

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed: <div style="text-align: right; font-size: 2em;">4</div>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / <input checked="" type="radio"/> MR FIRST MI NICKNAME LAST SUFFIX <div style="text-align: center; font-size: 1.5em;">Leroy Vaughn Jr.</div>	<div style="border: 1px solid black; padding: 5px;"> OFFICE USE ONLY Date Received <div style="text-align: center; border: 1px solid black; padding: 2px;"> RECEIVED JAN 15 2014 LEWISVILLE </div> Date Hand-delivered or Postmarked Receipt # Amount Date Processed Date Imaged </div>	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX; APT / SUITE #; CITY STATE; ZIP CODE <div style="text-align: center; font-size: 1.2em;">1101 Hillwood Dr Lewisville TX 75067</div>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <div style="text-align: center; font-size: 1.2em;">(214) 918-1902</div>		
6 CAMPAIGN TREASURER NAME	MS / MRS / <input checked="" type="radio"/> MR FIRST MI NICKNAME LAST SUFFIX <div style="text-align: center; font-size: 1.5em;">Leroy Vaughn Jr.</div>		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY STATE; ZIP CODE <div style="text-align: center; font-size: 1.2em;">1101 Hillwood Dr. Lewisville TX 75067</div>		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <div style="text-align: center; font-size: 1.2em;">(214) 918-1902</div>		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input 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 <div style="text-align: center; font-size: 1.2em;">07 / 02 / 2013 THROUGH 12 / 31 / 2013</div>		
11 ELECTION	ELECTION DATE Month Day Year <div style="text-align: center; font-size: 1.2em;">06 / 18 / 2011</div>	ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) <div style="text-align: center; font-size: 1.2em;">City Councilman Flace 1</div>	13 OFFICE SOUGHT (if known)	

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 G: <i>1</i>	2 FILER NAME <i>Leroy Vaughn Jr</i>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <i>9/11/13</i>	5 Payee name <i>Dynasty Computer Repair</i>	
6 Amount (\$) <i>10.00</i> <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City State; Zip Code <i>3321 Royal Crest Dr Fortworth, TX 76140</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>office overhead</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>Computer Repair</i>
Date <i>10/11/13</i>	Payee name <i>Dynasty Computer Repair</i>	
Amount (\$) <i>50.00</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City State; Zip Code <i>3321 Royal Crest Dr Fortworth TX 76140</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>office overhead</i>	Description (If travel outside of Texas, complete Schedule T) <i>Computer Service</i>
Date <i>12/15/13</i>	Payee name <i>Hallmark Creations</i>	
Amount (\$) <i>19.42</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City State; Zip Code <i>Stemmons Lewisville, TX</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>memorial expense</i>	Description (If travel outside of Texas, complete Schedule T) <i>Christmas Cards</i>
Date <i>12/15/13</i>	Payee name <i>US Postal Service</i>	
Amount (\$) <i>10.75</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City State; Zip Code <i>Charles ST Lewisville, TX 75057</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>memorial expense</i>	Description (If travel outside of Texas, complete Schedule T) <i>stamps</i>

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 <i>1</i>	2 FILER NAME <i>Leroy Vaughn Jr.</i>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <i>09/13/2013</i>	5 Payee name <i>Denton Democratic Club</i>
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6 Amount (\$) <i>25.00</i>	7 Payee address; City: State; Zip Code <i>P.O Box 1165 Denton, TX 76202-1165</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Fundraiser</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>Donkey Fest</i>
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>12/30/13</i>	Payee name <i>Leroy Vaughn Jr</i>
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Amount (\$) <i>90.17</i>	Payee address; City: State; Zip Code <i>1101 Hillwood Dr Lewisville, TX 75067</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Reimbursement</i>	Description (If travel outside of Texas, complete Schedule T) <i>Various expenses</i>
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City: State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City: State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete <u>ONLY</u> 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

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

14 C/OH NAME Leroy Vaughn Jr. **15 ACCOUNT #** (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

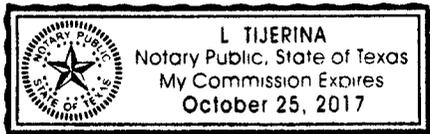
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> additional pages	COMMITTEE TYPE	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	\$
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$
EXPENDITURE TOTALS	3	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4.	TOTAL POLITICAL EXPENDITURES	\$ 115 17
CONTRIBUTION BALANCE	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 2750.42
OUTSTANDING LOAN TOTALS	6	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

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 Lero Vaughn, this the 15th day of January, 20 14, to certify which witness my hand and seal of office.

[Handwritten Signature] L. Tijerina notary
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath