="text-align: center;">\$75.<sup>00</sup></p>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <p style="text-align: center;">4314 Ransom Rd San Angelo TX 76903</p>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <p style="text-align: center;">1/31/2014</p>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <p style="text-align: center;">Fred &amp; Carolyn S. McDonald</p>	Amount of contribution (\$) <p style="text-align: center;">\$50.<sup>00</sup></p>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <p style="text-align: center;">6444 Indian Path San Angelo TX 76901</p>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <p style="text-align: center;">2/5/2014</p>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <p style="text-align: center;">Carrie Searey</p>	Amount of contribution (\$) <p style="text-align: center;">\$200.<sup>00</sup></p>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <p style="text-align: center;">900 Lake View Homes Dr San Angelo TX 76903</p>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <p style="text-align: center;">2/21/2014</p>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <p style="text-align: center;">Louis J. Fohn</p>	Amount of contribution (\$) <p style="text-align: center;">\$200.<sup>00</sup></p>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <p style="text-align: center;">716 S. Koenigheim San Angelo TX 76903</p>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

# 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: 1		2 FILER NAME Janet D. McEntyre		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 1/27/2014		5 Payee name Western Poster			
6 Amount (\$) \$100.00		7 Payee address; City; State; Zip Code 901 Strawn Rd San Angelo TX 76904			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Political Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) 18x24 yard signs + Step Stakes	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 1/29/2014		Payee name Company Printing			
Amount (\$) \$300.00		Payee address; City; State; Zip Code 3419 Knickerbocker Rd San Angelo TX 76904			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) Brochure mailers / Double Tabbing Label + Sort / Postage	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 2/22/2014		Payee name The Shipping Point			
Amount (\$) \$60.00		Payee address; City; State; Zip Code 1300 W. Beauvoir 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) Postage Stamps for Brochure mailing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### 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.

<b>1</b> Total pages Schedule G: 2	<b>2</b> FILER NAME Janet O. McEntyre	<b>3</b> ACCOUNT # (Ethics Commission Filers)
<b>4</b> Date 1/27/2014	<b>5</b> Payee name Western Poster	
<b>6</b> Amount (\$) \$67.79 <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 901 Strawn Rd San Angelo TX 76904	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) 18x24 Yard Signs
Date 1/29/2014	Payee name Company Painting	
Amount (\$) \$38.34 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 3419 Knickerbocker Rd San Angelo TX 76904	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Print Brochure mailers
Date 1/30/2014	Payee name Lowe's Home Center	
Amount (\$) \$27.30 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 5301 Sherwood Way San Angelo TX 76904	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Sand to hold sign holders nails lumber to build sign holder
Date 2/9/2014	Payee name Lowe's Home Center	
Amount (\$) 16.22 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 5301 Sherwood Way San Angelo TX 76904	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Solar Flood light for sign illumination

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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### 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.

<b>1</b> Total pages Schedule G: <i>2</i>	<b>2</b> FILER NAME <i>Janet D. McEntyre</i>	<b>3</b> ACCOUNT # (Ethics Commission Filers)
<b>4</b> Date <i>2/15/2014</i>	<b>5</b> Payee name <i>Lowe's Home Center</i>	
<b>6</b> Amount (\$) <i>\$1622</i> <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code <i>5301 Sherwood Way San Angelo TX 76904</i>	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) <i>Advertising Expense</i>	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <i>Solar Flood light for sign illumination</i>
Date <i>2/22/2014</i>	Payee name <i>Face Book</i>	
Amount (\$) <i>88.63</i> <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>Menlo Park California</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>Advertising of Face Book Political Page</i>
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	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)
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	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)

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