

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 Filers)	2 Total pages filed: 33
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: _____ FIRST: John MI: P NICKNAME: _____ LAST: NICHOLS SUFFIX: _____	OFFICE USE ONLY Date Received: HAND DELIVERED OCT 10 2016 DELIVERED <i>Alm @ 1:50pm</i> Date Hand-delivered or Date Postmarked: _____ Receipt #: _____ Amount \$: _____ Date Processed: _____ Date Imaged: _____	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1317 Angelina Ct. College Station TX 77840		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE: (979) PHONE NUMBER: 693-2517 EXTENSION: _____		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR: _____ FIRST: STEVE MI: _____ NICKNAME: _____ LAST: BEACHY SUFFIX: _____		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1101 Neal Pickett Dr. College Station, TX 77840		
8 CAMPAIGN TREASURER PHONE	AREA CODE: (979) PHONE NUMBER: 693-5147 EXTENSION: _____		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 07 / 01 / 2016 09 / 29 / 2016		
11 ELECTION	ELECTION DATE Month Day Year 11 / 8 / 2016	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) MAYOR	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME JOHN P. NICHOLS

15 Filer ID (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	COMMITTEE NAME
<input type="checkbox"/> GENERAL	
<input type="checkbox"/> SPECIFIC	
COMMITTEE ADDRESS	
COMMITTEE CAMPAIGN TREASURER NAME	
COMMITTEE CAMPAIGN TREASURER ADDRESS	

Additional Pages

17 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 1860.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 18,885.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 320.00

4. TOTAL POLITICAL EXPENDITURES \$ 7,164.62

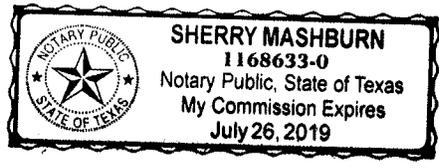
CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 13,699.93

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 10,000.00

18 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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.

John P. Nichols
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said John P. Nichols, this the 10th day of October, 2016, to certify which, witness my hand and seal of office.

Sherry Mashburn Signature of officer administering oath
Sherry Mashburn Printed name of officer administering oath
City Secretary Title of officer administering oath

Министерство культуры
и народного образования
Совиетского правительства
РСФСР

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 18,685
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 200
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 6,519.62
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 645
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

26

2 FILER NAME

John P. Nichols

3 Filer ID (Ethics Commission Filers)

4 Date

7/22/16

5 Full name of contributor

out-of-state PAC (ID#: _____)

Dean and Dorothy Wheeler

6 Contributor address;

City; State; Zip Code

4482 Stonebriar College Station, TX
77845

7 Amount of contribution (\$)

250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

7/25/16

Full name of contributor

out-of-state PAC (ID#: _____)

James Butler

Contributor address;

City; State; Zip Code

6010 Shorroughs College Station, TX
77845

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

7/27/16

Full name of contributor

out-of-state PAC (ID#: _____)

James Jett - Jett Property Management

Contributor address;

City; State; Zip Code

6166 Imperia Loop College Station, TX
Suite 10 77845

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/10/16

Full name of contributor

out-of-state PAC (ID#: _____)

Casey Alani

Contributor address;

City; State; Zip Code

1308 Angeline College Station, TX
77840

Amount of contribution (\$)

100.00

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

John P. Nichols

3 Filer ID (Ethics Commission Filers)

4 Date

8/12/16

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

Steve and Mary Alice Beahy

6 Contributor address; City; State; Zip Code
1101 Neal Pickett College Station, TX 77840

7 Amount of contribution (\$)

\$ 200

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

8/18/16

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

Stephen and Nancy Searcy

Contributor address; City; State; Zip Code
1521 Frost Dr. College Station, TX 77845

Amount of contribution (\$)

\$ 250

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/15/16

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

Richard and Rosibel Woodward

Contributor address; City; State; Zip Code
1001 Pershing Dr. College Station, TX 77840

Amount of contribution (\$)

\$ 250

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/16/16

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

Paul and Ann Busch

Contributor address; City; State; Zip Code
9217 Riverstone Ct. College Station, TX 77845

Amount of contribution (\$)

\$ 500

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME *John P. Nichols*

3 Filer ID (Ethics Commission Filers)

4 Date
8/16/16

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

7 Amount of contribution (\$)
\$ 100.00

Nancy Schneider
6 Contributor address; City; State; Zip Code
405 Dexter College Station, TX 77840

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

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

Amount of contribution (\$)

8/16/16

Onie Holmes
Contributor address; City; State; Zip Code
616 Parker St. College Station, TX 77840

\$ 250

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

8/16/16

Don Hellriegel
Contributor address; City; State; Zip Code
1301 Wilshire Ct. College Station, TX 77840

\$ 500

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

8/16/16

Robert and Patricia Klein
Contributor address; City; State; Zip Code
9214 Brookwater Dr. College Station, TX 77845

\$ 100

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME *John P. Nichols*

3 Filer ID (Ethics Commission Filers)

4 Date
8/18/16

5 Full name of contributor out-of-state PAC (ID#: _____)
J.W (Sean) and Mike Mc Dermott
6 Contributor address; City; State; Zip Code
5850 Straub Rd. College Station, TX 77845

7 Amount of contribution (\$)
\$ 100

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

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

Amount of contribution (\$)

8/12/16

Ximing Wu and Yu Zhang
Contributor address; City; State; Zip Code
200 Maroon Pugh Dr. College Station, TX 77840 Apt. 803

\$ 250

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

8/18/16

Louis Hodges & Mini Hodges
Contributor address; City; State; Zip Code
1802 Medina Dr. College Station, TX 77840

\$ 100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

8/18/16

William and Claire Mies
Contributor address; City; State; Zip Code
1109 12th Man Circle College Station TX 77845

\$ 200

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

John P. Nichols

3 Filer ID (Ethics Commission Filers)

4 Date

8/17/16

5 Full name of contributor

out-of-state PAC (ID#: _____)

John and Mary Dinkel

6 Contributor address; City; State; Zip Code

1901 Shadowwood Dr. College Station, TX 77840

7 Amount of contribution (\$)

\$ 100

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

8/16/16

Full name of contributor

out-of-state PAC (ID#: _____)

John and Sherry Ellison

Contributor address; City; State; Zip Code

2405 Broadway Dr. College Station, TX 77845

Amount of contribution (\$)

\$ 100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/19/16

Full name of contributor

out-of-state PAC (ID#: _____)

Ken and Susan Livingston

Contributor address; City; State; Zip Code

1904 Bee Creek College Station, TX 77840

Amount of contribution (\$)

\$ 150

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/22/16

Full name of contributor

out-of-state PAC (ID#: _____)

Joe and Julie Schultz

Contributor address; City; State; Zip Code

3208 Innsbruck Ln. College Station, TX 77845

Amount of contribution (\$)

\$ 500

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

John P. Nichols

3 Filer ID (Ethics Commission Filers)

4 Date

8/18/16

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

Van and Pat Wilson

7 Amount of contribution (\$)

\$ 100

6 Contributor address; City; State; Zip Code
1502 Brittany Dr. College Station, TX 77845

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

8/30/16

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

J. Creighton and Elena Miller

Amount of contribution (\$)

\$ 100

Contributor address; City; State; Zip Code
1105 12th Mar Ln College Station, TX 77845

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/20/16

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

Sue Lee

Amount of contribution (\$)

\$ 200

Contributor address; City; State; Zip Code
6000 Augusta Cir. College Station, TX 77845

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/19/16

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

Neil and Virginia VanStavern

Amount of contribution (\$)

\$ 100

Contributor address; City; State; Zip Code
5101 Congress Ave. College Station, TX 77845

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

John P. Nichols

3 Filer ID (Ethics Commission Filers)

4 Date

8/30/16

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

Penrod and Ellen Thornton
 6 Contributor address; City; State; Zip Code
1113 Royal Adelaide College Station, TX 77845

7 Amount of contribution (\$)

\$ 200

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

8/19/16

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

Robert and Jessica Albanese
 Contributor address; City; State; Zip Code
9407 Scarborough College Station, TX 77845

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/16/16

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

Fred and Judy Smeins
 Contributor address; City; State; Zip Code
9233 Brookside Cir. College Station, TX 77845

Amount of contribution (\$)

\$ 100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/30/16

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

Albert and Isabel Schneider
 Contributor address; City; State; Zip Code
1401 Angelina Cir College Station, TX 77840

Amount of contribution (\$)

\$ 100

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

John P. Nichols

3 Filer ID (Ethics Commission Filers)

4 Date

8/19/16

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

Ronald and Darlene Kaiser

7 Amount of contribution (\$)

\$ 100

6 Contributor address; City; State; Zip Code
4601 Calomise Dr College Station, TX 77845

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

8/23/16

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

Ken and Linda Whitson

Amount of contribution (\$)

\$ 75

Contributor address; City; State; Zip Code
9211 Riewstone Ct College Station, TX 77845

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/22/16

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

Spiras Vellas

Amount of contribution (\$)

\$ 100

Contributor address; City; State; Zip Code
1315 Angelina Dr. College Station, TX 77840

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/19/16

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

Robert and Dorothy Anderson

Amount of contribution (\$)

\$ 100

Contributor address; City; State; Zip Code
1308 Scarborough Dr. College Station, TX 77845

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME *John P. Michal*

3 Filer ID (Ethics Commission Filers)

4 Date
6/23/16

5 Full name of contributor out-of-state PAC (ID#: _____)
Lt. Ret.) and Mrs. Randolph Hauer
6 Contributor address; City; State; Zip Code
905 Carmel Pl. College Station, TX 77845

7 Amount of contribution (\$)
100
250

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
6/22/16

Full name of contributor out-of-state PAC (ID#: _____)
Michael and Lenita Hoelscher
Contributor address; City; State; Zip Code
4400 Lerinsaw Ln. College Station, TX 77845

Amount of contribution (\$)
200

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
6/20/16

Full name of contributor out-of-state PAC (ID#: _____)
Bill and Peggy Lero
Contributor address; City; State; Zip Code
4401 Nottingham Dr. Bryan, TX 77802

Amount of contribution (\$)
250

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
6/22/16

Full name of contributor out-of-state PAC (ID#: _____)
Parr Reason III
Contributor address; City; State; Zip Code
2408 Faulkner College Station, TX 77845

Amount of contribution (\$)
100

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

John P. Nichols

3 Filer ID (Ethics Commission Filers)

4 Date

8/24/16

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

Hugh and Linda Stearns

7 Amount of contribution (\$)

\$ 100

6 Contributor address;

316 Suffolk College Station, TX 77840

City; State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

8/30/16

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

David Ernest and Cady Auckerman

Amount of contribution (\$)

1/3 100

Contributor address;

17749 Saddle Creek Dr. College Station, TX 77845

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/30/16

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

Kenny Mallard

Amount of contribution (\$)

\$ 100

Contributor address;

519 S. Rosemary Bryan, TX 77802

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/24/16

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

Larry and Helen Thurston

Amount of contribution (\$)

\$ 100

Contributor address;

4905 Afton Oaks Dr. College Station, TX 77845

City; State; Zip Code

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

John P. Nichols

3 Filer ID (Ethics Commission Filers)

4 Date

9/1/16

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

Paul and Lois Harms

6 Contributor address;

1313 Augustine

City; State; Zip Code

*College Station, TX
77840*

7 Amount of contribution (\$)

100

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

8/24/16

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

Michael Ashfield and Carol Barrett

Contributor address;

1201 Royal Adelaide

City; State; Zip Code

*College Station, TX
77845*

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/23/16

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

Kerry and Maryvonne Cooper

Contributor address;

9201 Waterford Dr

City; State; Zip Code

*College Station, TX
77845*

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/24/16

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

Paul Sheers

Contributor address;

9100 Waterford Dr

City; State; Zip Code

*College Station, TX
77845*

Amount of contribution (\$)

250

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

John P. Nichols

3 Filer ID (Ethics Commission Filers)

4 Date

8/16/16

5 Full name of contributor

out-of-state PAC (ID#: _____)

Dr. and Mrs. Bill Harris

6 Contributor address;

*1207 Mariners
Lane*

City; State; Zip Code

*College Station, TX
77845*

7 Amount of contribution (\$)

100

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

8/24/16

Full name of contributor

out-of-state PAC (ID#: _____)

Jeanette Pharris

Contributor address;

*9204 Stonebrook
Dr.*

City; State; Zip Code

*College Station, TX
77845*

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/24/16

Full name of contributor

out-of-state PAC (ID#: _____)

Gary and Sharon Crwin

Contributor address;

*4513 Amber Stone
Ct.*

City; State; Zip Code

*College Station, TX
77845*

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/25/16

Full name of contributor

out-of-state PAC (ID#: _____)

John and Donna Benson

Contributor address;

1903 Comal Dr.

City; State; Zip Code

*College Station, TX
77842*

Amount of contribution (\$)

100

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

John P. Nichols

3 Filer ID (Ethics Commission Filers)

4 Date

8/24/16

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

Frank and Frances Duchmasco

6 Contributor address; City; State; Zip Code
*1004 Woodhaver College Station, TX
 TX 77840*

7 Amount of contribution (\$)

\$ 100

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

8/24/16

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

Ben White

Contributor address; City; State; Zip Code
*4759 Stonebriar College Station, TX
 TX 77845*

Amount of contribution (\$)

\$ 100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/26/16

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

Tom and Linda Taylor

Contributor address; City; State; Zip Code
*413 Royal Adelaide College Station, TX
 TX 77845*

Amount of contribution (\$)

\$ 100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/25/16

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

Richard and Mary Edwards

Contributor address; City; State; Zip Code
*9308 Bloomfield College Station, TX
 TX 77845*

Amount of contribution (\$)

\$ 100

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

John P. Nichols

3 Filer ID (Ethics Commission Filers)

4 Date

8/31/16

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

Carl and Peggy Shaper
 6 Contributor address; City; State; Zip Code
204 Suffolk College Station, TX 77840

7 Amount of contribution (\$)

\$ 175

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

8/29/16

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

George Richardson
 Contributor address; City; State; Zip Code
4040 Sweetwater College Station, TX 77845

Amount of contribution (\$)

\$ 500

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/29/16

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

Palma
Mario and Monica Flores
 Contributor address; City; State; Zip Code
5210 Cascades Dr. College Station, TX 77845

Amount of contribution (\$)

\$ 100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/20/16

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

Mr. & Mrs. Poondi Varadarajan
 Contributor address; City; State; Zip Code
3012 Coronado Dr. College Station, TX 77845

Amount of contribution (\$)

\$ 100

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

John P. Nichols

3 Filer ID (Ethics Commission Filers)

4 Date

8/29/16

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

Ed and Allethaire Price

6 Contributor address; City; State; Zip Code
3021 Coronado Dr. College Station, TX 77845

7 Amount of contribution (\$)

\$ 500

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

8/30/16

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

Jim James

Contributor address; City; State; Zip Code
PO Box 1146 Bryan, TX 77806

Amount of contribution (\$)

\$ 150

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/1/16

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

Denise Bermudez

Contributor address; City; State; Zip Code
3307 Mapacho Dr. College Station, TX 77845

Amount of contribution (\$)

\$ 100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/31/16

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

Jack Culpepper

Contributor address; City; State; Zip Code
1700 George Bush Dr. E. Sta 240 College Station TX 7784

Amount of contribution (\$)

\$ 250

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

John P. Nichols

3 Filer ID (Ethics Commission Filers)

4 Date

9/4/16

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

Rod and Frances Martin

7 Amount of contribution (\$)

\$ 100

6 Contributor address; City; State; Zip Code
1204 Winding Rd. College Station, TX 77840

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

9/3/16

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

Ron and Sue Mirabelle

Amount of contribution (\$)

\$ 250

Contributor address; City; State; Zip Code
1855 Ridge Rd. Lewiston, NY 14092

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/20/16

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

Mark and Lucera Burris

Amount of contribution (\$)

\$ 100

Contributor address; City; State; Zip Code
2115 Chippendale College Station, TX 77845

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/31/16

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

Fay and Charlotte Gilbreath

Amount of contribution (\$)

\$ 250

Contributor address; City; State; Zip Code
4190 Stonewall College Station, TX 77845

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

John P. Nichols

3 Filer ID (Ethics Commission Filers)

4 Date

9/2/16

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

Oral and Delma Capps

6 Contributor address;

9409 Whitney Lane

City; State; Zip Code

College Station, TX 77845

7 Amount of contribution (\$)

\$ 500

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

9/4/16

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

Ralph and Gene Staplin

Contributor address;

3941 Robin Drive

City; State; Zip Code

College Station, TX 77845

Amount of contribution (\$)

\$ 250

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/6/16

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

J. Malon Southland

Contributor address;

1102 Deacon Dr.

City; State; Zip Code

College Station, TX 77845

Amount of contribution (\$)

\$ 100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/12/16

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

Stephen Nichols

Contributor address;

115 Toddy Hill Rd.

City; State; Zip Code

Sandy Hook, CT 06482

Amount of contribution (\$)

\$ 100

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

John P. Richard

3 Filer ID (Ethics Commission Filers)

4 Date

9/2/16

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

William and Victoria Salin

6 Contributor address;

3408 Mustang College Station, TX 77845

City; State; Zip Code

7 Amount of contribution (\$)

\$ 100

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

9/2/16

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

Kelly and Theresa Murphy

Contributor address;

1013 Francis Dr. College Station, TX 77840

City; State; Zip Code

Amount of contribution (\$)

\$ 100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/6/16

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

Franco Heifrin

Contributor address;

11580 Gold Nugget College Station, TX 77845

City; State; Zip Code

Amount of contribution (\$)

\$ 100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/17/16

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

Richard and Kay Floyd

Contributor address;

4304 Garret Court College Station, TX 77845

City; State; Zip Code

Amount of contribution (\$)

\$ 100

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

John P. Nichols

3 Filer ID (Ethics Commission Filers)

4 Date

9/7/16

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

Stephen and Mary Alice Brady

6 Contributor address; City; State; Zip Code
1101 Neal Pickett College Station, TX 77840

7 Amount of contribution (\$)

\$ 100

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

9/7/16

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

John and Janice Clark

Contributor address; City; State; Zip Code
504 Crescent Dr. Bryan, TX 77801

Amount of contribution (\$)

\$ 200

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/7/16

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

Mardell Servik

Contributor address; City; State; Zip Code
4800 Wayne Ct. College Station, TX 77845

Amount of contribution (\$)

\$ 100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/9/16

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

Mark Browning

Contributor address; City; State; Zip Code
3701 Lees Dr. McAllen, TX 78504

Amount of contribution (\$)

\$ 100

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

John P. Nichols

3 Filer ID (Ethics Commission Filers)

4 Date

9/13/16

5 Full name of contributor

out-of-state PAC (ID#: _____)

Phillip and Donna Garrett

6 Contributor address;

City; State; Zip Code

*2035 Oakwood College Station, TX
Trail 77845*

7 Amount of contribution (\$)

\$ 250

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

9/13/16

Full name of contributor

out-of-state PAC (ID#: _____)

G.M. and Kay McWhorter

Contributor address;

City; State; Zip Code

*2500 Faulkner College Station, TX
77845*

Amount of contribution (\$)

\$ 100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/14/16

Full name of contributor

out-of-state PAC (ID#: _____)

Michael and Kara Halmgreen

Contributor address;

City; State; Zip Code

*5518 Bellerive College Station
Bender Pr. TX 77845*

Amount of contribution (\$)

\$ 100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/19/16

Full name of contributor

out-of-state PAC (ID#: _____)

Charles and Terraine Hermann

Contributor address;

City; State; Zip Code

*1019 Murfield College Station, TX
Hillage 77845*

Amount of contribution (\$)

\$ 100

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

John P. Nichols

3 Filer ID (Ethics Commission Filers)

4 Date

9/12/16

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

Ward and Diane Wells

6 Contributor address; City; State; Zip Code
*1415 Harpers Ferry College Station, TX
 Rd. 77845*

7 Amount of contribution (\$)

\$ 100

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

9/13/16

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

Robert and Linda Whitson

Contributor address; City; State; Zip Code
*1301 Mission Hills College Station, TX
 Dr. 77845*

Amount of contribution (\$)

\$ 75

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/2/16

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

Michael and Melissa Gooley

Contributor address; City; State; Zip Code
*2007 Pebblestone College Station, TX
 Ct. 77845*

Amount of contribution (\$)

\$ 100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/15/16

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

W.A. Prewitt IV and Linda

Contributor address; City; State; Zip Code
*2302 Scotney College Station, TX
 Ct. 77845*

Amount of contribution (\$)

\$ 750

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

John P. Nichols

3 Filer ID (Ethics Commission Filers)

4 Date

9/12/16

5 Full name of contributor

Pierre and Carol Cantrell

6 Contributor address:

2908 Camille Dr.

City; State;

College Station, TX

Zip Code

77845

7 Amount of contribution (\$)

\$ 100

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

9/13/16

Full name of contributor

Ed and Donnell Elmore

Contributor address;

3501 Regal Row

City; State;

College Station, TX

Zip Code

77845

Amount of contribution (\$)

\$ 100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/16/16

Full name of contributor

Catherine Chalmer

Contributor address;

16907 Misty Creek

City; State;

Spring, TX

Zip Code

77349

Amount of contribution (\$)

\$ 250

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/13/16

Full name of contributor

David and Patricia Ellis

Contributor address;

6912 Driftwood Dr.

City; State;

College Station, TX

Zip Code

77845

Amount of contribution (\$)

\$ 250

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

John P. Nichols

3 Filer ID (Ethics Commission Filers)

4 Date

9/14/16

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

Clint Cooper

7 Amount of contribution (\$)

\$ 100

6 Contributor address; City; State; Zip Code

PO Box 9444 College Station, TX 77842

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

9/12/16

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

James Murr

Amount of contribution (\$)

250

Contributor address; City; State; Zip Code

4003 Muncaster Ln College Station TX 77845

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/24/16

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

Ronald Jones

Amount of contribution (\$)

50

Contributor address; City; State; Zip Code

310 University Drive East College Station, TX 77840

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/26/16

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

Mary Elizabeth Dresser

Amount of contribution (\$)

\$ 100

Contributor address; City; State; Zip Code

501 Fairview Ave College Station, TX 77840

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

John P. Nichols

3 Filer ID (Ethics Commission Filers)

4 Date

9/16/16

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

Judy Leunes

7 Amount of contribution (\$)

\$ 100

6 Contributor address; City; State; Zip Code

1356 South Oaks Rd. College Station, TX 77845

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

9/16/16

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

Arnold Leunes

Amount of contribution (\$)

\$ 100

Contributor address; City; State; Zip Code

1356 South Oaks Rd. College Station, TX 77845

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/17/16

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

Scott and Debra Shaffer

Amount of contribution (\$)

\$ 100

Contributor address; City; State; Zip Code

117 Pershing Ave. College Station, TX 77840

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/14/16

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

Mark Humphrey

Amount of contribution (\$)

\$ 250

Contributor address; City; State; Zip Code

5532 Straub Rd. College Station, TX 77845

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

John D. Nichols

3 Filer ID (Ethics Commission Filers)

4 Date

9/19/16

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

Haywood Robinson and Sharon Johnson
 6 Contributor address; City; State; Zip Code
1319 Angelene Circle College Station, TX 77840

7 Amount of contribution (\$)

\$ 100

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

9/20/16

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

Thomas and Sharon Aufkinbaugh
 Contributor address; City; State; Zip Code
1036 Edge Circle College Station, TX 77840

Amount of contribution (\$)

\$ 100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/19/16

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

Rand and Paris Watson
 Contributor address; City; State; Zip Code
1304 Angelene Circle College Station, TX 77840

Amount of contribution (\$)

\$ 100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/20/16

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

Rob and Lisa Hunziker
 Contributor address; City; State; Zip Code
5305 Quaker Ridge Court College Station, TX 77845

Amount of contribution (\$)

\$ 100

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

John P. Nichols

3 Filer ID (Ethics Commission Filers)

4 Date

9/23/16

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

Jeffery and Mary Mc Dougale
 6 Contributor address; City; State; Zip Code
704 Canterbury College Station, TX
Rd. 777845

7 Amount of contribution (\$)

\$ 200

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

9/15/16

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

David and Lois Marion
 Contributor address; City; State; Zip Code
10276 Rowling College Station, TX
Rd. 77845

Amount of contribution (\$)

\$ 100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/23/16

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

Dr. and Mrs. Graves Small Jr.
 Contributor address; City; State; Zip Code
1007 Huntington College Station, TX
Rd. 77845

Amount of contribution (\$)

\$ 100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/28

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

Mike and Pam Green
 Contributor address; City; State; Zip Code
824 Pine Valley College Station, TX
77845

Amount of contribution (\$)

\$ 100

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.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <u>1</u>	
2 FILER NAME <u>JOHN P. NICHOLS</u>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ <u>200.00</u>	
5 Date <u>9/25/16</u>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>@ Audience Media</u>	8 Amount of Contribution \$ <u>200.00</u>	9 In-kind contribution description <u>website</u>
7 Contributor address; City; State; Zip Code <u>702 Putter Dr. College Station TX 77845</u>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
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
			<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.			

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1	2 FILER NAME JOHN P. NICHOLS	3 Filer ID (Ethics Commission Filers)
---------------------------	-------------------------------------	---------------------------------------

4 Date <i>Sept. 25, 2016</i>	5 Payee name <i>@Audience Media</i>
---------------------------------	--

6 Amount (\$) <i>\$1000.00</i>	7 Payee address; City; State; Zip Code <i>1702 Putter Ct. College Station, TX 77845</i>
-----------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising - Website</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------------------	--	---

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date <i>Aug. 8, 2016</i>	Payee name <i>Office MAX</i>
-----------------------------	---------------------------------

Amount (\$) <i>74.67</i>	Payee address; City; State; Zip Code <i>1725 W Texas Ave. South, College Station, TX 77840</i>
-----------------------------	--

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Other - Envelopes</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date <i>Aug 10, 2016</i>	Payee name <i>Postmaster</i>
-----------------------------	---------------------------------

Amount (\$) <i>\$ 235.00</i>	Payee address; City; State; Zip Code <i>2130 Harvey Mitchell Pkwy S. College Station, TX 77840</i>
---------------------------------	---

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Other - Postage</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2 FILER NAME: *JOAN P. Nicholls* 3 Filer ID (Ethics Commission Filers):

4 Date: *Aug 25, 2016* 5 Payee name: *Postmaster*

6 Amount (\$): *47.00* 7 Payee address; City; State; Zip Code: *2300 Harvey Mitchell Pkwy S, College Station, TX 77840*

8 PURPOSE OF EXPENDITURE: (a) Category (See Categories listed at the top of this schedule): *Other - Stamps* (b) Description: Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

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

Date: *Sept. 22, 2016* Payee name: *Tractor Supply*

Amount (\$): *52.89* Payee address; City; State; Zip Code: *2704 Texas Ave. Ste 1, College Station, TX 77840*

PURPOSE OF EXPENDITURE: Category (See Categories listed at the top of this schedule): *Other - T-posts* Description: Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

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

Date: *Sept. 26, 2016* Payee name: *C.C. Creations*

Amount (\$): *4,790.06* Payee address; City; State; Zip Code: *1800 Skiloh Ave., Bryan, TX 77803*

PURPOSE OF EXPENDITURE: Category (See Categories listed at the top of this schedule): *Other - Signs and Advertising* Description: Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME <i>John F. Nichols</i>	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 Date <i>9/22/16</i>	6 Payee name <i>Bryan Broadcasting</i>	
7 Amount (\$) <i>645.</i>	8 Payee address; City; State; Zip Code <i>2700 Earl Rudder Ewy. S. Suite 5000 College Station, TX 77845</i>	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED