

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.	1 ACCOUNT# (Ethics Commission filers)	2 Total pages filed: <b>17 AC</b>
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3 CANDIDATE/ OFFICEHOLDER NAME	MS/MRS/MR <b>MR.</b>	FIRST <b>James</b>	MI <b>F</b>	OFFICE USE ONLY
	NICKNAME <b>Jim</b>	LAST <b>Deller</b>	SUFFIX	

Date Received  
 BY: **LAURA A. HUGHES**  
 COUNTY CLERK  
**2010 JAN 14 9:31 AM**  
 FILED FOR RECORD  
 KAUFMAN COUNTY  
 TEXAS  
 Date Hand-Delivered or Date Postmarked  
 Receipt # **1** Amount  
 Date Processed  
 Date Imaged

4 CANDIDATE/ OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE
<input type="checkbox"/> Change of Address	<b>15124 CR 4018</b>		<b>Kemp Tx</b>		<b>75143</b>

5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE <b>(903)</b>	PHONE NUMBER <b>887-9726</b>	EXTENSION
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6 CAMPAIGN TREASURER NAME	MS/MRS/MR <b>Mrs</b>	FIRST <b>MARY</b>	MI <b>A</b>
	NICKNAME <b>Jody</b>	LAST <b>Deller</b>	SUFFIX

7 CAMPAIGN TREASURER ADDRESS <small>(Residence or business)</small>	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE;	ZIP CODE
	<b>15124 CR 4018</b>		<b>Kemp Tx</b>		<b>75143</b>

8 CAMPAIGN TREASURER PHONE	AREA CODE <b>(903)</b>	PHONE NUMBER <b>887-9726</b>	EXTENSION
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9 REPORTTYPE	<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)

10 PERIOD COVERED	Month Day Year	THROUGH	Month Da Year
	<b>7-15-2009</b>		<b>12-31-2009</b>

11 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month <b>3</b>	Day <b>2</b>	Year <b>2010</b>	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> General	<input type="checkbox"/> Special

12 OFFICE	OFFICE HELD (if any) <b>Commissioner Pct 4</b>	13 OFFICESOUGHT (if known) <b>same</b>
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14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS	** Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. **	
	Name	
	Address / PO Box; Apt. / Suite #; City; State; Zip	

additional pages

GO TO PAGE 2

# CANDIDATE/ OFFICEHOLDER REPORT: SUPPORT & TOTALS


## FORM C/OH COVER SHEET PG 2

<b>15 C/OH NAME</b> Filers) <u>James F. Deller</u>	<b>16 ACCOUNT# (Ethics Commission)</b>
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<b>17 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/> additional pages	* This box is for notice of political expenditures 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	COMMITTEE NAME  COMMITTEE ADDRESS  COMMITTEE CAMPAIGN TREASURER NAME  COMMITTEE CAMPAIGN TREASURER ADDRESS

<b>18 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4965.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 6859.81
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 484.81
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE	\$

**19 AFFIDAVIT**



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.

James F. Deller  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said James F. Deller, this the 14<sup>th</sup> day of Jan., 20 10, to certify which, witness my hand and seal of office.

Angie Tijerina  
Signature of officer administering oath

Angie Tijerina  
Printed name of officer administering oath

Notary Public  
Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <b>9</b>	
2 FILER NAME <b>James F. Deller</b>		3 ACCOUNT# (Ethics Commission filers)	
4 Date <b>9/2/09</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC QD#: <b>Bill Coleman</b>	7 Amount of contribution (\$) <b>25.00</b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>18367 Hickory Cir., Kemp, TX 75143</b>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <b>Retired</b>		10 Employer (See Instructions)	
Date <b>9/3/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC QD#: <b>Carroll Johnson</b>	Amount of contribution (\$) <b>50.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>17700 Country Club Dr., Kemp, TX 75143</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <b>Retired</b>		Employer (See Instructions)	
Date <b>9/9/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC QD#: <b>Erleigh Wiley</b>	Amount of contribution (\$) <b>100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>100 Bailee Court, Forney, TX 75126</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>9/9/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC QD#: <b>Jessie Richardson</b>	Amount of contribution (\$) <b>150.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>2109 LaJolla, Kaufman, TX 75142</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <b>Retired</b>		Employer (See Instructions)	
Date <b>9/9/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC QD#: <b>Bob Deuell</b>	Amount of contribution (\$) <b>100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>P.O. Box 8609, Greenville, TX 75405-8609</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <b>STATE SENATOR</b>		Employer (See Instructions)	

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <b>9</b>	
2 FILER NAME <b>James F. Deller</b>		3 ACCOUNT# (Ethics Commission filers)	
4 Date <b>9/14/09</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC QD#: <b>D.I. Alspaw</b>	7 Amount of contribution (\$) <b>200.00</b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>1037 W. MAIN, Gun Barrel City TX 75156</b>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <b>Retired</b>		10 Employer (See Instructions)	
Date <b>9/4/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC QD#: <b>Mrs. Maxie McNew</b>	Amount of contribution (\$) <b>100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>513 E. Kempner, Mabank, TX 75147</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <b>Retired</b>		Employer (See Instructions)	
Date <b>9/3/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC QD#: <b>Fred Cochran</b>	Amount of contribution (\$) <b>100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>12152 CR 4087, Rosser, TX 75157</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <b>Retired</b>		Employer (See Instructions)	
Date <b>9/17/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC QD#: <b>Mary Blackmon</b>	Amount of contribution (\$) <b>100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>18151 CR 4072, Kemp, TX 75143</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <b>Retired</b>		Employer (See Instructions)	
Date <b>9/18/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC QD#: <b>Jennifer Spears</b>	Amount of contribution (\$) <b>100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>5327 Cedar Creek Dr. Kemp TX 75143</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <b>Business owner</b>		Employer (See Instructions)	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME <b>James F. Dellen</b>		3 ACCOUNT# (Ethics Commission filers)	
4 Date <b>9/18/09</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC QDF#: <b>Jerry Rowden</b>	7 Amount of contribution (\$) <b>250.00</b>	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code <b>2 Climbing Tree, Kaufman Tx 75142</b>	(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <b>Commissioner</b>		10 Employer (See Instructions) <b>Kaufman Co.</b>	
Date <b>10/6/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC QDF#: <b>Bob Burns</b>	Amount of contribution (\$) <b>100.00</b>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <b>18657 MARINA DR. Kemp, TX 75143</b>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <b>Retired</b>		Employer (See Instructions)	
Date <b>10/10/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC QDF#: <b>Jerry Reichart</b>	Amount of contribution (\$) <b>60.00</b>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <b>10802 FM 90, MABANK TX 75147</b>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <b>Retired</b>		Employer (See Instructions)	
Date <b>10/7/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC QDF#: <b>John Mosely</b>	Amount of contribution (\$) <b>200.00</b>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <b>201 W. Mulberry, Kaufman, TX 75142</b>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <b>Attorney</b>		Employer (See Instructions) <b>SELF</b>	
Date <b>10/8/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC QDF#: <b>John LOAR</b>	Amount of contribution (\$) <b>25.00</b>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <b>606 S. Seven Points Blvd, Seven Points TX 75143</b>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <b>Dentist</b>		Employer (See Instructions) <b>SELF</b>	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <b>9</b>	
2 FILER NAME <b>James F. Deller</b>		3 ACCOUNT# (Ethics Commission filers)	
4 Date <b>10/8/09</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC QD#: <b>Lance Gooden</b>	7 Amount of contribution (\$) <b>50.00</b>	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code <b>P.O. Box 2125, Terrell, TX 75160</b>	(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <b>Risk Management</b>		10 Employer (See Instructions)	
Date <b>10/10/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC QD#: <b>Richard Clemmo</b>	Amount of contribution (\$) <b>50.00</b>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <b>8061 CR 4029, Kemp, TX 75143</b>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <b>Police Officer</b>		Employer (See Instructions) <b>City of Kemp</b>	
Date <b>10/10/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC QD#: <b>JANAS Byrnes</b>	Amount of contribution (\$) <b>100.00</b>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <b>740 MARTIN Ln., Combine, TX 75159</b>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10/10/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC QD#: <b>Roger Bruner</b>	Amount of contribution (\$) <b>400.00</b>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <b>7201 FM 3396, Kemp, TX 75143</b>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) <b>KAUFMAN Co.</b>	
Date <b>10/10/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC QD#: <b>Pam Eggett</b>	Amount of contribution (\$) <b>50.00</b>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <b>7201 FM 1388, KAUFMAN, TX 75142</b>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <b>LOAN Specialist</b>		Employer (See Instructions) <b>GE CAPITAL</b>	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 9	
2 FILER NAME James F. Deller		3 ACCOUNT# (Ethics Commission filers)	
4 Date 10/20/09	5 Full name of contributor <input type="checkbox"/> out-of-state PAC QD#: Johnny Courtenayman	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code 6129 Quail Run, Kaufman, Tx 75142	(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) TREASURER		10 Employer (See Instructions) Kaufman County	
Date 10/20/09	Full name of contributor <input type="checkbox"/> out-of-state PAC QD#: Edward Adams	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 18639 Briarwood, Kemp, Tx 75143	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)	
Date 10/20/09	Full name of contributor <input type="checkbox"/> out-of-state PAC QD#: Geraldine Washam	Amount of contribution (\$) 20.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 7506 Northwest Hwy #1, Dallas, Tx 75225	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)	
Date 10/20/09	Full name of contributor <input type="checkbox"/> out-of-state PAC QD#: Linda Tygreff	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 505 Pacific, Terrell, Tx 75160	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Terrell ISD	
Date 10/21/09	Full name of contributor <input type="checkbox"/> out-of-state PAC QD#: John White	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 138 San Felipe, Gun Barrel City Tx 75156	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 9	
2 FILER NAME James F. Deller		3 ACCOUNT# (Ethics Commission files)	
4 Date 10/20/09	5 Full name of contributor <input type="checkbox"/> out-of-state PACQD#: Sam Aquisto	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code Kemp, TX 75143	(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions)	
Date 10/20/09	Full name of contributor <input type="checkbox"/> out-of-state PACQD#: Sammy Sloan	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 9100 FM 148, Scurry, TX 75158	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Pastor		Employer (See Instructions) Self	
Date 10/13/09	Full name of contributor <input type="checkbox"/> out-of-state PACQD#: Joyce Lewis	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 405 Johnson, Terrell, TX 75160	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/10/09	Full name of contributor <input type="checkbox"/> out-of-state PACQD#: Bruce Wood	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 314 LAUREL TRAIL, Terrell, TX 75160	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/5/09	Full name of contributor <input type="checkbox"/> out-of-state PACQD#: Katherine Parrish	Amount of contribution (\$) 10.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 10953 Buddy PARKER, Kemp, TX 75143	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages, Schedule A: 9	
2 FILER NAME James F. Deller		3 ACCOUNT# (Ethics Commission filers)	
4 Date 10/13/09	5 Full name of contributor <input type="checkbox"/> out-of-state PAC QD#: Eddie Evans	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code 10520 CR 4022 Kemp, TX 75143	(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions)	
Date 10/13/09	Full name of contributor <input type="checkbox"/> out-of-state PAC QD#: John Scarborough	Amount of contribution (\$) 150.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 1931 Euclid, DALLAS, TX 75206	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/13/09	Full name of contributor <input type="checkbox"/> out-of-state PAC QD#: Mittie Stewart	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 7791 STEWART ST. SCURRY TX 75158	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/13/09	Full name of contributor <input type="checkbox"/> out-of-state PAC QD#: Raymond Davis	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code P.O. Box 206, Kemp, TX 75143	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/12/09	Full name of contributor <input type="checkbox"/> out-of-state PAC QD#: Billy Pearson	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 14850 CR 4054, Kemp, TX 75143	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <b>9</b>	
2 FILER NAME <b>James F. Deller</b>		3 ACCOUNT# (Ethics Commission filers)	
4 Date <b>10/12/09</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PACQD#: <b>Michael Klink</b>	7 Amount of contribution (\$) <b>100.00</b>	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code <b>18425 Hickory Cir. Kemp, Tx 75143</b>		
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>10/13/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PACQD#: <b>LARRY EWING</b>	Amount of contribution (\$) <b>50.00</b>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <b>8760 S. FM 148, Scurry, Tx 75158</b>		
Principal occupation / Job title (See Instructions) <b>FIRE MARSHALL</b>		Employer (See Instructions) <b>KAUFMAN COUNTY</b>	
Date <b>10/13/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PACQD#: <b>LANNY DRMAN</b>	Amount of contribution (\$) <b>100.00</b>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <b>P.O. Box 319, Rosser, Tx 75157</b>		
Principal occupation / Job title (See Instructions) <b>NURSEMAN</b>		Employer (See Instructions) <b>SELF</b>	
Date <b>10/20/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PACQD#: <b>Taylor Golden</b>	Amount of contribution (\$) <b>100.00</b>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <b>10831 Legg Dr, Kemp, Tx 75143</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10/22/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PACQD#: <b>Paul Smith</b>	Amount of contribution (\$) <b>100.00</b>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <b>5240 Cedar Creek Dr, Kemp, Tx 75143</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: **9**

2 FILER NAME

**James F. Deller**

3 ACCOUNT# (Ethics Commission filers)

4 Date

**10/31/09**

5 Full name of contributor  out-of-state PAC QD#:

**Tracey Cloutier**

6 Contributor address; City; State; Zip Code

**1109 Lady Carol, Lewisville, TX  
75010**

7 Amount of contribution (\$)

**200.00**

(If travel outside of Texas, complete Schedule T)

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

**Attorney**

10 Employer (See Instructions)

Date

**10/17/09**

Full name of contributor  out-of-state PAC QD#:

**Pam Coeder**

Contributor address; City; State; Zip Code

**P.O. Box 43, Rosser**

Amount of contribution (\$)

**-**

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

**125.00**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**11/25/09**

Full name of contributor  out-of-state PAC QD#:

**Rick Harrison**

Contributor address; City; State; Zip Code

**P.O. Box 863, Forney, TX  
75126**

Amount of contribution (\$)

**100.00**

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC QD#:

Contributor address; City; State; Zip Code

Amount of contribution (\$)

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC QD#:

Contributor address; City; State; Zip Code

Amount of contribution (\$)

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.**

**POLITICAL EXPENDITURES  
MADE FROM PERSONAL FUNDS**

**SCHEDULE G**

The Instruction Guide explains how to complete this form.		1 Total pages <del>2</del> Schedule G 1
2 FILER NAME James F. Deller		3 ACCOUNT# (Ethics Commission filers)
4 Date 7/21/09	5 Payee name City of Combine 6 Payee address; City; State; ZipCode Combine, Tx 75159 7 Purpose of expenditure (See instructions regarding type of information required.) DONATION to VFD (If travel outside of Texas, complete Schedule T)	8 Amount (\$) 100.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 7/27/09	Payee name USPS Payee address; City; State; ZipCode Kemp, Tx 75143 Purpose of expenditure (See instructions regarding type of information required.) (if travel outside of Texas, complete Schedule T)	Amount (\$) 42.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 9/1/09	Payee name Nixon notes Payee address; City; State; ZipCode Scurry, Tx 75158 Purpose of expenditure (See instructions regarding type of information required.) Campaign Manager (if travel outside of Texas, complete Schedule T)	Amount M 200.00 <input type="checkbox"/> Reimbursement from political contributions intended
Date 9/1/09	Payee name Nixon notes Payee address; City; State; ZipCode Scurry, Tx 75158 Purpose of expenditure (See instructions regarding type of information required.) Letter to donors (If travel outside of Texas, complete Schedule T)	Amount M 211.05 Reimbursement from political contributions intended
Date 10/10/09	Payee name Dollar General Payee address; City; State; ZipCode Kemp, Tx 75143 Purpose of expenditure (See instructions regarding type of information required.) Supplies (if travel outside of Texas, complete Schedule T)	Amount (\$) 9.18 <input type="checkbox"/> Reimbursement from political contributions intended

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POLITICAL EXPENDITURES

SCHEDULE F

The instruction Guide explains how to complete this form. 1 Total pages Schedule F: 5

2 FILER NAME James F. Deller 3 ACCOUNT# (Ethics Commission filers)

4 Date <u>8/18/09</u>	5 Payee name <u>Friends of Jeb Hensarling</u> 6 Payee address; City; State; ZipCode <u>DALLAS, TX</u>	7 Amount (\$) <u>100.00</u>
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8 Purpose of payment (See instructions regarding type of information required.) <u>donation</u> (if travel outside of Texas, complete Schedule T)	9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
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Date <u>9/4/09</u>	Payee name <u>RASA</u> Payee address; City; State; ZipCode <u>Kemp, TX</u>	Amount (\$) <u>270.00</u>
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Purpose of payment (See instructions regarding type of information required.) <u>DONATION</u> (if travel outside of Texas, complete Schedule T)	-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
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Date <u>9/9/09</u>	Payee name <u>Tri-County Soccer</u> Payee address; City; State; ZipCode <u>Kemp, TX</u>	Amount <u>M</u> <u>200.00</u>
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Purpose of payment (See instructions regarding type of information required.) <u>Donation</u> (if travel outside of Texas, complete Schedule T)	-- Complete if direct expenditure to benefit C/O1-1 -- Candidate / Officeholder name Office sought Office held
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Date <u>9/22/09</u>	Payee name <u>USPS</u> Payee address; City; State; ZipCode <u>Kemp, TX</u>	Amount (\$) <u>8.80</u>
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Purpose of payment (See instructions regarding type of information required.) <u>Stamps</u> (if travel outside of Texas, complete Schedule T)	-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
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# POLITICAL EXPENDITURES

# SCHEDULE F

The instruction Guide explains how to complete this form.		1 Total Pages Schedule F: <b>5</b>
2 FILER NAME <b>James F. Deller</b>		3 ACCOUNT# (Ethics Commission filers)
4 Date <b>10/5/09</b>	5 Payee name <b>Nixon Notes</b> 6 Payee address; City; State; ZipCode <b>SCURRY, TX 75158</b>	7 Amount (\$) <b>969.39</b>
8 Purpose of payment (See instructions regarding type of information required.) <b>Campaign literature</b> (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought      Office held	
Date <b>9/24/09</b>	Payee name <b>Sams Club</b> Payee address; City; State; ZipCode <b>DALLAS, TX</b>	Amount (\$) <b>221.46</b>
Purpose of payment (See instructions regarding type of information required.) <b>Fundraiser</b> (if travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought      Office held	
Date <b>10/3/09</b>	Payee name <b>Ace Hardware</b> Payee address; City; State; ZipCode <b>MABANK, TX 75147</b>	Amount (\$) <b>19.18</b>
Purpose of payment (See instructions regarding type of information required.) <b>Supplies</b> (if travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/O1-1 ** Candidate / Officeholder name      Office sought      Office held	
Date <b>10/9/09</b>	Payee name <b>Walmart</b> Payee address; City; State; ZipCode <b>Gun Barrel City, TX 75156</b>	Amount (\$) <b>16.10</b>
Purpose of payment (See instructions regarding type of information required.) <b>Supplies</b> (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought      Office held	

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POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.		1 Total pages Schedule F: <span style="font-size: 2em; margin-left: 100px;">5</span>
2 FILER NAME <span style="font-size: 1.5em; margin-left: 20px;">James F. Deller</span>		3 ACCOUNT# (Ethics Commission filers)
4 Date <span style="font-size: 1.5em; margin-left: 10px;">10/9/09</span>	5 Payee name <span style="font-size: 1.5em; margin-left: 20px;">Home Depot</span> 6 Payee address; City; State; ZipCode <span style="font-size: 1.5em; margin-left: 100px;">Mesquite</span>	7 Amount (\$)  <span style="font-size: 1.5em; margin-left: 20px;">17.24</span>
8 Purpose of payment (See instructions regarding type of information required.)  (if travel outside of Texas, complete Schedule T)	9 <input checked="" type="checkbox"/> Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought      Office held	
Date <span style="font-size: 1.5em; margin-left: 10px;">10/9/09</span>	Payee name <span style="font-size: 1.5em; margin-left: 20px;">Sams Club</span> Payee address; City; State; ZipCode	Amount (\$)  <span style="font-size: 1.5em; margin-left: 20px;">173.00</span>
Purpose of payment (See instructions regarding type of information required.) <span style="font-size: 1.5em; margin-left: 20px;">Fundraiser Supplies</span> (if travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought      Office held	
Date <span style="font-size: 1.5em; margin-left: 10px;">10/9/09</span>	Payee name <span style="font-size: 1.5em; margin-left: 20px;">WALMART</span> Payee address; City, State; ZipCode <span style="font-size: 1.5em; margin-left: 100px;">Gun Barrel City, Tx</span>	Amount M  <span style="font-size: 1.5em; margin-left: 20px;">92.06</span>
Purpose of payment (See instructions regarding type of information required.) <span style="font-size: 1.5em; margin-left: 20px;">Supplies</span> (if travel outside of Texas, complete Schedule T)	- - Complete if direct expenditure to benefit C/O1-1 ** Candidate / Officeholder name      Office sought      Office held	
Date <span style="font-size: 1.5em; margin-left: 10px;">10/10/09</span>	Payee name <span style="font-size: 1.5em; margin-left: 20px;">LAKELAND RV</span> Payee address; City; State; ZipCode <span style="font-size: 1.5em; margin-left: 100px;">US. Hwy 175      Kemp Tx 75143</span>	Amount (\$)  <span style="font-size: 1.5em; margin-left: 20px;">240.00</span>
Purpose of payment (See instructions regarding type of information required.) <span style="font-size: 1.5em; margin-left: 20px;">Bldg Rental</span> (if travel outside of Texas, complete Schedule T)	- - Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought      Office held	

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POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.		1 Total pages Schedule F: <span style="font-size: 2em; margin-left: 100px;">5</span>
2 FILER NAME <span style="font-size: 1.5em; margin-left: 20px;">James F. Deller</span>		3 ACCOUNT# (Ethics Commission filers)
4 Date <span style="font-size: 1.5em; margin-left: 10px;">11/2/09</span>	5 Payee name <span style="font-size: 1.5em; margin-left: 10px;">Nixon Notes</span> 6 Payee address; City; State; ZipCode <span style="font-size: 1.5em; margin-left: 100px;">Scurry</span>	7 Amount (\$) <span style="font-size: 1.5em; margin-left: 10px;">633.75</span>
8 Purpose of payment (See instructions regarding type of information required.) <span style="font-size: 1.5em; margin-left: 10px;">Campaign literature</span> <small>(if travel outside of Texas, complete Schedule T)</small>		9 <small>•• Complete if direct expenditure to benefit C/OH ••</small> Candidate / Officeholder name Office sought Office held
Date <span style="font-size: 1.5em; margin-left: 10px;">11/2/09</span>	Payee name <span style="font-size: 1.5em; margin-left: 10px;">Cedar Creek Country Club</span> Payee address; City; State; ZipCode <span style="font-size: 1.5em; margin-left: 100px;">Kemp, Tx</span>	Amount (\$) <span style="font-size: 1.5em; margin-left: 10px;">882.81</span>
Purpose of payment (See instructions regarding type of information required.) <span style="font-size: 1.5em; margin-left: 10px;">Fundraiser</span> <small>(if travel outside of Texas, complete Schedule T)</small>		<small>•• Complete if direct expenditure to benefit C/OH ••</small> Candidate / Officeholder name Office sought Office held
Date <span style="font-size: 1.5em; margin-left: 10px;">12/28/09</span>	Payee name <span style="font-size: 1.5em; margin-left: 10px;">KAUFMAN COUNTY REPUBLICAN PARTY</span> Payee address; City, State, ZipCode <span style="font-size: 1.5em; margin-left: 100px;">KAUFMAN, TX 75142</span>	Amount M <span style="font-size: 1.5em; margin-left: 10px;">750<sup>00</sup></span>
Purpose of payment (See instructions regarding type of information required.) <span style="font-size: 1.5em; margin-left: 10px;">Billing fee</span> <small>(if travel outside of Texas, complete Schedule T)</small>		<small>•• Complete if direct expenditure to benefit C/O1-1 ••</small> Candidate / Officeholder name Office sought Office held
Date <span style="font-size: 1.5em; margin-left: 10px;">12/29/09</span>	Payee name <span style="font-size: 1.5em; margin-left: 10px;">R. d R. Graphics</span> Payee address; City; State; ZipCode <span style="font-size: 1.5em; margin-left: 100px;">Kemp, Tx</span>	Amount (\$) <span style="font-size: 1.5em; margin-left: 10px;">1659.09</span>
Purpose of payment (See instructions regarding type of information required.) <span style="font-size: 1.5em; margin-left: 10px;">Signs</span> <small>(if travel outside of Texas, complete Schedule T)</small>		<small>•• Complete if direct expenditure to benefit C/OH ••</small> Candidate / Officeholder name Office sought Office held

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**POLITICAL EXPENDITURES  
MADE FROM PERSONAL FUNDS**

**SCHEDULE G**

The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: 5

2 FILER NAME James F. Deller 3 ACCOUNT# (Ethics Commission filers)

4 Date <u>11/12/09</u>	5 Payee name <u>Kaufman Extension Service</u> 6 Payee address; City; State; ZipCode <u>Kaufman, Tx 75142</u> 7 Purpose of expenditure (See instructions regarding type of information required.) <u>DONATION</u> (If travel outside of Texas, complete Schedule T)	8 Amount (\$) <u>4500</u> <input type="checkbox"/> Reimbursement from political contributions intended
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Date	Payee name Payee address; City; State; ZipCode Purpose of expenditure (See instructions regarding type of information required.) (if travel outside of Texas, complete Schedule T)	Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended
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Date	Payee name Payee address; City; State; ZipCode Purpose of expenditure (See instructions regarding type of information required.) (if travel outside of Texas, complete Schedule T)	Amount M  <input type="checkbox"/> Reimbursement from political contributions intended
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Date	Payee name Payee address; City; State; ZipCode Purpose of expenditure (See instructions regarding type of information required.) (if travel outside of Texas, complete Schedule T)	Amount M  Reimbursement from political contributions intended
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Date	Payee name Payee address; City; State; ZipCode Purpose of expenditure (See instructions regarding type of information required.) (if travel outside of Texas, complete Schedule T)	Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended
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