

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	2 Total pages filed: RECEIVED
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Joe	MI
	NICKNAME	LAST Zimmerman	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE
	Date Hand-delivered or Date Postmarked 07/13/18		
	Receipt #	Amount	
			Date Processed
			Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Jared	MI
	NICKNAME	LAST Jameson	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #; CITY; STATE; ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
8 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 checked="" 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)		
9 PERIOD COVERED	Month	Day	Year
	04/28/2018		
	THROUGH		
			06/30/2018
10 ELECTION	ELECTION DATE		ELECTION TYPE
	Month	Day	Year
	05/05/2018		
		<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff
		<input type="checkbox"/> General	<input type="checkbox"/> Special
		<input checked="" type="checkbox"/> Other Municipal	
11 OFFICE	OFFICE HELD (if any) Mayor Sugar Land		12 OFFICE SOUGHT (if known) Mayor Sugar Land

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

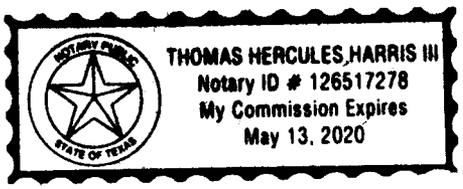
**FORM C/OH
COVER SHEET PG 2**
2 of 10

13 C / OH NAME Zimmerman, Joe	14 Filer ID
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15 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. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> 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	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

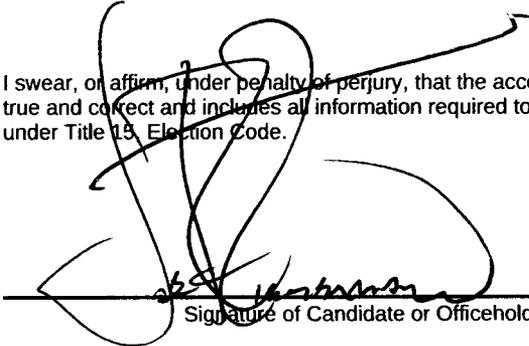
16 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	5,726.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$	14,754.60
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	33,933.27
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 AFFADAVIT



AFFIX NOTARY STAMP / 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.



 Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Joe R. Zimmerman, this the 13th day of July, 2018, to certify which, witness my hand and seal of office.


 Signature of officer administering

Thomas Hercules Harris III

 Printed name of officer administering

Notary Public

 Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Zimmerman, Joe	19 Filer ID
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20 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1. <input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 5,726.00
2. <input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. <input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input type="checkbox"/>	SCHEDULE E: LOANS	\$
5. <input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 14,754.60
6. <input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. <input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. <input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10. <input type="checkbox"/>	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12. <input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/3 Rpt: 4/10
2 FILER NAME Zimmerman, Joe		3 Filer ID
4 Date 04/30/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choudhury, Chesley	7 Amount of Contribution (\$) \$501.00
6 Contributor address; City; State; Zip Code 		
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) TanChes Global Management Inc.
Date 04/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Francis, Anthony	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) LJA Engineers
Date 04/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gremillion, Charles (Mr.)	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Construction Career Collaborative
Date 04/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Home-PAC Greater Houston Builders Assoc.	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcell, Marvin (Mr.)	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/3 Rpt: 5/10
2 FILER NAME Zimmerman, Joe		3 Filer ID
4 Date 04/30/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Christopher (Mr.) 6 Contributor address; City; State; Zip Code 	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions)
Date 04/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholas, W. Martin Contributor address; City; State; Zip Code 	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Pastor		Employer (See Instructions) Sugar Land First United Methodist Church
Date 04/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pace, Mark (Mr.) Contributor address; City; State; Zip Code 	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spartalis, Michael (Mr.) Contributor address; City; State; Zip Code 	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self Employed
Date 04/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutton, Charles (Mr.) Contributor address; City; State; Zip Code 	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Linebarger Gogan Blair and Sampson

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/3 Rpt: 6/10
2 FILER NAME Zimmerman, Joe		3 Filer ID
4 Date 04/30/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREPAC	7 Amount of Contribution (\$) \$3,000.00
6 Contributor address; City; State; Zip Code 		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Llarance (Mr.)	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Kelly Kaluza@Associates.Inc.

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 F1: Sch: 1/4 Rpt: 7/10		2 FILER NAME Zimmerman, Joe		3 Filer ID	
4 Date 05/15/2018		5 Payee name City of Sugar Land			
6 Amount (\$) \$294.17		7 Payee address; City; State; Zip Code 			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dinner for Mayor Turner and Mayor Zimmerman and Staff at City Hall	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 06/25/2018		Payee name Harris County Mayor's & councils			
Amount (\$) \$40.00		Payee address; City; State; Zip Code Association 			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mayor's Councils meeting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 06/17/2018		Payee name Icenhower Consulting			
Amount (\$) \$1,848.06		Payee address; City; State; Zip Code 			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting and Expenses	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

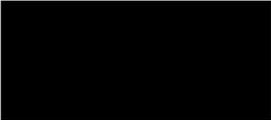
Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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 F1: Sch: 2/4 Rpt: 8/10	2 FILER NAME Zimmerman, Joe		3 Filer ID
4 Date 05/05/2018	5 Payee name Icenhower Consulting		
6 Amount (\$) \$2,902.94	7 Payee address; City; State; Zip Code 		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting and Expenses	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 06/17/2018	Payee name Magana Media		
Amount (\$) \$1,950.00	Payee address; City; State; Zip Code 		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign 2018 Marketing and Research	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 05/05/2018	Payee name Magana Media		
Amount (\$) \$3,540.00	Payee address; City; State; Zip Code 		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign 2018 marketing and Research	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

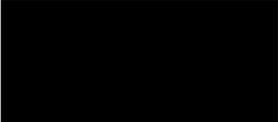
Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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 F1: Sch: 3/4 Rpt: 9/10		2 FILER NAME Zimmerman, Joe		3 Filer ID	
4 Date 05/05/2018		5 Payee name Pamela Printing			
6 Amount (\$) \$2,541.83		7 Payee address; City; State; Zip Code 			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising and mailer expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/28/2018		Payee name Paypal			
Amount (\$) \$7.55		Payee address; City; State; Zip Code 			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PayPal Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/17/2018		Payee name Sugar Land Skeeters Baseball Club			
Amount (\$) \$1,130.05		Payee address; City; State; Zip Code 			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Zimmerman Campaign Election Night	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 F1: Sch: 4/4 Rpt: 10/10	2 FILER NAME Zimmerman, Joe	3 Filer ID
4 Date 06/07/2018	5 Payee name U Of H Alumni Association	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation
9 Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought
		Office held