CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

The C/OH Instruction G	uide explains how to complete this form.	er ID (Ethics Commission Filers)	2 Total pages filed:	
3 CANDIDATE/	MS / MRS / MR FIRST		MI	OFFICE USE ONLY
OFFICEHOLDER NAME	Ms Mick i		L	
NAME	NICKNAME LAST		SUFFIX	Date Received
	Ball			20
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	500 900 (540000) 500	сіту; endorf	STATE; ZIP CODE TX 78112	RECEIVED JUL 1 6 201
Change of Address				MANA DO HE POLO
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (512) 922-9091		EXTENSION	Mate Hand-delivered or Date Postmarked
6 CAMPAIGN	MS / MRS / MR FIRST		MI	Receipt # Amount \$
TREASURER NAME	Ms Mick i		L	Date Processed
	NICKNAME LAST		SUFFIX	Date Imaged
	Ball			Date illiages
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / S	SUITE #;	CITY; STATE;	ZIP CODE
(Residence or Business)	23203 Hickory Shadow		Elm endorf TX	78112
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 922-9091		EXTENSION	
9 REPORT TYPE	January 15 30th day before		Runoff Exceeded \$500 limit	15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year 01 / 22 / 2018	ТНІ	Month 06	Day Year 30 / 2018
11 ELECTION	Month Day Year Primary 11 / 06 / 2018		Runoff Other Description Special	
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known	1)
			Mayor	
	GO TO) PAG	E 2	

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

14 C/OH NAME Mic	eki L. Ball	15	Filer ID (Ethics Commission Filers)	
16 NOTICE FROM POLITICAL COMMITTEE(S)	SUPPORT THE CANE	IOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES OF POLITICAL EXPENDITURES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INJURES.	UT THE CANDIDATE'S OR OFFICEHOLDER'S	
	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
	SPECIFIC	COMMITTEE ADDRESS		
		COMMITTEE CAMPAIGN TREASURER NAME		
Additional Pages				
		COMMITTEE CAMPAIGN TREASURER ADDRESS	2	
. 51				
17 CONTRIBUTION TOTALS	1. TOTAL PLEDG	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 190.00	
	2. TOTAL	POLITICAL CONTRIBUTIONS R THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 290.00	
EXPENDITURE TOTALS		POLITICAL EXPENDITURES OF \$100 OR LESS, SS ITEMIZED	\$ 0.00	
	4. TOTAL	POLITICAL EXPENDITURES	\$ 874.23	
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DA	\$ 0.00	
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE DAY OF THE REPORTING PERIOD	\$ 0.00	
Nota	TA ELAINE MARO iry Public, State of nm. Expires 06-15- lotary ID 1268936	Texas 2021 28		
AFFIX NOTARY STA		0	17	
Sworn to and subs	Sworn to and subscribed before me, by the said MCK(1.34LC , this the			
day of SOIV	Mug administering dath	to certify which, witness my hand and seal of office. WHAGE Printed name of officer administering oath	NOTARY Public Title of officer administering oath	

SUBTOTALS - C/OH

19 FILER NAME Micki L. Ball	20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 290.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. SCHEDULE E: LOANS	\$
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	ONTRIBUTIONS \$
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	CONTRIBUTIONS \$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FU	\$ 874.23
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO	A BUSINESS OF C/OH \$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL C	ONTRIBUTIONS \$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBU	TIONS \$

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Micki L. Ball 7 Amount of contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#:_ Mary Hull \$100.00 04-15-2018 City; State; Zip Code 6 Contributor address; Elm endorf, TX 78112 PO Box 163 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) out-of-state PAC (ID#:__ Full name of contributor Amount of contribution (\$) Date City; State; Zip Code Contributor address; Employer (See Instructions) Principal occupation / Job title (See Instructions) out-of-state PAC (ID#:_ Amount of contribution (\$) Full name of contributor Date City; State; Zip Code Contributor address; Employer (See Instructions) Principal occupation / Job title (See Instructions) Date Full name of contributor Amount of contribution (\$) out-of-state PAC (ID#:_ City; State; Zip Code Contributor address; Employer (See Instructions) Principal occupation / Job title (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 EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(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 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

C	Candidate/Officeholder/Politic credit Card Payment	The Instruction Guide explains how to	complete this form.
1	Total pages Schedule G:	2 FILER NAME Micki L. Ball	3 Filer ID (Ethics Commission Filers)
4	Date	5 Payee name	
	4/14/2018	Signs on The Cheap	
	Amount (\$) \$460.29 Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 11550 Stonehollow Drive, Suite 160, Austin,	TX 78758 (b) Description
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	
	OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9	Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
	expenditure to benefit C/C	Micki L. Ball	Mayor
	Date	Payee name	
	2/19/2018	Thompson Print & Mailing Solu	tions
	Amount (\$)	Payee address; City; State; Zip Code	
	\$41.14 Reimbursement from political contributions intended	5818 Rocky Point Dr., San Antonio, TX 782	
		Category (See Categories listed at the top of this schedule)	(b) Description
	PURPOSE OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/	Candidate / Officeholder name OH Micki L. Ball	Office sought Office held Mayor
r	Date	Payee name	
	4/18/18 - 6/21/18	The Home Depot	
	Amount (\$) \$75.22	Payee address; City; State; Zip Code 527 Fair Avenue, San Antonio, TX 78223	
	political contributions intended		
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit Co		Office sought Office held Mayor
		ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(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 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)

	Dandidate/Officeholder/Politic edit Card Payment	The Instruction Guide explains how to	complete this form.
1	Total pages Schedule G:	2 FILER NAME Micki L. Ball	3 Filer ID (Ethics Commission Filers)
	Date 06-14-2018	5 Payee name National Pen	
	Amount (\$) \$182.64 Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO Box 847203, Dallas, TX 75284-7203	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(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/C	Candidate / Officeholder name OH Micki L. Ball	Office sought Office held Mayor
	Date 04-06-2018	Payee name National Pen	
	Amount (\$) \$114.94 Reimbursement from political contributions intended	Payee address; City; State; Zip Code PO Box 847203, Dallas, TX 75284-7203	
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	(b) 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/		Office sought Office held Mayor
	Date	Payee name	
	Amount (\$) Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	(b) 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	t Candidate / Officeholder name /OH	Office sought Office held
		ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

The C/OH Instruction G	uide explains how to complete this form.	Filer ID (Ethics Commission Filers)	2 Total pages filed:	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MS Micki NICKNAME LAST Ball	MI Lsuffix	OFFICE USE ONLY Date Received PECEIVED	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address 5 CANDIDATE /		endorf TX 78112	State of Texas City of Sandy Oaks Est 2014	
OFFICEHOLDER PHONE 6 CAMPAIGN TREASURER NAME	(512) 922-9091 MS / MRS / MR FIRST MS Micki	мі L	Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed	
	NICKNAME LAST Ball	SUFFIX	Date Imaged 10/9/18	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / S 23203 Hickory Shadow	Elmendorf TX	78112	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 922-9091	EXTENSION		
9 REPORT TYPE	January 15 July 15 Sth day before el		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month Day Year 07 / 01 / 2018	THROUGH 10 /	Day Year 707 / 2018	
11 ELECTION	Month Day Year Primary 11 06 2018 General	Description		
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known Mayor)	
GO TO PAGE 2				

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT



14 C/OH NAME Mic	cki Ball	15 File	er 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	
	GENERAL		20
	SPECIFIC	COMMITTEE ADDRESS	v 1s
	3FEOIFIO		9
		COMMITTEE CAMPAIGN TREASURER NAME	
Additional Pages			
	2	COMMITTEE CAMPAIGN TREASURER ADDRESS	
			a
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 139.00
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 139.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 0.00		\$ 0.00
	4. TOTAL	POLITICAL EXPENDITURES	\$ 74.00
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY PORTING PERIOD	\$ 0.00
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD	\$ 0.00
18 AFFIDAVIT	<u> </u>		
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. Notary Public, State of Texas Comm. Expires 06-15-2021 Notary ID 126893628 Signature of Candidate or Officeholder			
AFFIX NOTARY STAMP / SEALABOVE			
Sworn to and subscribed before me, by the said MICKI LBALC, this the day of OCTOOK, 2018, to certify which, witness my hand and seal of office.			
Signature of officer a	e Mugue administering ath	Leta E. MAKQUEZ No. Printed name of officer administrating oath	OHARY Public Title of officer administering oath

SUBTOTALS - C/OH



19	FILER NAME Micki Ball 20 Filer ID (Et	hics Commission Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	. SCHEDULE E: LOANS	\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 74.00
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTION	ıs \$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF	С/ОН \$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$
		- Marchael Colonia Col

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS



SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

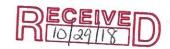
Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense Fees Food/Beverage Expense 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 (Parkers extension) and lighted charge)

Candidate/Officeholder/Politic Credit Card Payment	cal Committee Legal Services Salaries The Instruction Guide explains how to		Other (enter a category not listed above)
1 Total pages Schedule G:	2 FILER NAME Micki Ball	3	Filer ID (Ethics Commission Filers)
4 Date 9/6/2018	5 Payee name SurveyMonkey		
6 Amount (\$) \$37.00 Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code One Curiosity Way, San Mateo, CA 94403		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		Texas. Complete Schedule T. Ifficeholder living expense
9 Complete ONLY if direct expenditure to benefit C/	Candidate / Officeholder name OH Micki Ball	Office sought Mayor	Office held
Date 10/6/2018 Amount (\$)	Payee name SurveyMonkey Payee address; City; State; Zip Code		
\$37.00 Reimbursement from political contributions intended	One Curiosity Way, San Mateo, CA 94403		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Texas. Complete Schedule T. fficeholder living expense
Complete ONLY if direct expenditure to benefit C/	Candidate / Officeholder name OH Micki Ball	Office sought Mayor	Office held
Date	Payee name		
Amount (\$) Reimbursement from political contributions intended	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Texas. Complete Schedule T. fficeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/		Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

CANDIDATE / OFFICEHOLDER FORM C/OH CAMPAIGN FINANCE REPORT COVER SHEET PG 1

		1 Filer ID (Ethics Commission Filers)	2 Tatal annua filodi
The C/OH Instruction G	Guide explains how to complete this form.	Frier ID (Ethics Commission Filers)	2 Total pages filed: 4
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MS. Micki NICKNAME LAST	MI L SUFFIX	OFFICE USE ONLY Date Received
	Ball	191	10/29/18 U
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #: PO Box 163 El	city; STATE; ZIP CODE mendorf, TX 78112	State of Texas City of Sandy Oaks Est 2014
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (512) 922-9091	EXTENSION	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER	MS / MRS / MR FIRST	MI	Receipt # Amount \$
NAME	Ms. Micki	SUFFIX	Date Processed
	Ball		Date Imaged
ADDRESS (Residence or Business) 8 CAMPAIGN TREASURER PHONE	23203 Hickory Shadow, Elr AREA CODE PHONE NUMBER (512) 922-9091	mendorf, TX 78112	
9 REPORT TYPE	January 15 30lh day before		15th day after campaign treasurer appointment (Officeholder Only)
	July 15 X 8th day before el	fection Exceeded \$500 limit	Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year 10 / 08 / 2018	THROUGH 10/	Day Year / 27 / 2018
11 ELECTION	Month Day Year Primary 11 / 06 / 2018 General	Description	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)
		Mayor	
	GO TO	PAGE 2	



CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

State of Texas City of Sandy Oaks Est 2014

14 C/OH NAME Micki L	. Ball	1	5 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.			'E'S OR OFFICEHOLDER'S
	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
	SPECIFIC	COMMITTEE ADDRESS		
Additional Dance		COMMITTEE CAMPAIGN TREASURER NAME		
Additional Pages		COMMITTEE CAMPAIGN TREASURER ADDRESS		
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THA S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ		49.00
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	49.00
EXPENDITURE TOTALS		TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		0
	4. TOTAL	POLITICAL EXPENDITURES	\$	495.49
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST ORTING PERIOD	DAY \$	0
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T AY OF THE REPORTING PERIOD	HE \$	0
Notar	A ELAINE MARQU y Public, State of T m, Expires 06-16-2 othry ID 12889362	021 Minds	rmation required to	o be reported by me
		Micki L. Ball		29th
Sworn to and subscr day of October	20 18 ,1 R. Mai	Go certify which, witness my hand and seal of office. GOOD LEFAE, MARGUEZ	$\sqrt{0+A}$	eg Public
Signature of officer a	aministering oath ((PyInted name of officer administer(n) oath	THE OF OTHER	er administering oath



SUBTOTALS - C/OH

State of Texas City of Sandy Oaks Est 2014

FORM C/OH

19	FILER NAME 20 Filer ID (Ethics Comm					
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT				
1,	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$				
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$				
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$				
4,	SCHEDULE E: LOANS	\$				
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$				
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$				
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$				
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$				
9.	X SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 495.49				
10,	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$				
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$				
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$				



POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

State of Texas
City of Sandy Oaks SCHEDULE G
Est 2014

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Accounting/Banking Transportation Equipment & Related Expense Consulting Expense Food/Beverage Expense Polling Expense Travel In District Contributions/Donations Made By Gift/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor Travel Out Of District Candidate/Officeholder/Political Committee Legal Services Other (enter a category not listed above) Credit Card Payment The instruction Guide explains how to complete this form. Total pages Schedule G: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Micki L. Ball 4 Date 5 Payee name 10/26/2018 Thompson Print & Mailing Solutions 6 Amount (\$) 7 Payee address; City; State; Zip Code 296.50 5818 Rocky Point Dr., San Antonio, TX 78249 | | Relmbursement from political contributions intended 8 (a) Category (See Categories listed at the top of this schedule) (b) Description **PURPOSE** Check if Iravel outside of Texas. Complete Schedule T. OF EXPENDITURE Advertising Expense - Printing Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Micki L. Ball Mayor N/A 10/26/2018 Thompson Print & Mailing Solutions Payee address; Amount (\$) City; State; Zip Code 198.99 5818 Rocky Point Dr., San Antonio, TX 78249 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) (b) Description PURPOSE Check if travel outside of Texas. Complete Schedule T. Advertising Expense - Postage EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Micki L. Ball N/A Mayor Date Payee name Amount (\$) Payee address; City; State; Zip Code Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) (b) Description PURPOSE Check if travel outside of Texas. Complete Schedule T. OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED