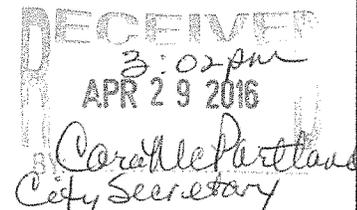


CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed:																
3 CANDIDATE / OFFICEHOLDER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; font-size: small;">MS / MRS / MR</td> <td style="width:40%; text-align: center;">FIRST</td> <td style="width:20%; text-align: center;">MI</td> <td style="width:20%;"></td> </tr> <tr> <td></td> <td style="text-align: center;"><i>Herschel</i></td> <td style="text-align: center;"><i>P</i></td> <td></td> </tr> <tr> <td style="font-size: small;">NICKNAME</td> <td style="text-align: center;">LAST</td> <td style="text-align: center;">SUFFIX</td> <td></td> </tr> <tr> <td></td> <td style="text-align: center;"><i>Mac McCullough</i></td> <td></td> <td></td> </tr> </table>	MS / MRS / MR	FIRST	MI			<i>Herschel</i>	<i>P</i>		NICKNAME	LAST	SUFFIX			<i>Mac McCullough</i>			OFFICE USE ONLY	
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NICKNAME	LAST	SUFFIX																	
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4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS		Date Received																	
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; font-size: small;">ADDRESS / PO BOX;</td> <td style="width:25%; font-size: small;">APT / SUITE #;</td> <td style="width:25%; font-size: small;">CITY;</td> <td style="width:25%; font-size: small;">STATE;</td> <td style="width:20%; font-size: small;">ZIP CODE</td> </tr> <tr> <td colspan="5" style="text-align: center;"><i>1415 E. Spoke Hill Dr</i></td> </tr> <tr> <td colspan="5" style="text-align: center;"><i>Wimberly TX 78676</i></td> </tr> </table> <input type="checkbox"/> Change of Address		ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	<i>1415 E. Spoke Hill Dr</i>					<i>Wimberly TX 78676</i>							
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5 CANDIDATE / OFFICEHOLDER PHONE		Date Hand-delivered or Date Postmarked																	
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12 OFFICE		13 OFFICE SOUGHT (if known)																	
OFFICE HELD (if any)																			
<i>Wimberly City Council PC3</i>		<i>Wimberly Mayor</i>																	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Mac McCullough 15 Filer ID (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>VOICE OF WIMBERLEY</u>
		COMMITTEE ADDRESS
		<u>300 MILL RACE LN</u>
	COMMITTEE CAMPAIGN TREASURER NAME	<u>SALLY TRAPP</u>
	COMMITTEE CAMPAIGN TREASURER ADDRESS	<u>300 MILL RACE LN</u>

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ <u>0</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>650</u>
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 598.60
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>598.60</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>51.40</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>483.30</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.

[Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Herschel P. McCullough, this the 29th day of April, 2016, to certify which, witness my hand and seal of office.

Cara McPartland
Signature of officer administering oath

Cara McPartland
Printed name of officer administering oath

Notary Public
Title of officer administering oath

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <i>1</i>	2 FILER NAME <i>Mac McCullough</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>4-16-16</i>	5 Payee name <i>Wimberly View</i>
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6 Amount (\$) <i>598.00</i>	7 Payee address; City; State; Zip Code <i>Wimberly TX 78676</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>News Paper Ad Expense</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED