



# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

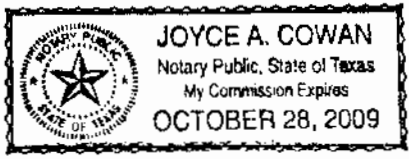
**FORM C/OH  
COVER SHEET PG 2**

<b>15 C/OH NAME</b> <small>Wayne County Commissioner Will Conkey, PG 3</small>	<b>16 ACCOUNT # (Ethics Commission Filings)</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 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. --	
	<b>COMMITTEE TYPE</b>  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	<b>COMMITTEE NAME</b>
		<b>COMMITTEE ADDRESS</b>
		<b>COMMITTEE CAMPAIGN TREASURER NAME</b>
		<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>

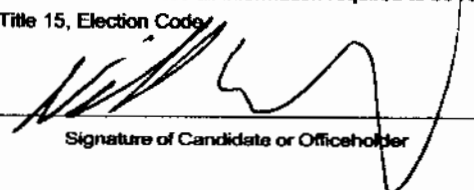
<b>18 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$7,000
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$58
	4. TOTAL POLITICAL EXPENDITURES	\$ 8,245
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$400.86
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 300.00

**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.

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

Sworn to and subscribed before me, by the said Will Conkey, this the 15 day of July, 2009, to certify which, witness my hand and seal of office.

Joyce A. Cowan  
Signature of officer administering oath

Joyce A. Cowan  
Printed name of officer administering oath

NOTARY  
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:  
2

2 FILER NAME

Will Conley

3 ACCOUNT # (Ethics Commission files)

4 Date  
2/15/2009

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Russel Hinds

6 Contributor address; City; State; Zip Code

12400 Hwy 71 W., Ste 350-245, Austin, TX 78738

7 Amount of contribution (\$)

\$1500

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)  
Business Owner

10 Employer (See Instructions)  
Hinds Management LLC

Date  
1/10/2009

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Professionals Political Action Committee

Contributor address; City; State; Zip Code

Amount of contribution (\$)

\$500

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
2/24/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

R. Leldon Sweet

Contributor address; City; State; Zip Code

3345 Plaza 10 Dr, Ste E, Beaumont, TX 77707

Amount of contribution (\$)

\$1000

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
2/25/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Douglas Barclay

Contributor address; City; State; Zip Code

PO Box 1300, Wimberley TX 78676

Amount of contribution (\$)

\$1000

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
3/4/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Douglas J. Barclay

Contributor address; City; State; Zip Code

PO Box 1300, Wimberley, TX 78676

Amount of contribution (\$)

\$1000

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

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:	
2 FILER NAME Will Conley		3 ACCOUNT # (Ethics Commission files)	
4 Date 2/24/09	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dennis C. Bearden 6 Contributor address; City; State; Zip Code 10460 W. Houston Pkwy S. #200, Houston, TX 77099	7 Amount of contribution (\$) \$1000  (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Business Owner		10 Employer (See Instructions)	
Date 3/6/09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timothy Weston Contributor address; City; State; Zip Code 6300 Colina LN, Austin, TX 78759	Amount of contribution (\$) \$500  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 2/20/09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jesse Alba Contributor address; City; State; Zip Code 7909 Richard King Trl, Austin, TX 78749	Amount of contribution (\$) 500  (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 <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		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.

# LOANS

# SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 1
2 FILER NAME Will Conley, Hays County Commissioner pct 3		3 ACCOUNT # (Ethics Commission filers)
4 TOTAL OF UNITEMIZED LOANS:    ⇨   ⇨   ⇨   ⇨   ⇨   ⇨		\$
5 Date of loan 6/17/09	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Will Conley	9 Loan Amount (\$) \$800
6 Is lender a financial institution? Y <input checked="" type="checkbox"/> N	8 Lender address;    City;    State;    Zip Code 701 Mountain Crest, Wimberley, TX 78676	10 Interest rate 0
12 Principal occupation / Job title (See Instructions)		11 Maturity date
13 Employer (See Instructions)		
14 Description of Collateral <input type="checkbox"/> none		
15 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	16 Name of guarantor ..... 17 Guarantor address;    City;    State;    Zip Code	18 Amount Guaranteed (\$)
19 Principal Occupation		20 Employer
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	Loan Amount (\$)
Is lender a financial institution? Y    N	Lender address;    City;    State;    Zip Code	Interest rate
Principal occupation / Job title (See Instructions)		Maturity date
Employer (See Instructions)		
Description of Collateral <input type="checkbox"/> none		
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor ..... Guarantor address;    City;    State;    Zip Code	Amount Guaranteed (\$)
Principal Occupation		Employer

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

# POLITICAL EXPENDITURES

# SCHEDULE F

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule F:  
(See Attached) 2 pages

**2** FILER NAME  
Will Conley, Hays County Commissioner Pct 3

**3** ACCOUNT # (Ethics Commission filers)

<b>4</b> Date	<b>5</b> Payee name	<b>7</b> Amount (\$)
	<b>6</b> Payee address; City; State; Zip Code	

<b>8</b> Purpose of payment (See instructions regarding type of information required.)  (If travel outside of Texas, complete Schedule T)	<b>9</b> -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name      Office sought      Office held
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Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	

Purpose of payment (See instructions regarding type of information required.)  (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	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	

Purpose of payment (See instructions regarding type of information required.)  (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	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	

Purpose of payment (See instructions regarding type of information required.)  (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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**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**

**Political Expenditures**

**Will Conley, Hays County Commissioner, Pct 3**

Date	Payee	City	State	Zip	Amount	Reason
7/1/2009	San Marcos Kiwanis Club	San Marcos	TX	78666	\$30.00	Contribution
6/17/2009	Will Conley	Wimberley	TX	78676	\$800.00	Loan Reimbursement
6/16/2009	Wimberley Chamber of Commerce	Wimberley	TX	78676	\$500.00	4th of July
6/3/2009	Pride of San Marcos	San Marcos	TX	78666	\$70.00	Jeneteenth Banquet
5/13/2009	LBJ Museum	San Marcos	TX	78666	\$150.00	Sponsorship
5/4/2009	Wing Society - CASA	San Marcos	TX	78666	\$25.00	Contribution
5/1/2009	Wimberley Rotary Art Gala	Wimberley	TX	78676	\$500.00	Sponsorship
3/15/2009	Rebecca Conley	San Marcos	TX	78666	\$2,000.00	Fees
3/18/2009	Jennifer Anderson	Wimberley	TX	78676	\$300.00	Reimbursement
3/12/2009	Will Conley	Wimberley	TX	78676	\$2,000.00	Loan Reimbursement
2/12/2009	Emily Ann Theater	Wimberley	TX	78676	\$200.00	Sponsorship
2/9/2009	Jerod Patterson	Austin	TX		\$380.00	Consulting
2/9/2009	Will Conley	Wimberley	TX	78676	\$1,000.00	Loan Reimbursement
2/6/2009	Ducks Unlimited	Wimberley	TX	78676	\$290.00	Sponsorship
					\$8,245.00	

**CANDIDATE / OFFICEHOLDER REPORT:  
DESIGNATION OF FINAL REPORT**

**FORM C/OH - FR**

The Instruction Guide explains how to complete this form.  
-- Complete only if "Report Type" on page 1 is marked "Final Report" --

<b>1 C/OH NAME</b> Will Conley, Hays County Commissioner, Pct 3	<b>2 ACCOUNT #</b> (Ethics Commission files)
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**3 SIGNATURE**

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

\_\_\_\_\_  
Signature of Candidate / Officeholder

**4 FILER WHO IS NOT AN OFFICEHOLDER**  
-- Complete A & B below *only* if you are not an officeholder. --

**A. CAMPAIGN FUNDS**

Check only one:

I do not have unexpended contributions or unexpended interest or income earned from political contributions.

I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

**B. ASSETS**

Check only one:

I do not retain assets purchased with political contributions or interest or other income from political contributions.

I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

\_\_\_\_\_  
Signature of Candidate

**5 OFFICEHOLDER**  
-- Complete this section *only* if you are an officeholder --

I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, at the time I cease holding office, I retain assets purchased with political contributions or interest or other income from political contributions.

\_\_\_\_\_  
Signature of Officeholder