

**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(Ethics Commission filers) | 2 Total pages filed

3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR	FIRST	MI	<b>OFFICE USE ONLY</b>	
	NICKNAME	LAST	SUFFIX		
		James	G	Date Received	
	Jim	Bigham		10/26/2015	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of address	ADDRESS / PO BOX;	APT/SUITE #;	CITY;	STATE;	ZIP CODE
	7911 Sharpview Houston TX 77036				
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked	
	(713) 766-5425				
6 CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST	MI	Receipt #	Amount
	NICKNAME	LAST	SUFFIX	Date Processed	
		Elizabeth		Date Imaged	
		Bialoski			
7 CAMPAIGN TREASURER ADDRESS (7911 Sharpview)	STREET ADDRESS (No PO Box Please);	APT/SUITE #;	CITY;	STATE;	ZIP CODE
	Houston TX 77036				
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	(713) 766-5425				
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Final report (Attach C/OH - FR) <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment(officeholder only)				
	10 PERIOD COVERED		Month	Day	Year
		9/25/2015		10/24/2015	
11 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff
		11/3/2015		<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known)		
			City Council - District J		

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

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

14 FILER NAME James G Bigham 15 Filer ID (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	COMMITTEE NAME
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

GENERAL  
 SPECIFIC

17 CONTRIBUTION TOTALS	1	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$75.00
	2	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$5,925.00
EXPENDITURE TOTALS	3	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4	TOTAL POLITICAL EXPENDITURES	\$3,105.13
CONTRIBUTION BALANCE	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$8,392.41
OUTSTANDING LOAN TOTALS	6	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$0.00

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.

James G Bigham

\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOT STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering oath

\_\_\_\_\_  
Print name of officer administering oath

\_\_\_\_\_  
Title of officer administering oath

**SUBTOTALS - COH****FORM C/OH  
COVER SHEET PG 3**

19 FILER NAME James G Bigham		20 Filer ID (Ethics Commission Filers)
21	SCHEDULE SUBTOTALS	SUBTOTAL
	NAME OF SCHEDULE	AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	5925
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	0
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	0
4.	SCHEDULE E: LOANS	0
5.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	3105.13
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	0
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	0
8.	SCHEDULE F4: EXPENDITURES MADE FROM CREDIT CARD	0
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	0
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	0
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	0
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	0

**CANDIDATE / OFFICEHOLDER REPORT:  
NOTICE FROM POLITICAL COMMITTEE(S)**

**FORM C/OH  
ADDENDUM**

C/OH NAME James G Bigham

ACCOUNT # (Ethics  
Commission filers)

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.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
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2 FILER NAME James G Bigham	3 Filer ID (Ethics Commission filers)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )				
	Rose Bolton						
	6 Contributor address;			City;	State;	Zip Code	
9/25/2015 8:04			Houston	Texas	77036		7 Amount of contributions (\$)  \$150.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )				
	Suzanne Scott						
	6 Contributor address;			City;	State;	Zip Code	
10/1/2015 8:33			Houston	Texas	77036		7 Amount of contributions (\$)  \$200.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )				
	Donna Driscoll						
	6 Contributor address;			City;	State;	Zip Code	
10/1/2015 15:04			Houston	Texas	77036		7 Amount of contributions (\$)  \$50.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# 40849 )				
	IEC Texas Gulf Coast PAC						
	6 Contributor address;			City;	State;	Zip Code	
10/1/2015 17:16			Houston	Texas	77007		7 Amount of contributions (\$)  \$2,500.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )				
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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME James G Bigham		3 Filer ID (Ethics Commission filers)	
10/5/2015 23:15	Diane Driscoll ----- 6 Contributor address; City; State; Zip Code Houston Texas 77036	7	Amount of contributions (\$) \$150.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/6/2015 16:43	Chuck McClurkin ----- 6 Contributor address; City; State; Zip Code Houston Texas 77074	7	Amount of contributions (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/10/2015 11:33	Dominic Krus ----- 6 Contributor address; City; State; Zip Code Houston Texas 77036	7	Amount of contributions (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/19/2015 7:46	Beverly wuellner ----- 6 Contributor address; City; State; Zip Code Houston Texas 77036	7	Amount of contributions (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4	Eric Barvin ----- 6 Contributor address; City; State; Zip Code Houston Texas 77036	7	Amount of contributions (\$) \$25.00

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total Pages Schedule A1:

2 FILER NAME James G Bigham

3 Filer ID (Ethics Commission filers)

10/19/2015 22:39

6 Contributor address;

City;

State;

Zip Code

Houston

Texas 77025

\$2,500.00

8 Principal occupation / Job title (See Instructions)

Apt. Owner

9 Employer (See Instructions)

Self-Employed

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

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME James G Bigham	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 9/26/2015	<b>5</b> Payee name St. Frances De Sales Gala	
<b>6</b> Amount (\$) \$100.00	<b>7</b> Payee address; City; State; Zip Code 8200 Roos Houston TX 77036	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category 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 St. Frances Benefit
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 10/6/2015	<b>5</b> Payee name GPS Inc. DBA Signelect.com	
<b>6</b> Amount (\$) \$987.79	<b>7</b> Payee address; City; State; Zip Code 1804 Afton Houston TX 77055	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category Printing 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 Yard Signs - Magnetic Signs
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 10/9/2015	<b>5</b> Payee name American Technology Consulting	
<b>6</b> Amount (\$) \$675.00	<b>7</b> Payee address; City; State; Zip Code 7713 Stoney Creek Ct Fairfax Station VA 22039	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME James G Bigham		3 Filer ID (Ethics Commission filers)
	Advertising Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Telephone Outreach
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 10/10/2015	5 Payee name Fiesta Grocery Store		
6 Amount (\$) \$46.46	7 Payee address; City; State; Zip Code Hillcroft  Houston TX 77074		
8 PURPOSE OF EXPENDITURE	(a) Category  Food/Beverage Expense	<input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Drinks-Soda for campaign event
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME James G Bigham	3 Filer ID (Ethics Commission filers)
4 Date 10/13/2015	5 Payee name NationBuilder	
6 Amount (\$) \$113.00	7 Payee address; City; State; Zip Code 520 S Grand Ave  Los Angeles CA 90071	
8 PURPOSE OF EXPENDITURE	(a) Category  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 Website
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 10/15/2015	5 Payee name FaceBook Advertising	
6 Amount (\$) \$25.03	7 Payee address; City; State; Zip Code  Menlo Park CA 94025	
8 PURPOSE OF EXPENDITURE	(a) Category  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 Advertising
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 10/19/2015	5 Payee name FaceBook Advertising	
6 Amount (\$) \$50.01	7 Payee address; City; State; Zip Code  Menlo Park CA 94025	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME James G Bigham		3 Filer ID (Ethics Commission filers)
	Advertising Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Facebook Ads
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 10/21/2015	5 Payee name Harrys Cafe		
6 Amount (\$) \$78.41	7 Payee address; City; State; Zip Code 318 Tuam  Houston TX 77002		

8 PURPOSE OF EXPENDITURE	(a) Category  Food/Beverage Expense	<input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast with supporters
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held
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**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME James G Bigham	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 10/22/2015	<b>5</b> Payee name Houston banner Company	
<b>6</b> Amount (\$) \$779.40	<b>7</b> Payee address; City; State; Zip Code 9440 Harwin Suite C  Houston Texas 77036	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Printing 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
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 10/24/2015	<b>5</b> Payee name FaceBook Advertising	
<b>6</b> Amount (\$) \$250.03	<b>7</b> Payee address; City; State; Zip Code  Menlo Park CA 94025	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  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 Advertising
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

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