

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:

8

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

Braddock

MI

A

NICKNAME

LAST

Brad Schofield

SUFFIX

OFFICE USE ONLY

Date Received

Date Hand-delivered or Postmarked

Receipt #

Amount

Date Processed

Date Imaged

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

409 Shumard
Oak Trail Keller TX 76248

change of address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(817) 521 9427

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

Braddock

MI

A

NICKNAME

LAST

Brad Schofield

SUFFIX

7 CAMPAIGN
TREASURER
ADDRESS
(residence or business)

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

409 Shumard
oak trail Keller TX 76248

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(817) 521 9427

9 REPORT TYPE

January 15

30th day before election

Runoff

15th day after campaign
treasurer appointment
(officeholder only)

July 15

8th day before election

Exceeded \$500
limit

Final report (Attach C/OH - FR)

10 PERIOD
COVERED

Month Day Year

4 / 3 / 12

THROUGH

Month Day Year

5 / 2 / 12

11 ELECTION

ELECTION DATE

Month Day Year

5 / 12 / 12

ELECTION TYPE

Primary

Runoff

General

Special

12 OFFICE

OFFICE HELD (if any)

None

13 OFFICE SOUGHT (if known)

Keller ISD Place 6

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME

Braddock "Brad" Anderson Schofield

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.

COMMITTEE TYPE

GENERAL

SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

17 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0

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

\$ 0

EXPENDITURE
TOTALS

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

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 6,399.23

CONTRIBUTION
BALANCE

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

\$ 1,211.27

OUTSTANDING
LOAN TOTALS

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

\$ 2,000.00

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.

Brad A. Schofield

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Braddock "Brad" Anderson Schofield, this the 4th day of May, 20 12, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Jonathan Rodriguez

Signature of officer administering oath

Notary Public

STATE OF TEXAS

My Comm. Exp. May 25, 2011



LOANS**SCHEDULE E**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

1

2 FILER NAME

Braddock "Brad" Anderson Schofield

3 ACCOUNT # (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨

\$

5 Date of loan

4/24/12

7 Name of lender

Brad A. Schofield

 out-of-state PAC (ID#: _____)

9 Loan Amount (\$)

2,000.00

6 Is lender a financial institution?

Y N

8 Lender address; City; State; Zip Code

409 Shumard Oak Trail
Keller, TX 76248

10 Interest rate

N/A

11 Maturity date

N/A

12 Principal occupation / Job title (See Instructions)

Accountant

13 Employer (See Instructions)

ACM

14 Description of Collateral

 none

15 Check if personal funds were deposited into political account

16 GUARANTOR INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

 not applicable

18 Guarantor address; City; State; Zip Code

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

Name of lender

 out-of-state PAC (ID#: _____)

Loan Amount (\$)

Is lender a financial institution?

Y N

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral

 none

Check if personal funds were deposited into political account

GUARANTOR INFORMATION

Name of guarantor

Amount Guaranteed (\$)

 not applicable

Guarantor address; City; State; Zip Code

Principal Occupation (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 3		2 FILER NAME Braddock "Brad" Anderson Schofield		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/7/12		5 Payee name Staples			
6 Amount (\$) 4.86		7 Payee address; City; State; Zip Code 8000 Denton Hwy Suite 108 Watauga, TX 76148			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Event Expense		(b) Description (If travel outside of Texas, complete Schedule T) clipboards for Crawfish festival	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 4/9/12		Payee name Sign-A-Rama			
Amount (\$) 1,785.00		Payee address; City; State; Zip Code 750 S. main St. Ste 145 Keller, TX 76248			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) Yard and Road Signs	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 4/11/12		Payee name Go Daddy			
Amount (\$) 201,66		Payee address; City; State; Zip Code 14455 N. Hayden Rd. Ste 226 Scottsdale, AZ 85260			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Adversing Expense		Description (If travel outside of Texas, complete Schedule T) Web Site and email	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 4/13/12		Payee name Academy Sports			
Amount (\$) 281.41		Payee address; City; State; Zip Code 5836 N. Tarrant Pkwy Fort worth, TX 76137			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) Canopy/Table for Crawfish festival	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:		2 FILER NAME Braddock "Brad" Anderson Schofield		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/13/12		5 Payee name Party City			
6 Amount (\$) 557.51		7 Payee address; City; State; Zip Code 7620 Denton Highway Suite 616 Watauga, TX 76148			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Event Expense		(b) Description (If travel outside of Texas, complete Schedule T) Helium/Balloons for Crawfish Festival	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 4/14/12		Payee name EmbroidMe			
Amount (\$) 129.90		Payee address; City; State; Zip Code 800 S. main st. Keller, TX 76248			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) T-shirts for Crawfish Festival	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 4/16/12		Payee name Party City			
Amount (\$) 454.11		Payee address; City; State; Zip Code 7620 Denton Highway Suite 616 Watauga, TX 76148			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) OTHER - overcharge		Description (If travel outside of Texas, complete Schedule T) Charged twice on 4/13 purchase	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 4/24/11		Payee name Home Depot			
Amount (\$) 37.31		Payee address; City; State; Zip Code 2013 Hwy 377 Keller, TX 76248			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) Ties for Road Signs	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME Braddock "Brad" Anderson Schofield	3 ACCOUNT # (Ethics Commission Filers)
4 Date 4/26/12	5 Payee name Sign-A-Rama	
6 Amount (\$) 1,785.00	7 Payee address; City; State; Zip Code 750 S. main St. Ste 145 Keller TX 76248	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) Yard and Road Signs
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4/28/12	Payee name Home Depot	
Amount (\$) 30.86	Payee address; City; State; Zip Code 2013 Hwy 377 Keller, TX 76248	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Ties for Road signs
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4/22/12	Payee name Lowe's	
Amount (\$) 809.37	Payee address; City; State; Zip Code 600 N. Tarrant Pkwy Keller, TX 76248	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) T-Post for Road signs
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 5/1/12	Payee name Allegra	
Amount (\$) 117.99	Payee address; City; State; Zip Code 7124 mid Cities Blvd North Richland Hills, TX 76180	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Election Flyer
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 1	2 FILER NAME Braddock "Brad" Anderson Schofield	3 ACCOUNT # (Ethics Commission Filers)
4 Date 4/5/12	5 Payee name Direct Promotionals	
6 Amount (\$) 170.25 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 2327 Englert Dr Suite 302 Durham, NC 27713	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) magnets to remember the date
Date 4/10/12	Payee name Timarron Country Club	
Amount (\$) 34.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1400 Byron Nelson Parkway Southlake, TX 76092	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) RWNT Candidate Forum
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

INTEREST EARNED, OTHER CREDITS/GAINS/ REFUNDS, AND PURCHASE OF INVESTMENTS

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:

1

2 FILER NAME

Braddock "Brad" Anderson Schofield

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/16/12

5 Name of person from whom amount is received

Party City

6 Address of person from whom amount is received; City; State; Zip Code

7620 Denton Highway Suite 616
Watauga, TX 76148

8 Amount
(\$)

20.32

7 Purpose for which amount is received

Return of unused Ballons (Credit)

Date

4/16/12

Name of person from whom amount is received

Party City

Address of person from whom amount is received; City; State; Zip Code

7620 Denton Highway Suite 616
Watauga, TX 76148

Amount
(\$)

454.11

Purpose for which amount is received

Return of unused Helium and deposit (credit)

Date

4/16/12

Name of person from whom amount is received

Party City

Address of person from whom amount is received; City; State; Zip Code

7620 Denton Highway Suite 616
Watauga, TX 76148

Amount
(\$)

454.11

Purpose for which amount is received

Credit for over charge on 4/16/12 (see Schedule F)

Date

4/21/12

Name of person from whom amount is received

Academy Sports

Address of person from whom amount is received; City; State; Zip Code

5836 N. Tarrant Pkwy
Fort Worth, TX 76137

Amount
(\$)

238.12

Purpose for which amount is received

Refund on Broken Canopy for crawfish festival (credit)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED