



# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME **LARRY MILLICAN** 15 Filer ID (Ethics Commission Filers)

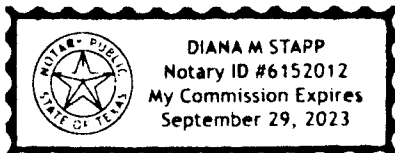
16 NOTICE FROM POLITICAL COMMITTEE(S)

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.

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC  <input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME
		N/A
	COMMITTEE ADDRESS	N/A
	COMMITTEE CAMPAIGN TREASURER NAME	N/A
	COMMITTEE CAMPAIGN TREASURER ADDRESS	N/A

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 0
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 14,351.95
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 25,000.00

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.

*[Signature]*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Larry Millican, this the 15<sup>th</sup> day of July, 2021, to certify which, witness my hand and seal of office.

Diana M. Stapp                      Diana M. Stapp                      Notary  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

# SUBTOTALS - C/OH

**FORM C/OH  
COVER SHEET PG 3**

19 FILER NAME <b>LARRY MILLICAN</b>		20 Filer ID (Ethics Commission Filers) -
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
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 type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.72

**INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER**

**SCHEDULE K**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: <b>2</b>
2 FILER NAME <b>LARRY MILLICAN</b>		3 Filer ID (Ethics Commission Filers) <b>N/A</b>
4 Date  <b>1-26-21</b>	5 Name of person from whom amount is received <b>FROST BANK</b>	8 Amount (\$)  <b>0.14</b>
	6 Address of person from whom amount is received; City; State; Zip Code <b>PO BOX 1315 HOUSTON TX 77251</b>	
7 Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer <b>Interest</b>		
Date  <b>2-23-21</b>	Name of person from whom amount is received <b>FROST BANK</b>	Amount (\$)  <b>0.11</b>
	Address of person from whom amount is received; City; State; Zip Code	
Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer <b>Interest</b>		
Date  <b>3-23-21</b>	Name of person from whom amount is received <b>FROST BANK</b>	Amount (\$)  <b>0.11</b>
	Address of person from whom amount is received; City; State; Zip Code	
Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer <b>Interest</b>		
Date  <b>4-22-21</b>	Name of person from whom amount is received <b>Frost BANK</b>	Amount (\$)  <b>0.12</b>
	Address of person from whom amount is received; City; State; Zip Code	
Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer <b>Interest</b>		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

**INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER**

**SCHEDULE K**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: <b>2</b>
2 FILER NAME <b>LARRY MILLICAN</b>		3 Filer ID (Ethics Commission Filers) <b>N/A</b>
4 Date  <b>5-24-21</b>	5 Name of person from whom amount is received <b>FROST BANK</b>	8 Amount (\$)  <b>0.13</b>
	6 Address of person from whom amount is received; City; State; Zip Code <b>PO Box 1315 HOUSTON TX 77251</b>	
7 Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer <b>Interest</b>		
Date  <b>6-22-21</b>	Name of person from whom amount is received <b>FROST BANK</b>	Amount (\$)  <b>0.11</b>
	Address of person from whom amount is received; City; State; Zip Code	
Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer <b>Interest</b>		
Date	Name of person from whom amount is received <b>FROST BANK</b>	Amount (\$)  <b>N/A</b>
	Address of person from whom amount is received; City; State; Zip Code	
Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer <b>Interest</b>		
Date	Name of person from whom amount is received <b>Frost BANK</b>	Amount (\$)  <b>N/A</b>
	Address of person from whom amount is received; City; State; Zip Code	
Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer <b>Interest</b>		

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