

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		<b>1</b> Filer ID (Ethics Commission Filers)	<b>2</b> Total pages filed:
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR                      FIRST                      MI <p style="text-align: center; font-size: 1.2em;">Andy                      M</p> NICKNAME                      LAST                      SUFFIX <p style="text-align: center; font-size: 1.2em;">Mann</p>	<b>OFFICE USE ONLY</b> Date Received <p style="text-align: center; font-weight: bold; font-size: 1.2em;">City of League City Received</p> <p style="text-align: center; font-weight: bold; font-size: 1.5em;">JAN 22 2020</p> <p style="text-align: center; font-weight: bold;">Office of City Secretary</p>	
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;    APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE <p style="text-align: center; font-size: 1.2em;">2206 Highstone Ct., League City, TX 77573</p>	Date Hand-delivered or Date Postmarked <p style="text-align: right; font-size: 1.2em;">1/22/20 1:00 pm ac</p>	
<b>5</b> CANDIDATE / OFFICEHOLDER PHONE	AREA CODE                      PHONE NUMBER                      EXTENSION ( 281 )                      667-5013	Receipt #                      Amount \$ Date Processed Date Imaged <p style="text-align: right; font-size: 1.2em;">1/22/20 1:00 pm ac</p>	
<b>6</b> CAMPAIGN TREASURER NAME	MS / MRS / MR                      FIRST                      MI <p style="text-align: center; font-size: 1.2em;">Mr.                      Mark                      C</p> NICKNAME                      LAST                      SUFFIX <p style="text-align: center; font-size: 1.2em;">Brown</p>	STREET ADDRESS (NO PO BOX PLEASE);    APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE <p style="text-align: center; font-size: 1.2em;">2028 Sedona Dr.                      League City                      TX                      77573</p> (Residence or Business)	
<b>7</b> CAMPAIGN TREASURER ADDRESS	AREA CODE                      PHONE NUMBER                      EXTENSION ( 832 )                      297-2450	REPORT TYPE <input checked="" 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 type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)	
<b>8</b> CAMPAIGN TREASURER PHONE	PERIOD COVERED Month                      Day                      Year                      Month                      Day                      Year <p style="text-align: center; font-size: 1.2em;">7 / 1 / 2019                      THROUGH                      12 / 31 / 2019</p>		
<b>9</b> REPORT TYPE	ELECTION DATE Month                      Day                      Year /                      /	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	
<b>10</b> PERIOD COVERED	OFFICE HELD (if any) <p style="text-align: center; font-size: 1.2em;">City Council, Position 1</p>	OFFICE SOUGHT (if known)	
<b>11</b> ELECTION	<b>GO TO PAGE 2</b>		
<b>12</b> OFFICE			
<b>13</b> OFFICE SOUGHT			

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME 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
		Andy Mann for City Council
	COMMITTEE ADDRESS	2206 Highstone Ct., League City, TX 77573
	COMMITTEE CAMPAIGN TREASURER NAME	Mark C. Brown
	COMMITTEE CAMPAIGN TREASURER ADDRESS	2028 Sedona Dr., League City, TX 77573

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 104.56
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 14,860.00

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.

  
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Andy M. Mann, this the 22 day of January, 2020, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Della Brown

 Printed name of officer administering oath

Notary

 Title of officer administering oath

# SUBTOTALS - C/OH

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

<b>19 FILER NAME</b> <b>Andy M. Mann</b>		<b>20 Filer ID (Ethics Commission Filers)</b>
<b>21 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		<b>SUBTOTAL AMOUNT</b>
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 0.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0.00
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0.00
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 84.00
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.00

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE I

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I:	<b>2</b> FILER NAME  Andy M. Mann	<b>3</b> Filer ID (Ethics Commission Filers)																																									
<b>4</b> Date 7/31, 8/31, 9/30 10/31, 11/30, 12/31	<b>5</b> Payee name  Wells Fargo Bank																																										
<b>6</b> Amount (\$)  84.00	<b>7</b> Payee address; City State Zip Code  1681 W. FM 646, League City, TX 77573																																										
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See instructions for examples of acceptable categories.)  Banking Expense	<b>(b) Description</b> (See instructions regarding type of information required.)  Monthly bank account fee																																									
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**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**