CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 15		
3 CANDIDATE/ OFFICEHOLDER	MS / MRS / MR FIRST	MI	OFFICE USE ONLY		
NAME	NICKNAME LAST	Clayton SUFFIX	Date ReceiRECEIVED BY CITY SECRETARY		
	Clayton Brashear				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX: APT / SUITE #; CC PO Box 2344 South Padre	JUL 1 9 2019 CITY OF SOUTH PADRE ISLAND			
5 CANDIDATE/	AREA CODE PHONE NUMBER	EXTENSION	ISLAND		
OFFICEHOLDER PHONE	(956) 455-8436		Date Hand-delivered or Date Postmarked		
6 CAMPAIGN TREASURER	MS / MRS / MR FIRST	мі	Receipt # Amount \$		
NAME	NICKNAME LAST	E	Date Processed		
	Rowan		Date Imaged		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SL 203 W Jupiter Ln. S	UITE #; CITY; STATE; South Padre Island, TX	zip code 78597		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (956) 494-5967	EXTENSION			
9 REPORT TYPE	January 15 30th day before el		 15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR) 		
10 PERIOD COVERED	Month Day Year 04 25 2019	Month THROUGH 07	Day Year 19 / 2019		
11 ELECTION	ELECTION DATE Month Day Year Primary 5 4 2019 General	ELECTION TYPE Runoff Other Description Special			
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)			
		Mayor of South	n Padre Island		
GO TO PAGE 2					

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME David Clayton Bra	14 C/OH NAME 15 David Clayton Brashear					
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR N SUPPORT THE CAN	OTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITION DIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WIT INSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS URES.	HOUT THE CANDIDATE'S OR OFFICEHOLDER'S			
	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL					
	SPECIFIC	COMMITTEE ADDRESS				
COMMITTEE CAMPAIGN TREASURER NAME						
Additional Pages						
	COMMITTEE CAMPAIGN TREASURER ADDRESS					
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAI ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE				
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 2,495.64					
EXPENDITURE TOTALS	3. TOTAL I UNLESS	\$ 0.00				
	4. TOTAL		\$ 7,994.75			
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST E	DAY \$ 0.00			
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF TH AY OF THE REPORTING PERIOD	^{HE} \$ 9,118.41			
18 AFFIDAVIT	_					
SUSAN M HILL COMM. EXPIRES 3-28-2023 NOTARY ID FEB-60						
	Signature of Candidate or Officeholder					
AFFIX NOTARY STAM	P/SEALABOVE					
		O'	1 10th			
Sworn to and subsc	ribed before me, l	by the said stand layton by	Sthis the			
day of July	, 20 19,	to certify which, witness my hand and seal of office.				
Zin	fiel	Susan Hill Ci	ly Serie /4) dem			
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath						

Forms provided by Texas Ethics Commission

Revised 9/8/2015

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

		JLE SUBTOTALS F SCHEDULE		SUBTOTAL AMOUNT			
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS						
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 2,495.64			
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0.00			
4.		SCHEDULE E: LOANS		\$ 0.00			
5.	X	X SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS					
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS					
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL C	ONTRIBUTIONS	\$ 0.00			
8.	X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 3,034.04			
9.	X	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUN	DS	\$ 4,935.12			
10.		SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A	BUSINESS OF C/OH	\$ 0.00			
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL COM		\$ 0.00			
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTION RETURNED TO FILER	ONS	\$ 0.00			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

т	ne Instruction Guide explains how to complete this form	n.	1 Total pages Schedule A2: 2		
2 FILER NAM	E		3 Filer ID (Ethics Commission Filers)		
David Clay	/ton Brashear				
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	\$ 0.00			
5 Date 4/26/2019	 6 Full name of contributor out-of-state PAC (ID#: Guy Remington 7 Contributor address; City; State; Zip Cocc 404 Airport Road Yoakum, TX 77995 	8 Amount of Contribution \$ 9 In-kind contribution description \$287.06 Clayton's Pachanga Meet and Greet Check if travel outside of Texas. Complete Schedule T.			
	cupation / Job title (FOR NON-JUDICIAL) (See Instructions) Gales Person	11 Employ Eddy Pa	er (FOR NON-JUDICIAL)(See Instructions) acking		
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JUDICIAL) (See Instructions)		
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date 4/29/2019	Full name of contributor out-of-state PAC (ID#: Clayton's Beach Bar & Grill Contributor address; City; State; Zip Co) de	Amount of Contribution \$ In-kind contribution description \$2,149.02 Food, Drink & Entertainment for 4/29/19 Clayton's Pachanga Meet and Greet		
	6900 Padre Blvd., South Padre Island, TX 78597		Check if travel outside of Texas. Complete Schedule T.		
Principal occ	supation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICIAL)(See Instructions)		
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	utor's job title (FOR JUDICIAL) (See Instructions)		
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)		
If contributo	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
If	ATTACH ADDITIONAL COPIES OF 1 contributor is out-of-state PAC, please see instruction				

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

т	ne Instruction Guide explains how to complete this form	n.	1 Total pages Schedule A2: 2
2 FILER NAM	E		3 Filer ID (Ethics Commission Filers)
David Clay	/ton Brashear		
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$ 0.00
5 Date	6 Full name of contributorout-of-state PAC (ID#:		8 Amount of 9 In-kind contribution
4/26/2019	Pete Espinoza		Contribution \$ description \$59,56 Food Donation for 4/29/19
			Clayton's Pachanga Meet and Greet
	7 Contributor address; City; State; Zip Coc 908 Pine Bluff Brownsville, TX 78526	le	, Ordet
	Stor File Didn Diowitaville, TX 70520		Check if travel outside of Texas. Complete Schedule T.
	cupation / Job title (FOR NON-JUDICIAL) (See Instructions) Sales Person		rer (FOR NON-JUDICIAL)(See Instructions) . Keith
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contrib	utor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law fire	m of contributor's spouse (if any) (FOR JUDICIAL)
16 16			
	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Data			Amount of In-kind contribution
Date	Full name of contributor Out-of-state PAC (ID#:)	Contribution \$. description
	Contributor address; City; State; Zip Co	de	
			Check if travel outside of Texas. Complete Schedule T.
Bringinglogs	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	E	
Fincipal occ	upation / Job title (FOR NON-JODICIAL) (See Instructions)	Employ	er (FOR NON-JUDICIAL)(See Instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contrib	utor's job title (FOR JUDICIAL) (See Instructions)
Contributor		Contrib	ators job title (FOR JODICIAE) (See Instructions)
Contributor's	s employer/law firm (FOR JUDICIAL)	Law fir	m of contributor's spouse (if any) (FOR JUDICIAL)
If contributor	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
	ATTACH ADDITIONAL COPIES OF 1	HIS SCHED	ULE AS NEEDED
If	contributor is out-of-state PAC, please see instruction	n guide for	additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EVDENINI	TEGORIES	EODDO	0/~
EAFENUL	IEGUNIES	FUD DU	N OLA I

Advertising Evenes		Loan Repayment/Reimbursement				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)				
1	· · ·	ains how to complete this form.				
1 Total pages Schedule F1: 2			3 Filer ID (Ethics Commission Filers)			
4 Date	David Clayton Brashear					
4/25/2019	5 Payee name First Community Bank					
6 Amount (\$)	7 Payee address; City; State;	Zip Code				
\$8.00	PO Box 2030 San Benito, TX 74	3586				
8	(a) Category (See Categories listed at the top of th	is schedule) (b) Description				
PURPOSE		Check if travel of	outside of Texas. Complete Schedule T.			
OF	Accounting/Banking	Check if Austi	in, TX, officeholder living expense			
EXPENDITURE	Accounting Bunking	Bank Service Fee	1			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name H	Office sought	Office held			
Date	Payee name					
5/25/2019	First Community Bank					
0/20/2010						
Amount (\$)	Payee address; City; State;	Zip Code				
\$8.00						
	Category (See Categories listed at the top of th	is schedule) Description				
PURPOSE		Check if travel or	utside of Texas. Complete Schedule T.			
OF	Accounting/Banking	Check if Austin	Check if Austin, TX, officeholder living expense			
EXPENDITURE		Bank Service Fee)			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held			
Date	Payee name					
6/25/2019	First Community Bank					
Amount (\$)	Payee address; City; State;	Zip Code				
\$8.00	PO Box 2030 San Benito, TX					
	Category (See Categories listed at the top of th	is schedule) Description				
PURPOSE			utside of Texas. Complete Schedule T.			
OF	Accounting/Banking		n, TX, officeholder living expense			
EXPENDITURE	<u> </u>	Bank Service Fee	•			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held			
	ATTACH ADDITIONAL COPIE	S OF THIS SCHEDULE AS NE	EDED			

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Politic Credit Card Payment	Fees Food/Beverage Expense gy Gift/Awards/Memorials Expense al Committee Legal Services	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memonals Expense Printing Expense						
1 Total pages Schedule F1:			3 Filer ID (Ethics Commission Filers)					
2	David Clayton Brashear							
4 Date 7/5/2019	5 Payee name David Clayton Brashear							
6 Amount (\$)	7 Payee address; City; State; Zip	Code						
\$1.59	PO Box 2344 South Padre Island, TX 78	597						
8 PURPOSE OF EXPENDITURE	utside of Texas. Complete Schedule T. n, TX, officeholder living expense eimbursement and to close account							
9 Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	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 sch	Check if travel of	utside of Texas. Complete Schedule T. n, TX, officeholder living expense					
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	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 sch	Check if travel o	utside of Texas. Complete Schedule T. n, TX, officeholder living expense					
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought	Office held					
	ATTACH ADDITIONAL COPIES O	F THIS SCHEDULE AS NE	EDED					

EXPENDITU	JRES MADE BY CREDIT CA	ARD	SCHEDULE F4				
	EXPENDITURE CATEGORIES FOR	BOX 10(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Politic	Fees Office Overhead Food/Beverage Expense Polling Expense By Gift/Awards/Mernorials Expense Printing Expense	e /Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)				
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)				
	3 David Clayton Brashear 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$0.00						
5 Date 4/25/2019	6 Payee name Port Isabel South Padre Press						
7 Amount (\$)	8 Payee address; City; State; Zip Code						
\$540.00	101 Maxan St. Port Isabel, TX 78578						
9 TYPE OF EXPENDITURE	X Political Non-Politica	a					
10 (a) Category (See Categories listed at the top of this schedule) (b) Description PURPOSE OF EXPENDITURE Advertising Expense Check if travel outside of Texas. Complete Schedule T. OF EXPENDITURE Advertising Expense Check if Austin, TX, officeholder living expense Newspaper Campaign Ads Newspaper Campaign Ads							
11 Complete <u>ONLY</u> if direct expenditure to benefit C/C		e sought	Office held				
Date 4/29/2019	Payee name Facebook						
Amount (\$)	Payee address; City; State; Zip Code						
\$846.43	1 Hacker Way, Menio Park, CA 94025						
TYPE OF EXPENDITURE	X Political Non-Politic	al					
PURPOSE OF EXPENDITURE	OF Advertising Expense Check if Austin, TX, officeholder living expense						
Complete <u>ONLY</u> if direct expenditure to benefit C/C		e sought	Office held				
	ATTACH ADDITIONAL COPIES OF THIS SCH	EDULE AS N	EEDED				

EXPENDITU	RES MADE BY CREI	DIT CA	RD	SCHEDULE F4	
	EXPENDITURE CATEGO	ORIES FOR I	3OX 10(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica		Loan Repayment/ Office Overhead/ Polling Expense Printing Expense Salaries/Wages/0	Rental Expense Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F4: 3	2 FILER NAME David Clayton Brashear			3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$0.00					
5 Date 4/30/2019	6 Payee name Facebook				
7 Amount (\$)	8 Payee address; City; State; Z	Zip Code			
\$8.83	101 Hacker Way, Menlo Park, CA 9	4025			
9 TYPE OF EXPENDITURE	X Political	Non-Political			
10 (a) Category (See Categories listed at the top of this schedule) (b) Description PURPOSE OF Check if traveloutside of Texas. Complete Schedule OF Advertising Expense Check if Austin, TX, officeholder living expense Facebook Campaign Ads Facebook Campaign Ads					
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate / Officeholder name H	Office	sought	Office held	
Date 5/1/2019	Payee name RGV Media Group LLC				
Amount (\$) \$998.78	Payee address; City; State; 2 2108 Central Blvd. Brownsville, TX 785				
TYPE OF EXPENDITURE	X Political	Non-Politica	1		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this Advertising Expense	schedule)	Check	f travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense Jailer - Mailing Service for 1194 Postcards	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate / Officeholder name H	Office	sought	Office held	
Forms provided by Texas Ethics	ATTACH ADDITIONAL COPIES OF		DULE AS NE	EDED Revised 9/8/2015	

EXPENDITU	JRES MADE BY CREDIT O	CARD	SCHEDULE F4		
	EXPENDITURE CATEGORIES FO	DR BOX 10(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made I Candidate/Officeholder/Politic	Fees Office Overh Food/Beverage Expense Polling Expe By Gift/Awards/Memorials Expense Printing Exp	ense Iges/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expens Travel In District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F4: 3	2 FILER NAME David Clayton Brashear		3 Filer ID (Ethics Commission Filers)		
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$0.00					
5 Date 5/2/2019	6 Payee name Port Isabel South Padre Press				
7 Amount (\$)	8 Payee address; City; State; Zip Code				
\$540.00	101 Maxan St. Port Isabel, TX 78578				
9 TYPE OF EXPENDITURE	X Political Non-Poli	itical			
10	(a) Category (See Categories listed at the top of this schedule)	(b) Descripti	ion		
PURPOSE		Check	if travel outside of Texas. Complete Schedule T.		
EXPENDITURE	: if Austin, TX, officeholder living expense Campaign Ads				
11 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name Off	fice sought	Office held		
Date 5/31/2019	Payee name Facebook				
Amount (\$)	Payee address; City; State; Zip Code				
\$100.00	1 Hacker Way, Menlo Park, CA 94025				
TYPE OF EXPENDITURE	X Political Non-Pol	litical			
PURPOSE	Category (See Categories listed at the top of this schedule)		if travel outside of Texas. Complete Schedule T.		
EXPENDITURE	Advertising Expense	Facebook Ca	: if Austin, TX, officeholder living expense ampaign Ads		
Complete <u>ONLY</u> if direct expenditure to benefit C/C		fice sought	Office held		
	ATTACH ADDITIONAL COPIES OF THIS SC	CHEDULE AS N			
orms provided by Texas Ethic			Revised 9/8/201		

SCHEDULE ${f G}$

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Politic Credit Card Payment		Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor		Solicitation/Fundraisi Transportation Equipi Travel In District Travel Out Of District Other (enter a catego	nent & Related Expense		
1	Total pages Schedule G: 4	2 FILER NA David Clay		ear			3 Filer ID (Ethics	Commission Filers)
4	Date 5/1/2019	5 Payee nar Citibank		lect Credit Card				
6	Amount (\$) \$200.00 Reimbursement from political contributions intended	7 Payee ad PO Box 7		City; State; Z Phoenix, AZ 8506	•			
8	PURPOSE OF EXPENDITURE		(See Categor dit Card Pa	ies listed at the top of this s l yment	chedule)		019 Facebook Ads,A e of Texas. Complete Sched X, officeholder living expe	ułe T.
9 Complete <u>ONLY</u> if direct Candidate / Officeholder name Office sought Office				Office held				
	Date 5/9/2019	Payee nar Chase N		s Credit Card				
	Amount (\$) \$998.78 Reimbursement from political contributions intended	Payee ad PO Box 6		City; State; Z Carol Stream, IL 601				
	PURPOSE OF EXPENDITURE		(See Categor edit Card P	ies listed at the top of this s ayment	chedule)		RGV Media Group, A e of Texas. Complete Sched X, officeholder living expe	ule T.
	Complete <u>ONLY</u> if direct expenditure to benefit C/0		late / Offic	eholder name		Office sought		Office held
	Date 5/9/2019	Payee nar Chase N		s Credit Card				
	Amount (\$) \$330.37 Reimbursement from political contributions intended	Payee ad PO Box 6	,	City; State; Z Carol Stream, IL 60	•			
	PURPOSE OF EXPENDITURE		(See Categor dit Card Pa	ies listed at the top of this s lyment	chedule)		Coconut Jacks, Ever le of Texas. Complete Sched X, officeholder living expe	ule T.
	Complete <u>ONLY</u> if direct expenditure to benefit C/C		late / Offic	eholder name		Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED							

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)						
	dvertising Expense accounting/Banking consulting Expense contributions/Donations Made I Candidate/Officeholder/Politic redit Card Payment	Fees Food/Beverage Expense By Gitt/Awards/Memonals Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)		
1	Total pages Schedule G: 4	2 FILER NAME 3 Filer ID (Ethics Commission Filers David Clayton Brashear				
4	Date 5/21/2019	5 Payee name Citibank Platium Select Credit Card				
6	Amount (\$) \$137.18 Reimbursement from political contributions intended	7 Payee address; City; State; Zip PO Box 78045 Phoenix, AZ 85062-8045	5			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche Credit Card Payment	Sedule (b) Description 4/13/19 Facebook Ads, Advertising Exper Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Check if Austin, TX, officeholder living expense			
9	Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought	Office held		
	Date 5/21/2019	Payee name Citibank Platium Select Credit Card				
	Amount (\$)	Payee address; City; State; Zip	Code			
	\$846.43 Reimbursement from political contributions intended	PO Box 78045 Phoenix, AZ 85062-80	45			
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sche Credit Card Payment	Check if travel outs	9 Facebook Ads, Advertising Expense ide of Texas. Complete Schedule T. TX, officeholder living expense		
	Complete ONLY if direct expenditure to benefit C/0	Candidate / Officeholder name DH	Office sought	Office held		
	Date 5/21/2019	Payee name Citibank Platium Select Credit Card				
	Amount (\$) \$8.83 Reimbursement from political contributions intended	Payee address; City; State; Zip PO Box 78045 Phoenix, AZ 85062-80				
PURPOSE Category (See Categories listed at the top of OF OF Credit Card Payment		Category (See Categories listed at the top of this sche Credit Card Payment	Check if travel outs	9 Facebook Ads, Advertising Expense ide of Texas. Complete Schedule T. TX, otficeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/0	Candidate / Officeholder name DH	Office sought	Office held		
		ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS NEE	DED		

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment			Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services The Instruction Guide explai	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor hs how to complete this form.		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)	
1	Total pages Schedule G: 4	2 FILER NA David Clay	ME rton Brashear			3 Filer ID (Ethics Commission Filers)
4	Date 6/7/2019	5 Payee nar					
6	Amount (\$) \$540.00 Reimbursement from political contributions intended	7 Payee add PO Box 629	-				
8	PURPOSE OF EXPENDITURE		(See Categories listed at the top of this so dit Card Payment	chedule)	Check if travel outsid	Port Isabel So. Padre Press, Advertin e ot Texas. Complete Schedule T. C, officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/C	-	ate / Officeholder name	1	Office sought	Office held	
	Date 6/7/2019	Payee nar Chase M	ne ileage Plus Credit Card				
	Amount (\$) \$998.78 Reimbursement from political contributions intended	Payee ad PO Box 62	• • •				
	PURPOSE OF EXPENDITURE		(See Categories listed at the top of this so edit Card Payment	chedule)	Check if travel outsid	RGV Media Group, Mailers, Advertising e of Texas. Complete Schedule T. K, officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/C		ate / Officeholder name		Office sought	Office held	
	Date 6/7/2019	Payee nar Chase Mi	ne leage Plus Credit Card				
	Amount (\$) \$540.00 Beimbursement from political contributions intended	Payee ad PO Box 62					
	PURPOSE OF EXPENDITURE		(See Categories listed at the top of this so dit Card Payment	chedule)	Check if travel outsid	Port Isabel So. Padre Press, Advertisir e of Texas. Complete Schedule T. K, officeholder living expense	ig
	Complete <u>ONLY</u> if direct expenditure to benefit C/C		late / Officeholder name		Office sought	Office held	
		ATTA	CH ADDITIONAL COPIES C	OF THIS S	SCHEDULE AS NEED	ED	

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)							
A C C	dvertising Expense ccounting/Banking onsulting Expense onthibutions/Donations Made I Candidate/Officeholder/Politic edit Card Payment		Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services The Instruction Guide explain	Office O Polling E Printing Salaries	payment/Reimbursement verhead/Rental Expense Expense Expense Wages/Contract Labor complete this form.	Solicitation/Fundrais Transportation Equip Travel In District Travel Out Of Distric Other (enter a catego	ment & Related Expense
			•			-	
1	Total pages Schedule G:	2 FILER NA				3 Filer ID (Ethics	s Commission Filers)
	4	David Clay	rton Brashear				
4	Date 7/1/2019	5 Payee nar Tara Rios					
6	Amount (\$)	7 Payee ad	dress; City; State; Zip	o Code			
	\$234.75	PO Box 39	67 South Padre Island, TX 78	597			
	Reimbursement from political contributions intended						
8	PURPOSE	(a) Category	(See Categories listed at the top of this sch	nedule)	(b) Description25 "Cla	yton for Mayor" T-S	hirts by Specialty Advertisers
	OF		Advertising Expense		Check if travel outsid	e of Texas. Complete Sched	dule T. Advertisers
	EXPENDITURE		Advortiging Expense		Check if Austin, T	X, officeholder living exp	ense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/C		late / Officeholder name		Office sought		Office held
	Date 7/4/2019	Payee na Citibank	ne Platium Select Credit Card				
	Amount (\$)	Payee ad	dress; City; State; Zip	o Code			
	\$100.00	PO Box 7	B045 Phoenix, AZ 85062-4	8045			
	Reimbursement from political contributions intended						
	PURPOSE OF EXPENDITURE		(See Categories listed at the top of this sch redit Card Payment	nedule)		9 Facebook Ads, Ad le of Texas. Complete Scher X, officeholder living exp	dule T.
	Complete <u>ONLY</u> if direct expenditure to benefit C/C		late / Officeholder name	I	Office sought		Office held
	Date	Payee na	ne				
	Amount (\$)	Payee ad	dress; City; State; Zip	o Code			
	Reimbursement from political contributions intended						
	DUDDOST	Category	(See Categories listed at the top of this sch	nedule)	(b) Description		
	PURPOSE OF				Check if travel outsid	le of Texas. Complete Schee	lule T.
	EXPENDITURE				Check if Austin, T	X, officeholder living exp	ense
	Complete <u>ONLY</u> if direct expenditure to benefit C/C		late / Officeholder name		Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED						

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

	The Instruction Guide explains how Complete only if "Report Type" on page					
C/OH N		2 Filer ID (Ethics Commission Filers)				
	vid Clayton Brashear					
	SIGNATURE					
SIGINA	I ORE					
ing a re	expect any further political contributions or political expenditures in port as a final report terminates my campaign treasurer appointm utions or make any campaign expenditures without a campaign tre	ent. I also understand that I may not accept any campaigr				
	WHO IS NOT AN OFFICEHOLDER nplete A & B below <i>only</i> if you are not an officeholder					
Α.	CAMPAIGN FUNDS					
Chec	k only one:					
X	I do not have unexpended contributions or unexpended interest	or income earned from political contributions.				
	I have unexpended contributions or unexpended interest or inc may not convert unexpended political contributions or unexper personal use. I also understand that I must file an annual rep unexpended contributions or unexpended interest or income ear this final report. Further, I understand that I must dispose of un income earned on political contributions in accordance with the	nded interest or income earned on political contributions port of unexpended contributions and that I may not reta ned on political contributions longer than six years after filir expended political contributions and unexpended interest				
В.	ASSETS					
Chec	k only one:					
x	I do not retain assets purchased with political contributions or in	terest or other income from political contributions.				
	I do retain assets purchased with political contributions or intere that I may not convert assets purchased with political contribution personal use. I also understand that I must dispose of assets p requirements of Election Code, § 254.204.	est or other income from political contributions. I understar				
	EHOLDER applete this section <i>only</i> if you are an officeholder					
	I am aware that I remain subject to filing requirements applicable to file. I am also aware that I will be required to file reports of unexper officeholder, I retain political contributions, interest or other income cal contributions or interest or other income from political contrib	nded contributions if, after filing the last required report as an from political contributions, or assets purchased with politi				