

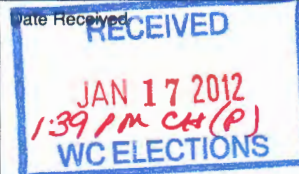
CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00012345	2 PAGE # 1 of 6
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Doyle E.	MI
	NICKNAME Dee	LAST Hobbs	SUFFIX Jr.
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;	APT / SUITE #;	CITY; STATE; ZIP CODE
	PO Box 912 Hutto, TX 78634		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Doyle E.	MI
	NICKNAME	LAST Hobbs	SUFFIX Sr.
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
	701 CR 134 Hutto, TX 78634		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
(512) 759-6071			
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff
	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit
9 PERIOD COVERED	Month	Day	Year
	12/15/2011	THROUGH	12/31/2011
10 ELECTION	ELECTION DATE	ELECTION TYPE	
	Month Day Year 04/03/2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) County Attorney

OFFICE USE ONLY

Date Received



Date Hand-delivered or Date Postmarked

Receipt #

Amount

Date Processed

Date Imaged

1/17/12 KS

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Hobbs, Doyle E. Jr.

14 ACCOUNT # (Ethics Commission filers)
00012345

15 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures 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

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

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)

\$ 16,850.00

EXPENDITURE TOTALS

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

\$ 39.50

4. TOTAL POLITICAL EXPENDITURES

\$ 897.74

CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD

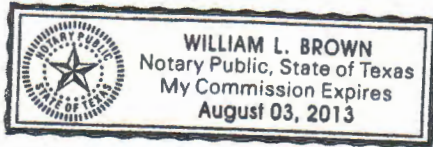
\$ 16,850.00

OUTSTANDING LOAN TOTALS

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

\$ 0.00

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.

Doyle "Dee" 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 16th day of January, 2012, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Print 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 PAGE # Schedule: 2/3 Report: 4/6	
2 FILER NAME Hobbs, Doyle E. Jr.		3 ACCOUNT # (Ethics Commission filers) 00012345	
4 Date 12/21/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kuhn, Robert 6 Contributor address; City; State; Zip Code 603 W. 8th St Austin, TX 78701	7 Amount of contribution (\$) \$500.00 	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 12/21/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shires, Derek Contributor address; City; State; Zip Code PO Box 155 Hutto, TX 78634	Amount of contribution (\$) \$3,750.00 	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/25/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sorenson, Ima Contributor address; City; State; Zip Code 3601 FM 3349 Taylor, TX 76574	Amount of contribution (\$) \$5,000.00 	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/30/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tidwell, Hugh Contributor address; City; State; Zip Code PO Box 111 Weir, TX 78674	Amount of contribution (\$) \$500.00 	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/15/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vickers, John & Vicki Contributor address; City; State; Zip Code 30103 Wingfoot Cove Georgetown, TX 78628	Amount of contribution (\$) \$2,500.00 	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/1 Report: 6/6	2 FILER NAME Hobbs, Doyle E. Jr.	3 ACCOUNT # (TEC filers) 00012345
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4 Date 12/15/2011	5 Payee name AT&T
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6 Amount (\$) \$108.24 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City; State; Zip Code PO Box 650574 Dallas, TX 75265
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) OTHER - Office Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Cel Phone Expense
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Date 12/15/2011	Payee name Republican Party (Bill Fairbrother)
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Amount (\$) \$750.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 2915 Pioneer Way Round Rock, TX 78665
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Filing ee
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