



# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME Stephen K. Lecholop II

15 ACCOUNT # (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)  
  
 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

17 CONTRIBUTION TOTALS

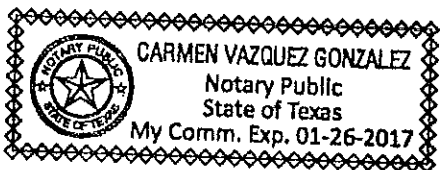
EXPENDITURE TOTALS

CONTRIBUTION BALANCE

OUTSTANDING LOAN TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ <u>0</u>
2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>0</u>
3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ <u>10.00</u>
4. TOTAL POLITICAL EXPENDITURES	\$ <u>124.00</u>
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>12,833.71</u>
6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>0</u>

### 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.

Stephen K. Lecholop II  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Steve Lecholop, this the 15<sup>th</sup> day of July, 20 14, to certify which, witness my hand and seal of office.

Carmen Vazquez Gonzalez      Carmen Vazquez Gonzalez      Executive Director  
 Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

# 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.

<b>1</b> Total pages Schedule G: <p style="text-align:center">2</p>	<b>2</b> FILER NAME <p style="text-align:center">Stephen K. Lecholap I</p>	<b>3</b> ACCOUNT # (Ethics Commission Filers)
<b>4</b> Date <p style="text-align:center">1/27/14</p>	<b>5</b> Payee name <p style="text-align:center">Nation builder</p>	
<b>6</b> Amount (\$) <p style="text-align:center">19.00</p> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code <p style="text-align:center">448 S. Hill St., Suite 20 Los Angeles, CA 90013</p>	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) <p style="text-align:center">Advertising</p>	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <p style="text-align:center">campaign website</p>
Date <p style="text-align:center">3/1/14</p>	Payee name <p style="text-align:center">Nation Builder</p>	
Amount (\$) <p style="text-align:center">19.00</p> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <p style="text-align:center">448 S. Hill St., Ste. 20 Los Angeles, CA 90013</p>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <p style="text-align:center">Advertising</p>	Description (If travel outside of Texas, complete Schedule T) <p style="text-align:center">campaign website</p>
Date <p style="text-align:center">3/21/14</p>	Payee name <p style="text-align:center">Nation Builder</p>	
Amount (\$) <p style="text-align:center">19.00</p> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <p style="text-align:center">448 S. Hill St., Ste. 20 Los Angeles, CA 90013</p>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <p style="text-align:center">Advertising</p>	Description (If travel outside of Texas, complete Schedule T) <p style="text-align:center">campaign website</p>
Date <p style="text-align:center">4/29/14</p>	Payee name <p style="text-align:center">Nation builder</p>	
Amount (\$) <p style="text-align:center">19.00</p> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <p style="text-align:center">448 S. Hill St., Suite 20 Los Angeles, CA 90013</p>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <p style="text-align:center">Advertising</p>	Description (If travel outside of Texas, complete Schedule T) <p style="text-align:center">campaign website</p>

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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1 Total pages Schedule G: <b>2</b>	2 FILER NAME <b>Stephen K. Wehler II</b>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <b>5/25</b>	5 Payee name <b>Nation Builders</b>
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6 Amount (\$) <b>19.00</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <b>448 S. Hill St., Ste. 20 Los Angeles, CA 90013</b>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <b>advertising</b>	(b) Description (If travel outside of Texas, complete Schedule T) <b>campaign website</b>
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Date <b>6/25</b>	Payee name <b>Nation Builders</b>
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Amount (\$) <b>19.00</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <b>448 S. Hill St., Ste 20 Los Angeles, CA 90013</b>
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Date	Payee name
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Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code
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