Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

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: 8

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt # | Amount

Date Processed

Date imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR (MR) FIRST: Rick MI: A

NICKNAME LAST: Brown SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ Change of Address

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

13510 Country Ln
Tomball, TX 77375

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE (281) PHONE NUMBER 686-0412 EXTENSION

6 CAMPAIGN TREASURER NAME

MS / MRS / MR (MRS) FIRST: Karen MI: R

NICKNAME LAST: Brown SUFFIX

7 CAMPAIGN TREASURER ADDRESS (Residence or business)

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

13510 Country Ln Tomball, TX 77375

8 CAMPAIGN TREASURER PHONE

AREA CODE (713) PHONE NUMBER 501-6282 EXTENSION

9 REPORT TYPE

☐ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only)

☐ July 15 ☒ 8th day before election ☐ Exceeded $500 limit ☐ Final report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year: 4 / 1 / 10 THROUGH Month Day Year: 4 / 28 / 10

11 ELECTION

ELECTION DATE Month Day Year: 5 / 8 / 10

ELECTION TYPE: ☐ Primary ☐ Runoff ☒ General ☐ Special

12 OFFICE

OFFICE HELD (if any): None

13 OFFICE SOUGHT (if known): City Council Pos. # 3

14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS

•• Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ••

Name: None

Address / PO Box; Apt. / Suite #; City; State; Zip Code

☐ additional pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

15 C/OH NAME: Rick A. Brown

16 ACCOUNT # (Ethics Commission Filers):

17 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

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

18 CONTRIBUTION TOTALS

1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ 236.00
2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) * does not include "in kind" contribution	$ 3056.00

EXPENDITURE TOTALS

3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ -0-
4.	**TOTAL POLITICAL EXPENDITURES**	$ 2363.70

CONTRIBUTION BALANCE

5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD * includes $228.45 balance left on previous report	$ 920.75

OUTSTANDING LOAN TOTALS

6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ -0-

19 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.

Rick A. Brown

Signature of Candidate or Officeholder

DORIS J. SPEER
Notary Public, State of Texas
My Commission Expires
June 22, 2012

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Rick A. Brown, this the 30th day of April, 2010, to certify which, witness my hand and seal of office.

Doris Speer	Doris J Speer	City Secretary
Signature of officer administering oath	Printed name of officer administering oath	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: 3

2 FILER NAME: Rick A. Brown

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4-10-10	J. Mottershaw M. Dermaux 2531 S. Cherry St Tomball, TX 77375	200.00	

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4-18-10	Klint + Laura Warner P.O. Box 1888 Tomball, TX 77377	100.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4-11-10	Pat Bailey 1319 Dove Trl. Tomball, TX 77375	100.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4-11-10	James McKinney 1306 Dove Trails Tomball, TX 77375	100.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4-18-10	Doug + Rilene Cobb 9203 Rolling Oaks Dr. Tomball, TX 77375	100.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

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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 Rick A. Brown

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4-18-10	Brian + Lyn Farrell 20411 Angeli Rd. Tomball, TX 77377	100.00	(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4-11-10	Robin + Brady Dugas 18525 Horseshoe Trl. Magnolia, TX 77355	20.00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4-17-10	Robin + Brady Dugas 18525 Horseshoe Trl. Magnolia, TX 77355	50.00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4-18-10	John + Stefanni Lynch 14219 Carneswood Dr. Tomball, TX 77375	50.00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4-10-10	Steve + Patsy Vaughan 13322 Wildwood Tomball, TX 77375	500.00	Crawfish party (If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired Banker	

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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: Rick A. Brown

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4-11-10	Gretchen Fagan 1314 Pine Brook Tomball, TX 77375	75.00	hot dogs - 100 buns - 60

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4-27-10	Ron Morgan 7616 Waldeck Cemetary Rd. Round Top TX 78954	1,000.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired owners	Westone

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4-27-10	Mickey Morgan 7616 Waldeck Cemetary Rd Round Top TX 78954	1,000.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired Owner	Westone

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

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

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 3

2 FILER NAME: Rick A. Brown

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
3/30/10	Klein's Super Market 1200 W. Main Tomball, TX 77375	90.67

8 Purpose of payment (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	9 •• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name / Office sought / Office held
M+M's candy	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/7/10	Kwik Kopy Printing #555 1215-5 W. Main St. Tomball, TX 77375	14.42

Purpose of payment (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name / Office sought / Office held
printing	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/8/10	Tomball USPS 122 N. Holderrieth Tomball, TX 77375	35.00

Purpose of payment (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name / Office sought / Office held
postage	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/12/10	Kwik Kopy Printing #555 1215-5 W. Main Tomball, TX 77375	12.13

Purpose of payment (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name / Office sought / Office held
printing	

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POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME: Rick A. Brown

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
4/16/10	Kroger 14060 FM 2920 Tomball, TX 77375	12 78

8 Purpose of payment (See instructions regarding type of information required.): Cookies

(If travel outside of Texas, complete Schedule T)

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/1/10	Tribune 517 W. Main St. Tomball, TX 77375	37 00

Purpose of payment (See instructions regarding type of information required.): ad

(If travel outside of Texas, complete Schedule T)

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/8/10	Tribune 517 W. Main St. Tomball, TX 77375	357 50

Purpose of payment (See instructions regarding type of information required.): ad

(If travel outside of Texas, complete Schedule T)

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/13/10	Tribune 517 W. Main St. Tomball, TX 77375	357 50

Purpose of payment (See instructions regarding type of information required.): ad

(If travel outside of Texas, complete Schedule T)

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name | Office sought | Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME: Rick A. Brown

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
4/8/10	Tribune 517 W. Main St. Tomball, TX 77375	1,205.50

8 Purpose of payment (See instructions regarding type of information required.): ad

(If travel outside of Texas, complete Schedule T)

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/21/10	Tomball Potpourri P.O. Box 256 Tomball, TX 77377	193.20

Purpose of payment (See instructions regarding type of information required.): ad

(If travel outside of Texas, complete Schedule T)

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/26/10	Applebee's 27727 Tomball Pkwy Tomball, TX 77375	48.00

Purpose of payment (See instructions regarding type of information required.): CAMPAIGN PLANNING SESSION

(If travel outside of Texas, complete Schedule T)

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)

Purpose of payment (See instructions regarding type of information required.)

(If travel outside of Texas, complete Schedule T)

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name | Office sought | Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED