

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:
3 CANDIDATE / OFFICEHOLDER NAME	MS (MRS) / MR: <u>MR</u> FIRST: <u>BLANCHE</u> MI: <u>H</u> NICKNAME: <u>BRICK</u> LAST: <u>BRICK</u> SUFFIX:	OFFICE USE ONLY Date Received: HAND DELIVERED <i>12:51pm 3m</i> OCT 27 2014 DELIVERED Date Hand-delivered or Postmarked: Receipt # Amount: Date Processed: Date Imaged:	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <u>1309 FOREPDR. COLLEGE STATION, TX 77845</u>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <u>(979) 764-7287</u>		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR: FIRST: <u>DON</u> MI: <u>—</u> NICKNAME: LAST: <u>HELLRIEGEL</u> SUFFIX:		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <u>1301 WILSWIRE COURT COLLEGE STATION, TX 77845</u>		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <u>(979) 229-8137</u>		
9 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)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year <u>10 / 07 / 2014</u> <u>10 / 27 / 2014</u>		
11 ELECTION	ELECTION DATE Month Day Year <u>11 / 04 / 2014</u>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) <u>City Council, Place 1 College Station</u>	13 OFFICE SOUGHT (if known) <u>City Council, Place 1 College Station</u>	

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

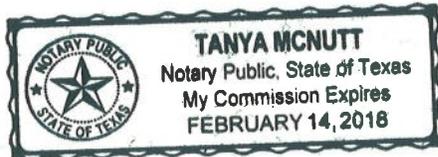
14 C/OH NAME BLANCHE BRICK 15 ACCOUNT # (Ethics Commission Filers)

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
		<u>Blanche Brick Campaign</u>
		COMMITTEE ADDRESS <u>1309 Forge, College Station, TX 77845</u>
		COMMITTEE CAMPAIGN TREASURER NAME <u>DON HELLRIEGEL</u>
		COMMITTEE CAMPAIGN TREASURER ADDRESS <u>1301 WILSHIRE COURT College Station, TX 77845</u>

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ <u>165.00</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>365</u>
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ <u>0</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>0</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>365</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>0</u>

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.

Blanche Brick
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Blanche Brick, this the 27th day of October, 20 14, to certify which, witness my hand and seal of office.

Tanya McNutt Tanya McNutt Notary Public
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:

2 FILER NAME **BLANCHE BAICK**

3 ACCOUNT # (Ethics Commission Filers)

4 Date

5 Full name of contributor out-of-state PAC (ID#:

Sandra Runnela

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

100.00

10/25

6 Contributor address; City; State; Zip Code

**1303 Laura Lane
College Station, TX 77840**

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Retired

10 Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#:

~~Richard Woodward~~

Amount of contribution (\$)

In-kind contribution description (if applicable)

100.00

10/25

Contributor address; City; State; Zip Code

**WILLIAM SMITH
5009 CRYSTAL DOWNS CT
College Station, TX 77845-8953**

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#:

Angela + Dudley Smith

Amount of contribution (\$)

In-kind contribution description (if applicable)

40.00

10/22

Contributor address; City; State; Zip Code

**1810 Shadowood
Coll. St, TX 77840**

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#:

Richard Woodward

Amount of contribution (\$)

In-kind contribution description (if applicable)

25.00

10-11

Contributor address; City; State; Zip Code

**1001 Pushing
Coll St, TX 77840**

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Professor

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#:

Gene Hawkins

Amount of contribution (\$)

In-kind contribution description (if applicable)

50.00

10-14

Contributor address; City; State; Zip Code

**1805 Hawyer
Coll St, TX 77840**

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Professor

Employer (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.

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:

2 FILER NAME

Blanche Brick

3 ACCOUNT # (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED PLEDGES: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨

\$

5 Date

10/7

6 Full name of pledgor out-of-state PAC (ID#: _____)

Sary Jones

8 Amount of pledge (\$)

5000

9 In-kind description (if applicable)

7 Pledgor address; City; State; Zip Code

*3943 Blue Jay Ct.
College St, TX 77845*

(If travel outside of Texas, complete Schedule T)

10 Principal occupation / Job title (See Instructions)

Retired

11 Employer (See Instructions)

Date

Full name of pledgor out-of-state PAC (ID#: _____)

Amount of pledge (\$)

In-kind description (if applicable)

Pledgor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor out-of-state PAC (ID#: _____)

Amount of pledge (\$)

In-kind description (if applicable)

Pledgor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor out-of-state PAC (ID#: _____)

Amount of pledge (\$)

In-kind description (if applicable)

Pledgor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor out-of-state PAC (ID#: _____)

Amount of pledge (\$)

In-kind description (if applicable)

Pledgor address; City; State; Zip Code

(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 for additional reporting requirements.