

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC COVER SHEET PG 1

The SPAC Instruction Guide explains how to complete this form.

1 ACCOUNT #
(Ethics Commission Filers)

2 Total pages filed:
4 RECEIVED

OFFICE USE ONLY

Date Received **JUL 15 2019**Office of City Secretary
City of Sugar Land, TX
01:05 p.m.
Date Hand-delivered or Postmarked

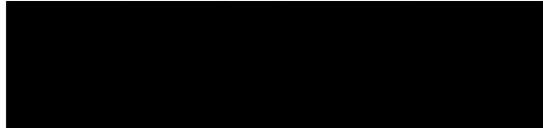
Receipt# Amount

Date Processed

Date Imaged

3 COMMITTEE NAME
HCARLC-PAC
4 COMMITTEE ADDRESS

ADDRESS / PO BOX APT / SUITE # CITY STATE ZIP CODE

 change of address

5 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI

HELVIG

NICKNAME LAST SUFFIX

VAN DER GRINTEN
6 CAMPAIGN TREASURER'S STREET ADDRESS
(residence or business)

STREET ADDRESS (NO PO BOX PLEASE) APT / SUITE # CITY STATE ZIP CODE

- SAME -
7 CAMPAIGN TREASURER'S MAILING ADDRESS

STREET OR PO BOX APT / SUITE # CITY STATE ZIP CODE

 change of address

- SAME -
8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION


9 REPORT TYPE

- January 15 30th day before election Exceeded \$500 limit
 July 15 8th day before election Dissolution (attach PAC-DR)
 Runoff 10th day after campaign treasurer termination

10 PERIOD COVERED

Month Day Year THROUGH Month Day Year
1 / 1 / 2019 **6 / 30 / 2019**
11 ELECTION
ELECTION DATE
Month Day Year

ELECTION TYPE

-
- Primary
-
- Runoff
-
- General
-
- Special

GO TO PAGE 2

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME HCARLC - PAC	ACCOUNT # (Ethics Commission Filers)
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13 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder)	<input type="checkbox"/> CANDIDATE <input type="checkbox"/> OFFICEHOLDER	CANDIDATE / OFFICEHOLDER NAME <hr/> OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) <hr/> BALLOT IDENTIFICATION / # ELECTION DATE <div style="display: flex; justify-content: space-between;"> TBD <div style="text-align: right;"> Month Day Year </div> </div> <hr/> DESCRIPTION ELECTION TO AMEND THE CITY CHARTER IAW OUR PETITION OF APRIL 19, 2013.
	<input checked="" type="checkbox"/> MEASURE	(This area is shared with the previous row)
	(This area is shared with the previous row)	(This area is shared with the previous row)

14 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	\$ 302.13
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

15 AFFIDAVIT



AFFIX NOTARY SEAL ABOVE

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.

H. Van Der Grinten

Signature of Campaign Treasurer

Sworn to and subscribed before me, by the said Hilwig Vandergrinten, this the 15 day of July, 2014, to certify which, witness my hand and seal of office.

Nickolas Sanchez

Signature of officer administering oath

Nickolas Sanchez

Printed name of officer administering oath

Notary Public

Title of officer administering oath

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: 1	2 FILER NAME HCARLLC-PAC	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 6/12/2019	5 Payee name PAPAS BROS. STEAKHOUSE
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6 Amount (\$) 110.15	7 Payee address; City; State; Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): FOOD/BEVERAGE EXPENSE	(b) Description (If travel outside of Texas, complete Schedule T): MEETING W/ COALITION ACTIVISTS
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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 6/30/2019	Payee name T-SHIRT DEPOT
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Amount (\$) 191.98	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): GIFT/MEMORIAL EXPENSE	Description (If travel outside of Texas, complete Schedule T): SOUVENIR OFFICE MUGS T-SHIRTS
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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
-------------	-------------------

Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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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
-------------	-------------------

Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete <u>ONLY</u> 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 COMMITTEE AFFIDAVIT OF DISSOLUTION

FORM PAC - DR

The Instruction Guide explains how to complete this form.
** Complete only if "Report Type" on page 1 is marked "Dissolution" **

1 COMMITTEE NAME

HCARLC - PAC

2 ACCOUNT # (Ethics Commission Filers)

3 Affidavit of Dissolution

I, the undersigned campaign treasurer, do not expect the occurrence of any further reportable activity by this political committee for this or any other campaign or election for which reporting under the Election Code is required. I declare that all of the information required to be reported by me has been reported. I understand that designating a report as a dissolution report terminates the appointment of campaign treasurer. I further understand that a political committee may not make or authorize political expenditures or accept political contributions without having an appointment of campaign treasurer on file.

H. Van Der Grinten

Signature of Campaign Treasurer



**DO NOT SIGN UNLESS
POLITICAL COMMITTEE IS TO BE DISSOLVED**

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said *Helwig Vandergrinten*, this the *15* day of *July*, 20 *19*, to certify which, witness my hand and seal of office.

Nickolas Sanchez

Signature of officer administering oath

Nickolas Sanchez
Printed name of officer administering oath

Notary Public
Title of officer administering oath