

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: 11
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR (M) FIRST Stephen MI D NICKNAME LAST SUFFIX Germaun	OFFICE USE ONLY	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 555 Ginspor Seguin Tx 78155	Date Received Guadalupe Co Elections MAY 16 2022 Received	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (830) 560-6582	Date Hand-delivered or Date Postmarked	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR (M) FIRST Carl MI Jean NICKNAME LAST SUFFIX Katz	Receipt #	Amount \$
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2180 Fm 465 Seguin Tx 78155	Date Processed	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (210) 375-4196	Date Imaged	
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 Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year Month Day Year Feb / 23 / 2022 THROUGH May / 16 / 2022		
11 ELECTION	ELECTION DATE Month Day Year May / 24 / 2022	ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) Commission Precinct 3	
14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	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 <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	

GO TO PAGE 2

SUBTOTALS - C/OH

**FORM C/OH
COVER SHEET PG 3**

19 FILER NAME <i>Stephen Germanx</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS	NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>100.00</i>
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ <i>500.00</i>
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ <i>5800.00</i>
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>3494.3</i>
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ <i>3494.3</i>
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME

Stephen Germann

16 Filer ID (Ethics Commission Filers)

17 CONTRIBUTION
TOTALS

1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)

\$ 100

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

\$ 500

EXPENDITURE
TOTALS

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.

\$

4. TOTAL POLITICAL EXPENDITURES

\$ 3494.3

CONTRIBUTION
BALANCE

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

\$ 125.00

OUTSTANDING
LOAN TOTALS

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

\$

18 SIGNATURE

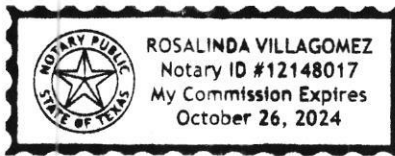
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Stephen Germann

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by Stephen Germann this the 16th day of May, 2022, to certify which, witness my hand and seal of office.

Rosalinda Villagomez
Signature of officer administering oath

Rosalinda Villagomez
Printed name of officer administering oath

Relationship Bank II
Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Stephen Germanu</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>4-8-20</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Dale Dyess</i>	7 Amount of contribution (\$) <i>\$100.00</i>
6 Contributor address; City; State; Zip Code <i>3735 Fm 1117 Segui Tx 78755</i>		
8 Principal occupation / Job title (See Instructions) <i>Realtor</i>		9 Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		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.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 1	
2 FILER NAME Stephen Germain		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date Apr. 15 2022	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jayme Mathis	8 Amount of Contribution \$ 250.00	9 In-kind contribution description
7 Contributor address; City; State; Zip Code 209 N. Main Cibola Tx 78108		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Restaurateur		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
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)			
Date 3/15/22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright Kande	Amount of Contribution \$ 250.00	In-kind contribution description Later Party
Contributor address; City; State; Zip Code 2674 Linn Seguin Tx 78159		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Retired		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(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) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2: 1	2 FILER NAME Stephan Germain	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$
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5 Date 5/5/22	6 Payee name Direct Texas
7 Amount (\$) 5800.00	8 Payee address: 1200 S. IH 35 City: New Braunfels State: TX Zip Code: 78130

9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing	(b) Description Mails
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Stephan Germain	Office sought Commissioner	Office held
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Date	Payee name
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Amount (\$)	Payee address;	City;	State;	Zip Code
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TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

If the requested information is not applicable, DO NOT include this page in the report.

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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME <i>Stephen Germann</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>3-3-2022</i>	5 Payee name <i>Direct Texas</i>	
6 Amount (\$) <i>480.00</i> <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <i>1280 South IH35 New Braunfels TX 78130</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising</i>	(b) Description <i>Signs</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Stephen Germann</i>	Office sought <i>Commissioner</i>
Date <i>3-18-22</i>	Payee name <i>Marion Lions</i>	
Amount (\$) <i>15.00</i> <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>Marion TX</i>	
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>Donation</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Stephen Germann</i>	Office sought <i>Commissioner</i>
Date <i>3-24-22</i>	Payee name <i>GCRW</i>	
Amount (\$) <i>12.00</i> <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>Seguin 78155</i>	
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Food</i>	Description <i>Meal</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Stephen Germann</i>	Office sought <i>Commissioner</i>

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

If the requested information is not applicable, **DO NOT** include this page in the report.

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 Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: <p style="text-align:center; font-size: 2em;">5</p>	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 Date 4/1/22	5 Payee name Direct Texas	
6 Amount (\$) 286.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; 1280 S. IH 35	City; State; Zip Code New Braunfels TX 78130
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description Signs
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Stephen Germann	Office sought / Office held Commissioner
Date 4/10/22	Payee name Seguin Gazette	
Amount (\$) 250.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; 805 E. Court Suite 200	City; State; Zip Code Seguin TX 78755
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Ad
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Stephen Germann	Office sought / Office held Commissioner
Date 4-13-22	Payee name Direct Texas	
Amount (\$) 914.71 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; 1280 S IH 35	City; State; Zip Code New Braunfels TX 78130
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Chip clips / push cards
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Stephen Germann	Office sought / Office held Commissioner

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

If the requested information is not applicable, DO NOT include this page in the report.

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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 5		2 FILER NAME Stephen German		3 Filer ID (Ethics Commission Filers)	
4 Date 4-19-2022		5 Payee name Big Frog			
6 Amount (\$) 54.10 <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 1551 N. Walnut Suite 33 New Braunfels Tx 78132			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing		(b) Description Tee Shirts		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Stephen German		Office sought Commissioner	
Date Apr. 23, 20		Payee name Be Social			
Amount (\$) 250.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 215 South West End Ave New Braunfels Tx 78130			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising		Description Video		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Stephen German		Office sought Commissioner	
Date 4/28/22		Payee name KWEED			
Amount (\$) 102.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 609 E. Court St Seguin Tx 78155			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising		Description Radio Spots		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Stephen German		Office sought Commissioner	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

If the requested information is not applicable, DO NOT include this page in the report.

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.

1 Total pages Schedule G: 5		2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
4 Date May 1, 22		5 Payee name St. John's Lutheran			
6 Amount (\$) 60.00 <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 604 S. Center Merida TX 78124			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation		(b) Description Donation		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Stephen Germann		Office sought Commissioner	Office held
Date May 6, 22		Payee name New Berlin CC			
Amount (\$) 175.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 8815 Fm 173 Seguin TX 78155			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description Hall Rent		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Stephen Germann		Office sought Commissioner	Office held
Date May 9, 22		Payee name Big Frog			
Amount (\$) 151.39 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 1551 N. Walnut New Braunfels TX 78130			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising		Description Shirts		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Stephen Germann		Office sought Commissioner	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

If the requested information is not applicable, DO NOT include this page in the report.

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.

1 Total pages Schedule G: 5		2 FILER NAME Stephen German		3 Filer ID (Ethics Commission Filers)	
4 Date May 9, 20		5 Payee name KWED			
6 Amount (\$) 68.00 <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address: 609 E. Court		City: Seguin	State: TX
				Zip Code: 78155	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising		(b) Description Radio spot		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH					
		Candidate / Officeholder name Stephen German		Office sought Commissioner	Office held
Date 5/10/20		Payee name Seguin Print Shop			
Amount (\$) 465.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address: 410 E. Court		City: Seguin	State: TX
				Zip Code: 78155	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising		Description Signs		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH					
		Candidate / Officeholder name Stephen German		Office sought Comm.	Office held
Date May 11, 20		Payee name Seguin Gazette			
Amount (\$) 125.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address: 805 E. Court		City: Seguin	State: TX
				Zip Code: 78155	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising		Description Ad in Paper		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH					
		Candidate / Officeholder name Stephen German		Office sought Comm.	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

If the requested information is not applicable, DO NOT include this page in the report.

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.

1 Total pages Schedule G: <p style="text-align:center;">5</p>	2 FILER NAME <p style="text-align:center;">Stephen German</p>	3 Filer ID (Ethics Commission Filers)
4 Date <p style="text-align:center;">5/15/22</p>	5 Payee name <p style="text-align:center;">HERB</p>	
6 Amount (\$) <p style="text-align:center;">86.00</p> <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; <p style="text-align:center;">1340 E. Court</p> <p style="text-align:right;">City; State; Zip Code <p style="text-align:right;">Seguin TX 78155</p></p>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <p style="text-align:center;">Food Food</p>	(b) Description <p style="text-align:center;">Food for Politize) party</p>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <p style="text-align:center;">Stephen German</p>	Office sought <p style="text-align:center;">Commissioner</p>
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; <p style="text-align:right;">City; State; Zip Code</p>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <p style="text-align:right;">Office held</p>
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; <p style="text-align:right;">City; State; Zip Code</p>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <p style="text-align:right;">Office held</p>

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED