

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filer)

2 Total pages filed

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR FIRST MI
Mr. Daniel M.
NICKNAME LAST SUFFIX
Pope

OFFICE USE ONLY

Date Received

RECEIVED
APR 29 2016
OFFICE OF THE CITY SECRETARY
LUBBOCK, TEXAS

3:41 pm
MM

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX APT / SUITE # CITY STATE ZIP CODE

[REDACTED]

Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION

[REDACTED]

Date Hand-delivered or Date Postmarked

6 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI
Mr. Barry M.
NICKNAME LAST SUFFIX
Orr

Receipt #

Amount \$

Date Processed

Date Imaged

7 CAMPAIGN TREASURER ADDRESS

STREET ADDRESS (NO PO BOX PLEASE) APT / SUITE # CITY STATE ZIP CODE

[REDACTED]

(Residence or Business)

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

[REDACTED]

9 REPORT TYPE

- January 15 30th day before election Recall 15th day after campaign treasurer appointment (Officeholder Only)
- July 15 5th day before election Exceeded \$500 limit Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year Month Day Year
3 29 2016 THROUGH 4 27 2016

11 ELECTION

ELECTION DATE ELECTION TYPE

Month Day Year Primary Run-off Other Description

5 7 2016 General Special

12 OFFICE

OFFICE HELD (if any)
LISD Board of Trustees,
Member District 5

13 OFFICE SUGHT (if known)

Mayor

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME
Daniel M. Pope

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

additional pages

COMMITTEE NAME

COMMITTEE ADDRESS

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	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 39,725.49
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 80,690.24
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 30,271.54
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 50,000.00

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.

[Handwritten Signature]

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Daniel M. Pope, this the 29th day of April, 20 16, to certify which, witness my hand and seal of office.

[Handwritten Signature]
Signature of officer administering oath

Magen D. Murchison
Printed name of officer administering oath

Notary Public
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:
26

2 FILER NAME

Daniel M. Pope

3 ACCOUNT # (Ethics Commission Filers)

4 Date

3/29/2016

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

Randy Armstrong

6 Contributor address; City; State; Zip Code

7 Amount of contribution (\$)

\$500.00

(If travel outside of Texas, complete Schedule T)

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/29/2016

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

Patrick Huston

Contributor address; City; State; Zip Code

Amount of contribution (\$)

\$100.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/29/2016

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

David Fuller

Contributor address; City; State; Zip Code

Amount of contribution (\$)

\$500.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/29/2016

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

Brian Irlbeck

Contributor address; City; State; Zip Code

Amount of contribution (\$)

\$100.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/29/2016

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

Mark Wagnon

Contributor address; City; State; Zip Code

Amount of contribution (\$)

\$500.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

Daniel M. Pope

3 ACCOUNT # (Ethics Commission Filers)

4 Date

3/29/2016

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

Tom & Kyla Sell

6 Contributor address; City; State; Zip Code

7 Amount of contribution (\$) |

\$250.00

(If travel outside of Texas, complete Schedule T)

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/29/2016

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

Glen Glasscock

Contributor address; City; State; Zip Code

Amount of contribution (\$) |

\$40.49

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/29/2016

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

Jerred Hurst

Contributor address; City; State; Zip Code

Amount of contribution (\$) |

\$500.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/29/2016

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

Karen Worley

Contributor address; City; State; Zip Code

Amount of contribution (\$) |

\$250.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/30/2016

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

Myles Thomason

Contributor address; City; State; Zip Code

Amount of contribution (\$) |

\$500.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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1 Total pages Schedule A:

2 FILER NAME

Daniel M. Pope

3 ACCOUNT # (Ethics Commission Filers)

4 Date

3/30/2016

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

Alan Tidmore

7 Amount of
contribution (\$) | 8 In-kind contribution
description (if applicable)

6 Contributor address; City; State; Zip Code

\$100.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/30/2016

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

Stewart Townsen

Amount of
contribution (\$) | In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

\$200.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/30/2016

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

Dan Wilson

Amount of
contribution (\$) | In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

\$500.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/30/2016

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

Burl Masters

Amount of
contribution (\$) | In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

\$200.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/30/2016

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

Ruth Schiermeyer

Amount of
contribution (\$) | In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A	
2 FILER NAME Daniel M. Pope		3 ACCOJNT # (Ethics Commission Filers)	
4 Date 3/30/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Paul Goebel 6 Contributor address; City, State, Zip Code [REDACTED]	7 Amount of contribution (\$) \$250.00 <small>(If travel outside of Texas, complete Schedule T)</small>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 3/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Greg Garrison Contributor address; City, State, Zip Code [REDACTED]	Amount of contribution (\$) \$500.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Everett Seymore Contributor address; City, State, Zip Code [REDACTED]	Amount of contribution (\$) \$250.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Don Walker Contributor address; City, State, Zip Code [REDACTED]	Amount of contribution (\$) \$250.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) James Lowder Contributor address; City, State, Zip Code [REDACTED]	Amount of contribution (\$) \$50.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Daniel M. Pope		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3/30/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) J.W. Holt	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code [REDACTED]		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 3/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tony Privett	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rebecca Raedeke, M.D.	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Keith Bryant	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Truett Craft	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Daniel M. Pope		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3/30/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Aaron Daniel Homes of West Texas LLC 6 Contributor address; City; State; Zip Code 	7 Amount of contribution (\$) \$300.00 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 3/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wm. Jewell Davis Contributor address; City; State; Zip Code 	Amount of contribution (\$) \$500.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Larry Driskill Contributor address; City; State; Zip Code 	Amount of contribution (\$) \$200.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cory Dulin Contributor address; City; State; Zip Code 	Amount of contribution (\$) \$150.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Phebe Ellis-Roach Contributor address; City; State; Zip Code 	Amount of contribution (\$) \$500.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A	
2 FILER NAME Daniel M. Pope		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3/30/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tim Green Properties 6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$) \$100.00 <small>(If travel outside of Texas, complete Schedule T)</small>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 3/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Charlie Hamilton Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) \$500.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) John Leonard III Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) \$100.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Richard McGuire Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) \$250.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Henry Mendoza Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) \$200.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Daniel M. Pope		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3/30/2016	5 Full name of contributor <input type="checkbox"/> cut-of-state PAC (ID# _____) Carl Mortensen	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <div style="background-color: black; width: 100%; height: 20px;"></div>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 3/30/2016	Full name of contributor <input type="checkbox"/> cut-of-state PAC (ID# _____) Pipkin Properties	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <div style="background-color: black; width: 100%; height: 20px;"></div>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/30/2016	Full name of contributor <input type="checkbox"/> cut-of-state PAC (ID# _____) Brian or Cynthia Richards	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <div style="background-color: black; width: 100%; height: 20px;"></div>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/30/2016	Full name of contributor <input type="checkbox"/> cut-of-state PAC (ID# _____) John V. Sweeney	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <div style="background-color: black; width: 100%; height: 20px;"></div>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/31/2016	Full name of contributor <input type="checkbox"/> cut-of-state PAC (ID# _____) Jonathan Stephens	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <div style="background-color: black; width: 100%; height: 20px;"></div>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Daniel M. Pope		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3/31/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lackey Appraisal Company/Ken Lackey	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code [REDACTED]		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 3/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Paul Stell	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Steve McGavock	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Glenn Cochran	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mike Bennett	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME Daniel M. Pope		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3/31/2016	5 Full name of contributor <input type="checkbox"/> cut-of-state PAC (ID# _____) Bill Dean 6 Contributor address; City; State; Zip Code 	7 Amount of contribution (\$) \$100.00 <small>(If travel outside of Texas, complete Schedule T)</small>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 3/31/2016	Full name of contributor <input type="checkbox"/> cut-of-state PAC (ID# _____) Charles Yeager Contributor address; City; State; Zip Code 	Amount of contribution (\$) \$100.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/31/2016	Full name of contributor <input type="checkbox"/> cut-of-state PAC (ID# _____) Mike Calfin Contributor address; City; State; Zip Code 	Amount of contribution (\$) \$100.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/31/2016	Full name of contributor <input type="checkbox"/> cut-of-state PAC (ID# _____) GW Davis Contributor address; City; State; Zip Code 	Amount of contribution (\$) \$1,000.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/31/2016	Full name of contributor <input type="checkbox"/> cut-of-state PAC (ID# _____) Everett Seymore Contributor address; City; State; Zip Code 	Amount of contribution (\$) \$250.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Daniel M. Pope		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3/31/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jon Wiley 6 Contributor address, City, State, Zip Code <div style="background-color: black; width: 100%; height: 20px;"></div>	7 Amount of contribution (\$) \$60.00 <small>(If travel outside of Texas, complete Schedule T)</small>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/5/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Craig McDonald Contributor address, City, State, Zip Code <div style="background-color: black; width: 100%; height: 20px;"></div>	Amount of contribution (\$) \$100.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/5/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dick Pollard Contributor address, City, State, Zip Code <div style="background-color: black; width: 100%; height: 20px;"></div>	Amount of contribution (\$) \$200.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/5/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robert Rodgers Contributor address, City, State, Zip Code <div style="background-color: black; width: 100%; height: 20px;"></div>	Amount of contribution (\$) \$250.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/5/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodney Madsen Contributor address, City, State, Zip Code <div style="background-color: black; width: 100%; height: 20px;"></div>	Amount of contribution (\$) \$500.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Daniel M. Pope		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/5/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Joe McKay 6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$) \$100.00 <small>(If travel outside of Texas, complete Schedule T)</small>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/5/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tommy Clark Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) \$100.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/5/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ben Edwards Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) \$500.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/5/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tommy Thrash Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) \$500.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/5/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Amanda Kuhn Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) \$400.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Daniel M. Pope		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/5/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jeff Lowry 6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/5/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dan Lewis Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) \$200.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/5/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Charlie R. Young Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) \$250.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/5/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mike Cobb Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) \$250.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/5/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kelly McDaniel Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A	
2 FILER NAME Daniel M. Pope		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/5/2016	5 Full name of contributor <input type="checkbox"/> cut-of-state PAC (ID# _____) Steve Pitts 6 Contributor address: City, State, Zip Code 	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4/5/2016	Russell and Gracelyn Thomasson Contributor address: City, State, Zip Code 	\$100.00	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
4/5/2016	Jeff Mercer Contributor address: City, State, Zip Code 	\$100.00	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
4/5/2016	Gail Tutino Contributor address: City, State, Zip Code 	\$50.00	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
4/5/2016	Todd Doshier Contributor address: City, State, Zip Code 	\$100.00	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

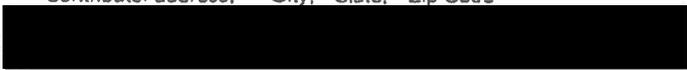
The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Daniel M. Pope		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/5/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) David Miller 6 Contributor address, City, State, Zip Code [REDACTED]	7 Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/5/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Charles Needham Contributor address, City, State, Zip Code [REDACTED]	Amount of contribution (\$) \$500.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/8/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) James Brock Contributor address, City, State, Zip Code [REDACTED]	Amount of contribution (\$) \$200.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/8/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bill Maloy Contributor address, City, State, Zip Code [REDACTED]	Amount of contribution (\$) \$200.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/8/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bonnie Moss Contributor address, City, State, Zip Code [REDACTED]	Amount of contribution (\$) \$250.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME Daniel M. Pope		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/5/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Patrick & Julia Camp 6 Contributor address; City; State; Zip Code 	7 Amount of contribution (\$) \$500.00 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/8/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rich Oller Contributor address; City; State; Zip Code 	Amount of contribution (\$) \$250.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/8/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ann Martin Contributor address; City; State; Zip Code 	Amount of contribution (\$) \$200.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/8/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Michael & Callie Bletsch Contributor address; City; State; Zip Code 	Amount of contribution (\$) \$250.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/8/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brock Crenex Contributor address; City; State; Zip Code 	Amount of contribution (\$) \$250.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

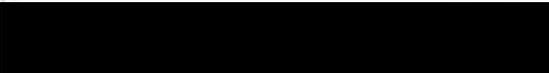
The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Daniel M. Pope		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/8/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) A. Edwin Fowler 6 Contributor address: City: State: Zip Code <div style="background-color: black; width: 100%; height: 1.2em; margin-top: 5px;"></div>	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
10 Employer (See Instructions)			
Date 4/8/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lubbock Apartment Association Contributor address: City: State: Zip Code <div style="background-color: black; width: 100%; height: 1.2em; margin-top: 5px;"></div>	Amount of contribution (\$) \$1,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			
Date 4/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rick Boyd Contributor address: City: State: Zip Code <div style="background-color: black; width: 100%; height: 1.2em; margin-top: 5px;"></div>	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			
Date 4/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Keith Mann Contributor address: City: State: Zip Code <div style="background-color: black; width: 100%; height: 1.2em; margin-top: 5px;"></div>	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			
Date 4/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gregory Hardberger Contributor address: City: State: Zip Code <div style="background-color: black; width: 100%; height: 1.2em; margin-top: 5px;"></div>	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME Daniel M. Pope		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/12/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mark Vinson 6 Contributor address; City; State; Zip Code 	7 Amount of contribution (\$) \$250.00 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rajeev Gill Contributor address; City; State; Zip Code 	Amount of contribution (\$) \$3,000.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sam Law Contributor address; City; State; Zip Code 	Amount of contribution (\$) \$250.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/13/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mark Blankenship Contributor address; City; State; Zip Code 	Amount of contribution (\$) \$250.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/13/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lindy Lauderdale Contributor address; City; State; Zip Code 	Amount of contribution (\$) \$500.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Daniel M. Pope		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/14/2016	5 Full name of contributor <input type="checkbox"/> cut-of-state PAC (ID# _____) Jerry F. Grimes 6 Contributor address; City, State, Zip Code 	7 Amount of contribution (\$) \$25.00 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/14/2016	Full name of contributor <input type="checkbox"/> cut-of-state PAC (ID# _____) Mrs. Johnny Fisher Contributor address; City, State, Zip Code 	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/14/2016	Full name of contributor <input type="checkbox"/> cut-of-state PAC (ID# _____) Mike W. Moss Contributor address; City, State, Zip Code 	Amount of contribution (\$) \$500.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/14/2016	Full name of contributor <input type="checkbox"/> cut-of-state PAC (ID# _____) Jay Eagan Contributor address; City, State, Zip Code 	Amount of contribution (\$) \$500.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/15/2016	Full name of contributor <input type="checkbox"/> cut-of-state PAC (ID# _____) Chip Gilmour Contributor address; City, State, Zip Code 	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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SCHEDULE A

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2 FILER NAME Daniel M. Pope		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/15/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dustin Brooks 6 Contributor address; City; State; Zip Code 	7 Amount of contribution (\$) \$1,000.00 <small>(If travel outside of Texas, complete Schedule T)</small>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/15/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ryan Bigbee Contributor address; City; State; Zip Code 	Amount of contribution (\$) \$200.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ted Liggett Contributor address; City; State; Zip Code 	Amount of contribution (\$) \$1,000.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jack & Zelda Armstrong Contributor address; City; State; Zip Code 	Amount of contribution (\$) \$100.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Larry Bradley Contributor address; City; State; Zip Code 	Amount of contribution (\$) \$250.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME Daniel M. Pope		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/19/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pat Ham 6 Contributor address; City; State; Zip Code 	7 Amount of contribution (\$) \$100.00 <small>(If travel outside of Texas, complete Schedule T)</small>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) W.R. Collier Contributor address; City; State; Zip Code 	Amount of contribution (\$) \$250.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brian & Carolyn Bruening Contributor address; City; State; Zip Code 	Amount of contribution (\$) \$100.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mark Bain Contributor address; City; State; Zip Code 	Amount of contribution (\$) \$250.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dennis Dillon Contributor address; City; State; Zip Code 	Amount of contribution (\$) \$500.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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SCHEDULE A

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2 FILER NAME Daniel M. Pope		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/19/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Michael & Loretta Owen 6 Contributor address; City; State; Zip Code <div style="background-color: black; width: 100%; height: 1.2em; margin-top: 5px;"></div>	7 Amount of contribution (\$) \$500.00 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jerry & Sue Hudson Contributor address; City; State; Zip Code <div style="background-color: black; width: 100%; height: 1.2em; margin-top: 5px;"></div>	Amount of contribution (\$) \$200.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jack McCutchin Jr. Contributor address; City; State; Zip Code <div style="background-color: black; width: 100%; height: 1.2em; margin-top: 5px;"></div>	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bryan C. Bennett Contributor address; City; State; Zip Code <div style="background-color: black; width: 100%; height: 1.2em; margin-top: 5px;"></div>	Amount of contribution (\$) \$500.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sue Willhoit Contributor address; City; State; Zip Code <div style="background-color: black; width: 100%; height: 1.2em; margin-top: 5px;"></div>	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME Daniel M. Pope		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/19/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thomas McSpadden 6 Contributor address; City; State; Zip Code 	7 Amount of contribution (\$) \$100.00 <small>(If travel outside of Texas, complete Schedule T)</small>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4/19/2016	Brian Etchison Contributor address; City; State; Zip Code 	\$500.00 <small>(If travel outside of Texas, complete Schedule T)</small>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
4/19/2016	Shane Salyer Contributor address; City; State; Zip Code 	\$100.00 <small>(If travel outside of Texas, complete Schedule T)</small>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
4/25/2016	Alicia Knight Contributor address; City; State; Zip Code 	\$50.00 <small>(If travel outside of Texas, complete Schedule T)</small>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
4/25/2016	Brent & Jana Hoffman Contributor address; City; State; Zip Code 	\$250.00 <small>(If travel outside of Texas, complete Schedule T)</small>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A.	
2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/25/2016	5 Full name of contributor <input type="checkbox"/> cut-of-state PAC (ID# _____) Bill Tarro 6 Contributor address; City; State; Zip Code <div style="background-color: black; width: 100%; height: 20px;"></div>	7 Amount of contribution (\$) \$100.00 <small>(If travel outside of Texas, complete Schedule T)</small>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/25/2016	Full name of contributor <input type="checkbox"/> cut-of-state PAC (ID# _____) David Owen Contributor address; City; State; Zip Code <div style="background-color: black; width: 100%; height: 20px;"></div>	Amount of contribution (\$) \$100.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/25/2016	Full name of contributor <input type="checkbox"/> cut-of-state PAC (ID# _____) Loren Mauk Contributor address; City; State; Zip Code <div style="background-color: black; width: 100%; height: 20px;"></div>	Amount of contribution (\$) \$500.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/26/2016	Full name of contributor <input type="checkbox"/> cut-of-state PAC (ID# _____) Barry Johnston Contributor address; City; State; Zip Code <div style="background-color: black; width: 100%; height: 20px;"></div>	Amount of contribution (\$) \$50.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/26/2016	Full name of contributor <input type="checkbox"/> cut-of-state PAC (ID# _____) Marc Shipton Contributor address; City; State; Zip Code <div style="background-color: black; width: 100%; height: 20px;"></div>	Amount of contribution (\$) \$500.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Daniel M. Pope		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/26/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) TREPAC/ Texas Association of Realtors PAC 6 Contributor address; City; State; Zip Code <div style="background-color: black; width: 100%; height: 1.2em; margin-top: 5px;"></div>	7 Amount of contribution (\$) \$1,000.00 <small>(If travel outside of Texas, complete Schedule T)</small>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robert Schmid Contributor address; City; State; Zip Code <div style="background-color: black; width: 100%; height: 1.2em; margin-top: 5px;"></div>	Amount of contribution (\$) \$1,000.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jay Adkins, DDS Contributor address; City; State; Zip Code <div style="background-color: black; width: 100%; height: 1.2em; margin-top: 5px;"></div>	Amount of contribution (\$) \$200.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Keith Thompson Contributor address; City; State; Zip Code <div style="background-color: black; width: 100%; height: 1.2em; margin-top: 5px;"></div>	Amount of contribution (\$) \$250.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bonnie Aycock Contributor address; City; State; Zip Code <div style="background-color: black; width: 100%; height: 1.2em; margin-top: 5px;"></div>	Amount of contribution (\$) \$250.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Daniel M. Pope		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/26/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) W.J. Wade Jr. 6 Contributor address; City; State; Zip Code <div style="background-color: black; width: 100%; height: 1.2em; margin-top: 5px;"></div>	7 Amount of contribution (\$) \$100.00 <small>(If travel outside of Texas, complete Schedule T)</small>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr. or Mrs. Tim Hatch Contributor address; City; State; Zip Code <div style="background-color: black; width: 100%; height: 1.2em; margin-top: 5px;"></div>	Amount of contribution (\$) \$100.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dr. Idris Rhea Traylor Jr. Contributor address; City; State; Zip Code <div style="background-color: black; width: 100%; height: 1.2em; margin-top: 5px;"></div>	Amount of contribution (\$) \$200.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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 | Printing Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | | 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 7	2 FILER NAME Daniel M. Pope	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 3/30/2016	5 Payee name Action Printing
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6 Amount (\$) \$924.44	7 Payee address; City; State; Zip Code 
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense	(b) Description (If travel outside of Texas, complete Schedule T)
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/30/2016	Payee name Barry Orr
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Amount (\$) \$105.00	Payee address; City; State; Zip Code 
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/5/2016	Payee name Primitive Social
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Amount (\$) \$1,750.00	Payee address; City; State; Zip Code 
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising/Social Media	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/5/2016	Payee name Primitive Social
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Amount (\$) \$2,390.03	Payee address; City; State; Zip Code 
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Social Media/Advertising	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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 Daniel M. Pope	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 4/4/2016	5 Payee name Kay Fletcher
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6 Amount (\$) \$2,500.00	7 Payee address, City, State, Zip Code [REDACTED]
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries - Campaign Mgr	(b) Description (If travel outside of Texas, complete Schedule T)
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/8/2016	Payee name Advanced Graphix
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Amount (\$) \$2,478.93	Payee address; City, State, Zip Code [REDACTED]
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/8/2016	Payee name Action Printing
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Amount (\$) \$924.44	Payee address, City, State, Zip Code [REDACTED]
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/15/2016	Payee name First Bank & Trust Visa
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Amount (\$) \$952.90	Payee address, City, State, Zip Code [REDACTED]
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office/Campaign Expense	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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 | Printing Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | | 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 Daniel M. Pope	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 4/13/2016	5 Payee name First Bank & Trust
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6 Amount (\$) \$162.96	7 Payee address, City, State, Zip Code [REDACTED]
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description (If travel outside of Texas, complete Schedule T)
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/14/2016	Payee name KCBD
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Amount (\$) \$11,305.00	Payee address, City, State, Zip Code [REDACTED]
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/15/2016	Payee name Fox 34
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Amount (\$) \$2,639.25	Payee address, City, State, Zip Code [REDACTED]
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/14/2016	Payee name Mike Stevens
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Amount (\$) \$8,750.00	Payee address, City, State, Zip Code [REDACTED]
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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	Printing Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees		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 Daniel M. Pope	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 4/18/2016	5 Payee name KLBK
6 Amount (\$) \$1,700.00	7 Payee address; City; State; Zip Code 

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)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 4/18/2016	Payee name KMAC
Amount (\$) \$2,282.00	Payee address; City; State; Zip Code 

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	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

Date 4/19/2016	Payee name First Bank & Trust
Amount (\$) \$95.51	Payee address; City; State; Zip Code 

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	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

Date 4/19/2016	Payee name First Bank & Trust
Amount (\$) \$187.00	Payee address; City; State; Zip Code 

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	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

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 Daniel M. Pope	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 4/14/2016	5 Payee name City of Lubbock
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6 Amount (\$) \$102.20	7 Payee address; City; State; Zip Code 
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/20/2016	Payee name Atmos Energy
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Amount (\$) \$29.44	Payee address; City; State; Zip Code 
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/22/2016	Payee name FMAC
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Amount (\$) \$2,282.00	Payee address; City; State; Zip Code 
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/22/2016	Payee name KLBK
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Amount (\$) \$1,700.00	Payee address; City; State; Zip Code 
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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	Printing Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees		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 Daniel M. Pope	3 ACCOUNT # (Ethics Commission Filer)
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4 Date 4/22/2016	5 Payee name KCBD
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6 Amount (\$) \$11,815.00	7 Payee address, City, State, Zip Code 
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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)
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/22/2016	Payee name Ramar Communications
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Amount (\$) \$1,000.00	Payee address, City, State, Zip Code 
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/22/2015	Payee name KFYO
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Amount (\$) \$1,000.00	Payee address, City, State, Zip Code 
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	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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Date 4/22/2016	Payee name KRFE
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Amount (\$) \$500.00	Payee address, City, State, Zip Code 
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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	Printing Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees		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 Daniel M. Pope		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/25/2016		5 Payee name Anedot			
6 Amount (\$) \$400.57		7 Payee address, City, State, Zip Code [REDACTED]			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 4/19/2016		Payee name Top Tier Catering			
Amount (\$) \$1,609.34		Payee address, City, State, Zip Code [REDACTED]			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food/Beverage Expense		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	
Date 4/8/2016		Payee name Dan Pope			
Amount (\$) \$210.17		Payee address, City, State, Zip Code [REDACTED]			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Event Expense		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	
Date 4/20/2016		Payee name Action Printing			
Amount (\$) \$20,894.06		Payee address, City, State, Zip Code [REDACTED]			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Printing Expense		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	

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