

**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	2 Total pages filed: 13
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST <i>Sandra</i>	MI
	NICKNAME	LAST <i>Blankenship</i>	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE
	4906 Velma Dr		
	Killeen, TX 76542		
	OFFICE USE ONLY		
			Date Received <i>4/26/2019</i>
			<i>Ch. Aldrich</i>
			Date Hand-delivered or Date Postmarked
		Receipt #	Amount
			Date Processed
			Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST <i>Joan</i>	MI
	NICKNAME	LAST <i>Hinshaw</i>	SUFFIX
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
	<i>287 Wayne Dr. Nolanville, TX 76559</i>		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
		<i>(254) 681-0871</i>	
8 REPORT TYPE	<input 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 checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month	Day	Year
	03/26/2019	THROUGH	04/24/2019
10 ELECTION	ELECTION DATE		ELECTION TYPE
	Month	Day	Year
	05/04/2019		<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special      Uniform
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)
	None		

**GO TO PAGE 2**

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

**FORM C/OH  
COVER SHEET PG 2**  
2 of 13

13 C / OH NAME

Sandra Blankenship 14 Filer ID

15 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.

Additional Pages

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

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 \$ 598.04

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 2,858.81

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 5.00

4. TOTAL POLITICAL EXPENDITURES \$ 2,684.46

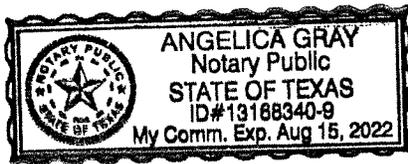
CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 1,262.37

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 1,000.00

17 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.

Sandra Blankenship  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sandra Blankenship, this the 26th day of April, 2019, to certify which, witness my hand and seal of office.

Angelica Gray  
Signature of officer administering

Angelica Gray  
Printed name of officer administering

Financial Service Associate  
Title of officer administering oath

**SUBTOTALS - C/OH**

<b>18 FILER NAME</b> ... <i>Sandra Blankenship</i>	<b>19 Filer ID</b>
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<b>20 SCHEDULE SUBTOTALS</b>		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,858.27
2. <input checked="" type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.54
3. <input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input type="checkbox"/>	SCHEDULE E: LOANS	\$
5. <input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 2,684.46
6. <input checked="" type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
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 type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
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

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 1/5 Rpt: 4/13
2 FILER NAME <div style="text-align: center; font-size: 1.2em; font-family: cursive;">Sandra Blankenship</div>		3 Filer ID
4 Date 04/17/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arsenault, Raymond (Mr.)	7 Amount of Contribution (\$) \$52.95
6 Contributor address; City; State; Zip Code 5251 Oak Haven Lane #4  Belton, TX 76513		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 04/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brent, Rachel	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1802 Sandstone  Killeen, TX 76549		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 04/04/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broussard, Randy (Mr.)	Amount of Contribution (\$) \$105.58
Contributor address; City; State; Zip Code 5251 Oak Haven Lane #4  Belton, TX 76513		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 04/20/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broussard, Randy (Mr.)	Amount of Contribution (\$) \$105.58
Contributor address; City; State; Zip Code 5251 Oak Haven Lane #4  Belton, TX 76513		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 04/02/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Driver, John (Mr.)	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 4000 Ambrose Drive  Killeen, TX 76549		
Principal occupation / Job title (See Instructions) County Commissioner		Employer (See Instructions) Bell County

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 2/5 Rpt: 5/13
2 FILER NAME <i>Sandra Blankenship</i>		3 Filer ID
4 Date 04/23/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eneli, Ayayl  6 Contributor address; City; State; Zip Code 4203 Elf Trail  Belton, TX 76513	7 Amount of Contribution (\$)  \$105.58
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions) Kaneli International Inc.
Date 04/04/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geer, Mary (Ms.)  Contributor address; City; State; Zip Code 5280 Shay Lake Rd.  Kingston, MI 48741	Amount of Contribution (\$)  \$52.95
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinshaw, Joan (Ms.)  Contributor address; City; State; Zip Code 287 Wayne Dr.  Nolanville, TX 76559-4518	Amount of Contribution (\$)  \$105.58
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/04/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Konkel, Theodore (Mr.)  Contributor address; City; State; Zip Code 5280 Shay Lake Rd.  Kingston, MI 48741	Amount of Contribution (\$)  \$105.58
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/17/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Konkel, Theodore (Mr.)  Contributor address; City; State; Zip Code 5280 Shay Lake Rd.  Kingston, MI 48741	Amount of Contribution (\$)  \$105.58
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 3/5 Rpt: 6/13
2 FILER NAME <div style="font-size: 1.5em; font-family: cursive; text-align: center;">Sandra Blankenship</div>		3 Filer ID
4 Date 04/06/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Michael (Mr.)	7 Amount of Contribution (\$) \$263.47
6 Contributor address; City; State; Zip Code 3018 S. 1st St., Apt. 117  Austin, TX 78704		
8 Principal occupation / Job title (See Instructions) Account Executive		9 Employer (See Instructions) Dialpad
Date 04/24/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Michael (Mr.)	Amount of Contribution (\$) \$52.95
Contributor address; City; State; Zip Code 3018 S. 1st St., Apt. 117  Austin, TX 78704		
Principal occupation / Job title (See Instructions) Account Executive		Employer (See Instructions) Dialpad
Date 04/17/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luster, laurie	Amount of Contribution (\$) \$52.95
Contributor address; City; State; Zip Code 801 Schrader  Killeen, TX 76542		
Principal occupation / Job title (See Instructions) Accounting/Marketing Mgr.		Employer (See Instructions) Killeen Overhead Door
Date 03/29/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minor Jr., Louie (Mr.)	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 2118 W. US Hwy. 190  Belton, TX 76513		
Principal occupation / Job title (See Instructions) General Contractor		Employer (See Instructions) Louis Minor Construction LLC
Date 04/08/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphey Jr., Samuel L. (Mr.)	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 806 Cedar Oaks Lane  Harker Heights, TX 76548		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/5 Rpt: 7/13
<b>2</b> FILER NAME <i>Sandra Blankenship</i>		<b>3</b> Filer ID
<b>4</b> Date 04/04/2019	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oliver, Julie  <b>6</b> Contributor address; City; State; Zip Code 115C Nellie St.  Austin, TX 78704	<b>7</b> Amount of Contribution (\$)  \$52.95
<b>8</b> Principal occupation / Job title (See Instructions) VP of Finance		<b>9</b> Employer (See Instructions) Notley Ventures
Date 04/12/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perri, Chris  Contributor address; City; State; Zip Code 7903 Swindon Ln.  Austin, TX 78745	Amount of Contribution (\$)  \$105.58
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed
Date 04/12/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenberg, Christine  Contributor address; City; State; Zip Code 2203 Red Rock Dr.  Belton, TX 76513	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 04/02/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharkey, Emily (Ms.)  Contributor address; City; State; Zip Code 4617 Willowood Ln.  Temple, TX 76502	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/12/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharkey, Emily (Ms.)  Contributor address; City; State; Zip Code 4617 Willowood Ln.  Temple, TX 76502	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

**MONETARY POLITICAL CONTRIBUTIONS**

**SCHEDULE A1**

<p><b>The Instruction Guide explains how to complete this form.</b></p>		<p>1 Total pages Schedule A1: Sch: 5/5 Rpt: 8/13</p>
<p>2 FILER NAME ... <i>Sandra Blankenship</i></p>		<p>3 Filer ID</p>
<p>4 Date 04/20/2019</p>	<p>5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharkey, Emily (Ms.)</p> <hr/> <p>6 Contributor address; City; State; Zip Code 4617 Willowood Ln.  Temple, TX 76502</p>	<p>7 Amount of Contribution (\$)  \$52.95</p>
<p>8 Principal occupation / Job title (See Instructions) Retired</p>		<p>9 Employer (See Instructions) Retired</p>
<p>Date 04/19/2019</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkerson, Ernest (Mr.)</p> <hr/> <p>Contributor address; City; State; Zip Code 2007 Amethyst Dr.  Killeen, TX 76549</p>	<p>Amount of Contribution (\$)  \$100.00</p>
<p>Principal occupation / Job title (See Instructions) Minor Disciplinary Officer</p>		<p>Employer (See Instructions) Texas Dept. of Criminal Justice</p>

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 9/13	
2 FILER NAME <i>Sandra Blankenship</i>		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 04/15/2019	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Kenith (Mr.)	8 Amount of contribution (\$) \$0.54	9 In-kind contribution description Scanning Fee
	7 Contributor address; City; State; Zip Code 9301 Oak Hills Dr.  Temple, TX 76502	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Campaign Manager		11 Employer (FOR NON-JUDICIAL) (See instructions) Sandra for Killeen	
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)			

# 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.

<b>1</b> Total pages Schedule F1: Sch: 1/4 Rpt: 10/13	<b>2</b> FILER NAME <i>Sandra Blankenship</i>	<b>3</b> Filer ID
<b>4</b> Date 04/11/2019	<b>5</b> Payee name AdventHealth Central Texas Foundation	
<b>6</b> Amount (\$) \$150.00	<b>7</b> Payee address; City; State; Zip Code 2201 S. Clear Creek Rd.  Killeen, TX 76549	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising in Fundraising Literature
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 04/09/2019	Payee name Copper Mountain USPS	
Amount (\$) \$55.00	Payee address; City; State; Zip Code 3100 S. WS Young Dr.  Killeen, TX 76542	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage Stamps
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 03/26/2019	Payee name DemSign	
Amount (\$) \$683.58	Payee address; City; State; Zip Code 1401 Harvest Glen Dr.  Plano, TX 75074	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Large Campaign Signs
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# 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.

<b>1</b> Total pages Schedule F1: Sch: 2/4 Rpt: 11/13	<b>2</b> FILER NAME <i>Sandra Blankenship</i>	<b>3</b> Filer ID
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<b>4</b> Date 04/24/2019	<b>5</b> Payee name DonateWay
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<b>6</b> Amount (\$) \$89.92	<b>7</b> Payee address; City; State; Zip Code POB 301267  Austin, TX 78703
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Expense
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/30/2019	Payee name Gonzalez, Kenith (Mr.)
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Amount (\$) \$380.00	Payee address; City; State; Zip Code 9301 Oak Hills Dr.  Temple, TX 76502
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PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Consulting Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Management
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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 04/13/2019	Payee name Gonzalez, Kenith (Mr.)
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Amount (\$) \$440.00	Payee address; City; State; Zip Code 9301 Oak Hills Dr.  Temple, TX 76502
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PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Consulting Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Management
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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.

<b>1</b> Total pages Schedule F1: Sch: 3/4 Rpt: 12/13	<b>2</b> FILER NAME ..... <i>Sandra Blankenship</i>	<b>3</b> Filer ID
<b>4</b> Date 04/22/2019	<b>5</b> Payee name Greater Killeen Chamber of Commerce	
<b>6</b> Amount (\$) \$5.00	<b>7</b> Payee address; City; State; Zip Code 1 Santa Fe Plaza Dr.  Killeen, TX 76541	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ticket to Candidate Forum
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 04/18/2019	Payee name KSSM-FM	
Amount (\$) \$450.00	Payee address; City; State; Zip Code 608 Moody Lane  Temple, TX 76502	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</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 Radio Advertisement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 04/22/2019	Payee name Killeen Daily Herald	
Amount (\$) \$249.00	Payee address; City; State; Zip Code P.O. Box 1300  Killeen, TX 76540	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Advertisement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# 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.

<b>1</b> Total pages Schedule F1: Sch: 4/4 Rpt: 13/13	<b>2</b> FILER NAME <i>Sandra Blankenship</i>	<b>3</b> Filer ID
<b>4</b> Date 04/18/2019	<b>5</b> Payee name Marco's Pizza	
<b>6</b> Amount (\$) \$51.93	<b>7</b> Payee address; City; State; Zip Code 4001 E. Stan Schleuter Loop Ste. 107 Killeen, TX 76542	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refreshments
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 04/23/2019	Payee name Office Depot/Office Max	
Amount (\$) \$70.90	Payee address; City; State; Zip Code 1800 Lowes Blvd.  Killeen, TX 76542	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Address Labels and Stamps
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 04/04/2019	Payee name Staples	
Amount (\$) \$54.13	Payee address; City; State; Zip Code 2112 S.W. HK Dodgen Lp Ste. 183 Temple, TX 76504	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Copies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

