

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**
2 of 15

13 C / OH NAME Hobbs, Doyle E. (Dee) **14 Filer ID**

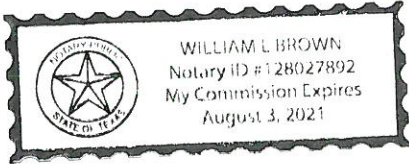
15 NOTICE FROM POLITICAL COMMITTEE(S)
 Additional Pages

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	COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> SPECIFIC		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	10,760.68
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	8,550.13
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	9,944.76
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	7,200.00

17 AFFADAVIT



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.

Doyle E. Hobbs Jr
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Doyle "Dee" Hobbs Jr, this the 2nd day of October, 2020, to certify which, witness my hand and seal of office.

William L. Brown William L. Brown Notary
 Signature of officer administering Printed name of officer administering Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Hobbs, Doyle E. (Dee)	19 Filer ID
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20 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1. <input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 10,760.68
2. <input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. <input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input checked="" type="checkbox"/>	SCHEDULE E: LOANS	\$ 2,200.00
5. <input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 4,880.12
6. <input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. <input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. <input checked="" type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 3,670.01
10. <input type="checkbox"/>	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES 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: Sch: 1/8 Rpt: 4/15
2 FILER NAME Hobbs, Doyle E. (Dee)		3 Filer ID
4 Date 08/01/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ackerman, MacKenzie	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code 707 CR 134 Hutto, TX 78634		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/26/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ackerman, Major	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 707 CR 134 Hutto, TX 78634		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ackerman, Major	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 707 CR 134 Hutto, TX 78634		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ackerman, Maren	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code 307 Morningside Cir Hutto, TX 78634		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Bill	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 707 CR 134 Hutto, TX 78634		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/8 Rpt: 5/15
2 FILER NAME Hobbs, Doyle E. (Dee)		3 Filer ID
4 Date 08/08/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Dalton	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code 701 CR 134 Hutto, TX 78634		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Stormi	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 707 CR 134 Hutto, TX 78634		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cevenka, Charlie	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code 1008 Kent Taylor, TX 76574		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chody, Robert	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code 10500 Avery Club Drive Austin, TX 78717		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Correa, Pete	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 1003 Farm Creek Cv Hutto, TX 78634		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/8 Rpt: 6/15
2 FILER NAME Hobbs, Doyle E. (Dee)		3 Filer ID
4 Date 08/01/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawley, Linda	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code 200 Spring Grove Drive Liberty Hill, TX 78642		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crossett, Scott	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 16407 Jackson Street Leander, TX 78641		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruz, Jason	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code 605 Winterfield Dr. Hutto, TX 78634		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Etheridge, Michael & Ashley	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code 512 Speed Horse Liberty Hill, TX 78642		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fellows, Rosemary	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code PO Box 130 Taylor, TX 76574		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/8 Rpt: 7/15
2 FILER NAME Hobbs, Doyle E. (Dee)		3 Filer ID
4 Date 08/01/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fikac, Roy	7 Amount of Contribution (\$) \$680.68
6 Contributor address; City; State; Zip Code 1910 Ireland Dr. Leander, TX 78641		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finke, Dennis & Helen	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 1102 Winding Creek Place Round Rock, TX 78665		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/04/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flowers, Seth	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 4531 Wandering Vine Tr Round Rock, TX 78665		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Loyd	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 2206 Hayfield Sq Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holcomb, Corby	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 199 Wild Plum Way Austin, TX 78737		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/8 Rpt: 8/15
2 FILER NAME Hobbs, Doyle E. (Dee)		3 Filer ID
4 Date 08/02/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Issa, Michel	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 705 West 24th Street Austin, TX 78705		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/03/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ledesma, Edward	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 425 Bold Sundown Liberty Hill, TX 78642		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, John	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 3839 Bee Caves Rd Ste 204 Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nassour, Jason	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code 1993 Port Royal Dr. Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nichols, Randy	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 1209 Bootys Crossing Georgetown, TX 78628		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/8 Rpt: 9/15
2 FILER NAME Hobbs, Doyle E. (Dee)		3 Filer ID
4 Date 08/17/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Michael	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code 4324 Hannover Way Round Rock, TX 78681		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Retkofsky, Jared	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 1028 Clove Hitch Dr. Georgetown, TX 78633		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schaubhut, Lawrence	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 3839 Bee Cave Rd Ste 100 Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, David	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 2102 Mildred Dr. Taylor, TX 76574		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Jessica	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 2102 Mildred Dr. Taylor, TX 76574		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/8 Rpt: 10/15
2 FILER NAME Hobbs, Doyle E. (Dee)		3 Filer ID
4 Date 08/21/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Jessica & David	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code 2102 Mildred Lane Taylor, TX 76574	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shires, Derek	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code PO Box 49 Walburg, TX 78673	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soliz, Jesse & Sharen	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code 243 Lower Elgin Rd Elgin, TX 78621	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/04/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sun City Republican Club	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 1530 Sun City Blvd Georgetown, TX 78633	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutton, Alice	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 1908 Oak Vista Dr. Pflugerville, TX 78660	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/8 Rpt: 11/15
2 FILER NAME Hobbs, Doyle E. (Dee)		3 Filer ID
4 Date 08/01/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Szendrey, Barbara	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code 4500 Williams Dr. Ste 212 Georgetown, TX 78633		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/29/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Linda	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 6140 Pleasant Dream St. North Richland Hills, TX 76180		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vasquez, Peggy	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 212 Mesa Drive Georgetown, TX 78628		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/03/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Mark	Amount of Contribution (\$) \$300.00
Contributor address; City; State; Zip Code 309 Grand Oaks Ln Georgetown, TX 78628		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

LOANS**SCHEDULE E**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 12/15
2 FILER NAME Hobbs, Doyle E. (Dee)		3 Filer ID
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan 08/10/2020	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobbs, Doyle "Dee"	9 Loan Amount (\$) \$2,200.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 707 CR 134 Hutto, TX 78634	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/2 Rpt: 13/15	2 FILER NAME Hobbs, Doyle E. (Dee)	3 Filer ID
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4 Date 09/24/2020	5 Payee name Anedot Inc.
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6 Amount (\$) \$304.03	7 Payee address; City; State; Zip Code 1340 Poydras St. Suite 1770 New Orleans, LA 70112
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Fees
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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 08/20/2020	Payee name Georgetown Advovacte
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Amount (\$) \$1,100.00	Payee address; City; State; Zip Code PO Box 213 Jarrell, TX 76537
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Ad
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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 09/18/2020	Payee name Georgetown Advovacte
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Amount (\$) \$1,100.00	Payee address; City; State; Zip Code PO Box 213 Jarrell, TX 76537
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Ad
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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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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/2 Rpt: 14/15	2 FILER NAME Hobbs, Doyle E. (Dee	3 Filer ID
4 Date 08/12/2020	5 Payee name Super Cheap Signs	
6 Amount (\$) \$2,376.09	7 Payee address; City; State; Zip Code 9200 Waterford Centre #100 Austin, TX 78758	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard Signs
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name _____ Office sought _____ Office held _____		

POLITICAL EXPENDITURES 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 (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/1 Rpt: 15/15	2 FILER NAME Hobbs, Doyle E. (Dee)	3 Filer ID
4 Date 08/12/2020	5 Payee name Amazon	
6 Amount (\$) \$23.80 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO Box 1234 Seattle, WA 98101	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Thank you notes	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/12/2020	Payee name H.E.B.	
Amount (\$) \$22.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 500 Gattis School Rd Hutto, TX 78634	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Postage	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/08/2020	Payee name Super Cheap Signs	
Amount (\$) \$3,624.21 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 9200 Waterford Centre #100 Austin, TX 78758	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Signs
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held