

CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

2 of 19

13 C / OH NAME Muncey, Keith		14 Filer ID	
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.		
	COMMITTEE TYPE	COMMITTEE NAME	
	<input type="checkbox"/> GENERAL		
	COMMITTEE ADDRESS		
	<input type="checkbox"/> SPECIFIC		
	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	\$ 2,130.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 11,950.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$ 14,001.25
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1,446.25
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 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.

Keith Muncey  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Keith Muncey, this the 24<sup>th</sup> day of February, 20 20, to certify which, witness my hand and seal of office.

Felipe Garcia  
Signature of officer administering

FELIPE GARCIA  
Printed name of officer administering

NOTARY PUBLIC  
Title of officer administering oath

SUBTOTALS - C/OH		FORM C/OH COVER SHEET PG 3 3 of 19	
18 FILER NAME Muncey, Keith		19 Filer ID	
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 10,055.00	
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 1,895.00	
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS		\$ 2,500.00	
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$ 14,001.25	
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: 2/7 Rpt: 5/19
2 FILER NAME Muncey, Keith		3 Filer ID
4 Date 02/05/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eakman, Mary	7 Amount of Contribution (\$) \$200.00
	6 Contributor address; City; State; Zip Code 911 Live Oak  San Angelo, TX 76901	
8 Principal occupation / Job title (See Instructions) Retired+		9 Employer (See Instructions) Retired
Date 01/27/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enriquez, Martin	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 305 Quail Run  Smithville, TX 78957	
Principal occupation / Job title (See Instructions) Supervisor		Employer (See Instructions) Bastrop County
Date 02/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enriquez, Martin	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code 305 Quail Run  Smithville, TX 78957	
Principal occupation / Job title (See Instructions) Supervisor		Employer (See Instructions) Bastrop County
Date 01/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guadarrama, James and Sylvia	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code 2719 West Twohig  San Angelo, TX 76901	
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self Employed
Date 02/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Healy, Matt or Leslie	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code PO Box 60711  San Angelo, TX 76906	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Healy Realtor

MONETARY POLITICAL CONTRIBUTIONS		SCHEDULE A1
The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/7 Rpt: 7/19
2 FILER NAME Muncey, Keith		3 Filer ID
4 Date 02/10/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Paul	7 Amount of Contribution (\$)  \$100.00
	6 Contributor address; City; State; Zip Code 2005 Glenwood Dr  San Angelo, TX 76901	
8 Principal occupation / Job title (See Instructions) Welder		9 Employer (See Instructions) Ethicon
Date 02/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minor, Lorry	Amount of Contribution (\$)  \$500.00
	Contributor address; City; State; Zip Code 1618 FM 381  Rowena, TX 76875	
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 02/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Dennis	Amount of Contribution (\$)  \$400.00
	Contributor address; City; State; Zip Code 7545 Plantation Court  Wall, TX 76957	
Principal occupation / Job title (See Instructions) Supervisor		Employer (See Instructions) Glazer's San Angelo
Date 02/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muncey, Karen	Amount of Contribution (\$)  \$500.00
	Contributor address; City; State; Zip Code 17 Camelia Lane  Mt. Laurel, NJ 08054	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muncey, Karen	Amount of Contribution (\$)  \$500.00
	Contributor address; City; State; Zip Code 17 Camelia Lane  Mt. Laurel, NJ 08054	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS		SCHEDULE A1
The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/7 Rpt: 9/19
2 FILER NAME Muncey, Keith		3 Filer ID
4 Date 02/17/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rangel, Raynaldo 6 Contributor address; City; State; Zip Code 216 West 23rd  San Angelo, TX 76903	7 Amount of Contribution (\$)  \$50.00
8 Principal occupation / Job title (See Instructions) Education		9 Employer (See Instructions) San Angelo ISD
Date 02/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reid, Timothy and Sally Contributor address; City; State; Zip Code 6005 Westminister Lane  San Angelo, TX 76901	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Dora Contributor address; City; State; Zip Code 2002 College Hills  San Angelo, TX 76904	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urteaga, Bernice Contributor address; City; State; Zip Code 2905 Old Eola Rd  San Angelo, TX 76905	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Coldwell Banker
Date 02/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, David Contributor address; City; State; Zip Code PO Box 2641  SAN ANGELO, TX 76902	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Superintendent		Employer (See Instructions) CISD

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS				SCHEDULE A2	
The Instruction Guide explains how to complete this form.				1 Total pages Schedule A2: Sch: 1/2 Rpt: 11/19	
2 FILER NAME Muncey, Keith				3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$	
5 Date 02/16/2020		6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrade, Robert		8 Amount of contribution (\$) \$450.00	
		7 Contributor address; City; State; Zip Code South Parkway Street  San Angelo, TX 76901		9 In-kind contribution description Hamburgers and drinks for meet and greet	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Supervisor			11 Employer (FOR NON-JUDICIAL) (See instructions) Basic Energy		
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 02/06/2020		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Trisha		Amount of contribution (\$) \$600.00	
		Contributor address; City; State; Zip Code 27 Southridge Dr.  San Angelo, TX 76904		In-kind contribution description Food and drinks for meet and greet	
				<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)					
Date 01/30/2020		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Trisha		Amount of contribution (\$) \$750.00	
		Contributor address; City; State; Zip Code 27 Southridge Dr.  San Angelo, TX 76904		In-kind contribution description Billboard advertisement	
				<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)					

LOANS		SCHEDULE E	
The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 13/19	
2 FILER NAME Muncey, Keith		3 Filer ID	
4 TOTAL OF UNITEMIZED LOANS		\$	
5 Date of loan 02/05/2020	7 Name of lender Muncey, Keith		9 Loan Amount (\$) \$2,500.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 2009 Glenwood Drive  San Angelo, TX 76901		10 Interest Rate
			11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)	
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>	
16 GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	17 Name of guarantor		19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code		
20 Principal occupation		21 Employer (See Instructions)	

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: 2/6 Rpt: 15/19	2 FILER NAME Muncey, Keith	3 Filer ID
4 Date 02/10/2020	5 Payee name Diaz, Manny	
6 Amount (\$) \$300.00	7 Payee address; City; State; Zip Code 2228 Valleyview Blvd #1211  San Angelo, TX 76901	
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 Videos for commerical
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/21/2020	Payee name FaceBook	
Amount (\$) \$4.03	Payee address; City; State; Zip Code 1 Hacker Way  Menlo Park, CA 94025	
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 FaceBook push
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/30/2020	Payee name FastSigns of San Angelo	
Amount (\$) \$2,686.10	Payee address; City; State; Zip Code 720 Knickerbocker Road  San Angelo, TX 76903	
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 Banners, 4x4 signs #1004
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		SCHEDULE F1	
<div>EXPENDITURE CATEGORIES FOR BOX 8(a)</div> <div>Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment</div> <div>Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services</div> <div>Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor</div> <div>Solicitation/Fundraising Expense Transportation Equipment &amp; Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)</div> <div>The Instruction Guide explains how to complete this form.</div>			
1 Total pages Schedule F1: Sch: 4/6 Rpt: 17/19		2 FILER NAME Muncey, Keith	
		3 Filer ID	
4 Date 02/01/2020		5 Payee name PayPal	
6 Amount (\$) \$14.30		7 Payee address; City; State; Zip Code 2211 N 1st Street  San Jose , CA 95131	
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	
		(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 service fee	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held	
Date 02/08/2020		Payee name PayPal	
Amount (\$) \$9.30		Payee address; City; State; Zip Code 2211 N 1st Street  San Jose , CA 95131	
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	
		(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 service fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held	
Date 02/10/2020		Payee name PayPal	
Amount (\$) \$3.20		Payee address; City; State; Zip Code 2211 N 1st Street  San Jose , CA 95131	
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	
		(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 service fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

<div>EXPENDITURE CATEGORIES FOR BOX 8(a)</div> <div>Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment</div> <div>Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services</div> <div>Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor</div> <div>Solicitation/Fundraising Expense Transportation Equipment &amp; Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)</div> <div>The Instruction Guide explains how to complete this form.</div>		
1 Total pages Schedule F1: Sch: 6/6 Rpt: 19/19	2 FILER NAME Muncey, Keith	3 Filer ID
4 Date 02/05/2020	5 Payee name Sinclair Broadcasting	
6 Amount (\$) \$2,550.00	7 Payee address; City; State; Zip Code 4420 N. Clack St.  Abilene, TX 79601	
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 TV commercial advertisement
9 Complete ONLY if direct expenditure to benefit C/OH		
Date 02/11/2020	Candidate/Officeholder name Payee name Sinclair Broadcasting	
Amount (\$) \$1,750.00	Office sought Office held Payee address; City; State; Zip Code 4420 N. Clack St.  Abilene, TX 79601	
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 Email and steaming commercial
Complete ONLY if direct expenditure to benefit C/OH		
Date 02/11/2020	Candidate/Officeholder name Payee name Suddenlink	
Amount (\$) \$1,522.50	Office sought Office held Payee address; City; State; Zip Code 4272 West Houston Harte Expy  San Angelo, TX 76901	
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 Commerical advertisement on cable channel
Complete ONLY if direct expenditure to benefit C/OH		