

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

|  |  |                |  |
|--|--|----------------|--|
| <b>The C/OH Instruction Guide explains how to complete this form.</b>                        |  | 1 Filer ID     | 2 Total pages filed:<br>5  |
| 3 CANDIDATE / OFFICEHOLDER NAME  | MS / MRS / MR  | FIRST<br>Dee   | MI   |
|  | NICKNAME   | LAST<br>Howard | SUFFIX   |
| <b>OFFICE USE ONLY</b>   |  |                |  |
| Date Received<br><i>BP 7/12/19</i>   |  |                |  |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS<br><br><input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY;<br>P. O. Box 6790<br><br>Huntsville, TX 77342   |                | ZIP CODE   |
|  | Date Hand-delivered or Date Postmarked<br><i>BP 7/12/19</i>  |                | Receipt #<br>—   |
|  | Amount<br><i>0</i>   |                | Date Processed<br><i>BP 7/12/19</i>  |
|  |  |                | Date Imaged<br><i>BP 7/12/19</i>   |
| 5 CAMPAIGN TREASURER NAME  | MS / MRS / MR  | FIRST          | MI   |
|  | NICKNAME   | SUFFIX         |  |
| Rosalyn Kelly<br>329 F M 247   |  |                |  |
| 6 CAMPAIGN TREASURER ADDRESS<br><br>(Residence or Business)                                  | STREET ADDRESS<br>Huntsville, Tex 77320<br>936 661-0675  |                | SUITE #; CITY; STATE; ZIP CODE   |
|  | AREA CODE  | PHONE NUMBER   | EXTENSION  |
| 8 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 checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)                |                |  |
| 9 PERIOD COVERED   | Month    Day    Year<br>01/16/2019   |                | THROUGH    Month    Day    Year<br>06/30/2019  |
|  | 10 ELECTION<br>ELECTION DATE<br>Month    Day    Year<br>12/15/2018   |                | ELECTION TYPE<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other<br><input type="checkbox"/> General <input type="checkbox"/> Special |
| 11 OFFICE  | OFFICE HELD (if any)<br>City Council Place Huntsville Walker   |                | 12 OFFICE SOUGHT (if known)  |
|  |  |                |  |

**GO TO PAGE 2**

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

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

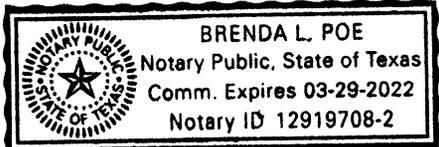
2 of 5

|                                   |                    |
|-----------------------------------|--------------------|
| <b>13 C / OH NAME</b> Howard, Dee | <b>14 Filer ID</b> |
|-----------------------------------|--------------------|

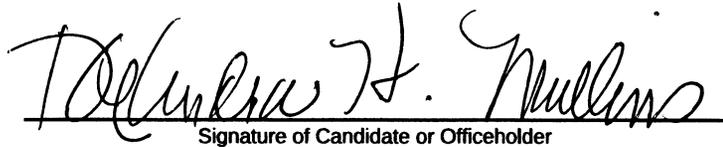
|   |  |                       |
|---|--|-----------------------|
| <b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b><br><br><input type="checkbox"/> Additional Pages | This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. |                       |
| <input type="checkbox"/> GENERAL<br><br><input type="checkbox"/> SPECIFIC                     | <b>COMMITTEE TYPE</b>  | <b>COMMITTEE NAME</b> |
|   | <b>COMMITTEE ADDRESS</b>   |                       |
|   | <b>COMMITTEE CAMPAIGN TREASURER NAME</b>   |                       |
|   | <b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>  |                       |

|                                |    |  |    |        |
|--------------------------------|----|--|----|--------|
| <b>16 CONTRIBUTION TOTALS</b>  | 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)                                  | \$ | 0.00   |
| <b>EXPENDITURE TOTALS</b>      | 3. | TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED   | \$ | 0.00   |
|                                | 4. | TOTAL POLITICAL EXPENDITURES   | \$ | 0.00   |
| <b>CONTRIBUTION BALANCE</b>    | 5. | TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD                                | \$ | 313.60 |
| <b>OUTSTANDING LOAN TOTALS</b> | 6. | TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD                         | \$ | 0.00   |

**17 AFFADAVIT**

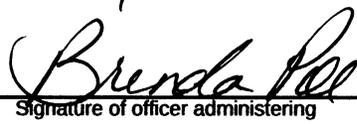


I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

  
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Dee Howard, this the 12<sup>th</sup> day of July, 2019, to certify which, witness my hand and seal of office.

  
 Signature of officer administering

Brenda Poe  
 Printed name of officer administering

City Secretary  
 Title of officer administering oath

# SUBTOTALS - C/OH

|                                     |                    |
|-------------------------------------|--------------------|
| <b>18 FILER NAME</b><br>Howard, Dee | <b>19 Filer ID</b> |
|-------------------------------------|--------------------|

| <b>20 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE  | SUBTOTAL AMOUNT |
|---|-----------------|
| 1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                            | \$ 0.00         |
| 2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS              | \$ 0.00         |
| 3. <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS  | \$ 0.00         |
| 4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS  | \$ 0.00         |
| 5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS         | \$ 0.00         |
| 6. <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS                                 | \$ 0.00         |
| 7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS                   | \$              |
| 8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                            | \$ 0.00         |
| 9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS                   | \$ 0.00         |
| 10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH             | \$              |
| 11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                | \$              |
| 12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$              |

# PLEGGED CONTRIBUTIONS

SCHEDULE B

|  |   |   |  |
|--|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b> |   | <b>1</b> Total pages Schedule B:<br>Sch: 1/1 Rpt: 4/5                           |  |
| <b>2</b> FILER NAME<br>Howard, Dee                               |   | <b>3</b> Filer ID<br>dhoward4you@gmail.com                                      |  |
| <b>4</b> TOTAL OF UNITEMIZED PLEDGES                             |   | \$ 0.00   |  |
| <b>5</b> Date  | <b>6</b> Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) | <b>8</b> Amount of pledge (\$)  | <b>9</b> In-kind description (If applicable) |
|  | <b>7</b> Pledgor Address; City; State; Zip Code                                       |   |  |
|  |   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |  |
| <b>10</b> Principal occupation / Job title (See Instructions)    |   | <b>11</b> Employer (See Instructions)   |  |

# LOANS

# SCHEDULE E

|  |  |  |
|--|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>           |  | <b>1</b> Total pages Schedule E:<br>Sch: 1/1 Rpt: 5/5  |
| <b>2</b> FILER NAME<br>Howard, Dee   |  | <b>3</b> Filer ID  |
| <b>4</b> TOTAL OF UNITEMIZED LOANS   |  | \$ 0.00  |
| <b>5</b> Date of loan  | <b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) | <b>9</b> Loan Amount (\$)  |
| <b>6</b> Is lender a financial institution?                                | <b>8</b> Lender address; City; State; Zip Code                                 | <b>10</b> Interest Rate  |
|  |  | <b>11</b> Maturity Date  |
| <b>12</b> Principal occupation / Job title (See Instructions)              |  | <b>13</b> Employer (See Instructions)  |
| <b>14</b> Description of Collateral<br><input type="checkbox"/> None       |  | <b>15</b> Check if personal funds were deposited into political account (See Instructions)<br><input type="checkbox"/> |
| <b>16</b> GUARANTOR INFORMATION<br><input type="checkbox"/> not applicable | <b>17</b> Name of guarantor  | <b>19</b> Amount Guaranteed (\$)   |
|  | <b>18</b> Guarantor address; City; State; Zip Code                             |  |
| <b>20</b> Principal occupation   |  | <b>21</b> Employer (See Instructions)  |