

CODE OF FAIR CAMPAIGN PRACTICES

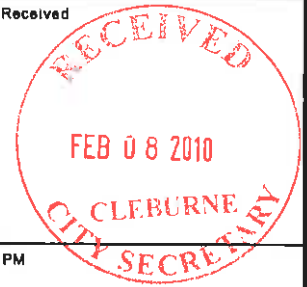
FORM CFCP COVER SHEET

Pursuant to chapter 258 of the Election Code, every candidate and political committee is encouraged to subscribe to the Code of Fair Campaign Practices. The Code may be filed with the proper filing authority upon submission of a campaign treasurer appointment form. Candidates or political committees that already have a current campaign treasurer appointment on file as of September 1, 1997, may subscribe to the Code at any time.

Subscription to the Code of Fair Campaign Practices is voluntary.

OFFICE USE ONLY

Date Received



HD / PM

Date Processed

Date Imaged

<p>1 ACCOUNT NUMBER: (Ethics Commission Filers)</p>	<p>2 TYPE OF FILER:</p> <p><input checked="" type="checkbox"/> CANDIDATE <i>If filing as a candidate, complete boxes 3 - 6 then read and sign page 2.</i></p> <p><input type="checkbox"/> POLITICAL COMMITTEE <i>If filing for a political committee, complete boxes 7 and 8 then read and sign page 2</i></p>		
<p>3 NAME OF CANDIDATE (Please type or print)</p> <p>Justin Hewlett</p>	<p>TITLE (Dr., Mr., Ms., etc.) Mr.</p> <p>NICKNAME Justin</p>	<p>FIRST Jack</p> <p>LAST Hewlett</p>	<p>MI Justin</p> <p>SUFFIX (Sr., Jr., III, etc.)</p>
<p>4 TELEPHONE NUMBER OF CANDIDATE (Please type or print)</p>	<p>AREA CODE (817)</p>	<p>PHONE NUMBER 558</p>	<p>EXTENSION 3115</p>
<p>5 ADDRESS OF CANDIDATE (Please type or print)</p>	<p>ADDRESS / PO BOX: 1107 Westhill Dr</p>	<p>APT / SUITE #: Cleburne</p>	<p>CITY, STATE, ZIP CODE TX 76033</p>
<p>6 OFFICE SOUGHT BY CANDIDATE (Please type or print)</p>	<p>Mayor of Cleburne</p>		
<p>7 NAME OF COMMITTEE (Please type or print)</p>			
<p>8 NAME OF CAMPAIGN TREASURER (Please type or print)</p>	<p>TITLE (Dr., Mr., Ms., etc.) NICKNAME</p>	<p>FIRST LAST</p>	<p>MI SUFFIX (Sr., Jr., III, etc.)</p>

GO TO PAGE 2

CODE OF FAIR CAMPAIGN PRACTICES

There are basic principles of decency, honesty, and fair play that every candidate and political committee in this state has a moral obligation to observe and uphold, in order that, after vigorously contested but fairly conducted campaigns, our citizens may exercise their constitutional rights to a free and untrammelled choice and the will of the people may be fully and clearly expressed on the issues.

THEREFORE:

(1) I will conduct the campaign openly and publicly and limit attacks on my opponent to legitimate challenges to my opponent's record and stated positions on issues.

(2) I will not use or permit the use of character defamation, whispering campaigns, libel, slander, or scurrilous attacks on any candidate or the candidate's personal or family life.

(3) I will not use or permit any appeal to negative prejudice based on race, sex, religion, or national origin.

(4) I will not use campaign material of any sort that misrepresents, distorts, or otherwise falsifies the facts, nor will I use malicious or unfounded accusations that aim at creating or exploiting doubts, without justification, as to the personal integrity or patriotism of my opponent.

(5) I will not undertake or condone any dishonest or unethical practice that tends to corrupt or undermine our system of free elections or that hampers or prevents the full and free expression of the will of the voters, including any activity aimed at intimidating voters or discouraging them from voting.

(6) I will defend and uphold the right of every qualified voter to full and equal participation in the electoral process, and will not engage in any activity aimed at intimidating voters or discouraging them from voting.

(7) I will immediately and publicly repudiate methods and tactics that may come from others that I have pledged not to use or condone. I shall take firm action against any subordinate who violates any provision of this code or the laws governing elections.

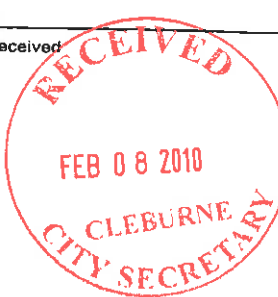
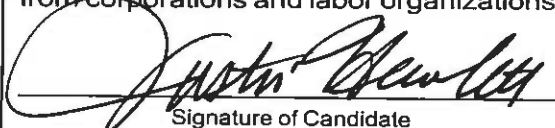
I, the undersigned, candidate for election to public office in the State of Texas or campaign treasurer of a political committee, hereby voluntarily endorse, subscribe to, and solemnly pledge myself to conduct the campaign in accordance with the above principles and practices.

2/7/2010
Date


Signature

APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA
PG 1

See CTA Instruction Guide for detailed instructions.						1	Total pages filed:	
2	CANDIDATE NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY			
		NICKNAME	LAST	SUFFIX	Acct #	Date Received		
		Me. Jack Justin						
		Justin Hewlett						
3	CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX:	APT / SUITE #:	CITY:	STATE:	ZIP CODE		
		1107 Westhill Dr. Cleburne Tx 76033						
4	CANDIDATE PHONE	AREA CODE	PHONE NUMBER	EXTENSION	HD/PM			
		(817) 817	558-3115 Home 645-1571 WK		Date Processed			
5	OFFICE HELD (if any)						Date Imaged	
6	OFFICE SOUGHT (if known)	Mayor of Cleburne						
7	CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST	MI	NICKNAME	LAST	SUFFIX	
		Mrs Sydney B. Hewlett						
8	CAMPAIGN TREASURER STREET ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE):	APT / SUITE #:	CITY:	STATE:	ZIP CODE		
		1107 Westhill Dr. Cleburne Tx 76033						
9	CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
		(817)	882 - 7629					
10	CANDIDATE SIGNATURE	<p>I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code.</p> <p>I am aware of my responsibility to file timely reports as required by title 15 of the Election Code.</p> <p>I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.</p>						
		 Signature of Candidate				2/7/10 Date Signed		
GO TO PAGE 2								

CANDIDATE MODIFIED REPORTING DECLARATION

FORM CTA

PG 2

11 CANDIDATE NAME	
12 MODIFIED REPORTING DECLARATION	<p style="text-align: center;">COMPLETE THIS SECTION ONLY IF YOU ARE CHOOSING MODIFIED REPORTING.</p> <p style="text-align: center;"> ** This declaration must be filed no later than the 30th day before the first election to which the declaration applies. ** </p> <p style="text-align: center;"> ** The modified reporting option is valid for one election cycle only. ** <small>(An election cycle includes a primary election, a general election, and any related runoffs.)</small> </p> <p style="text-align: center;"> ** Candidates for the office of state chair of a political party and candidates for county chair of a political party may <u>NOT</u> choose modified reporting. ** </p> <p> I do not intend to accept more than \$500 in political contributions or make more than \$500 in political expenditures (excluding filing fees) in connection with any future election within the election cycle. I understand that if either one of those limits is exceeded, I will be required to file pre-election reports and, if necessary, a runoff report. </p> <p style="text-align: center;"> _____ Year of election(s) or election cycle to which declaration applies </p> <p style="text-align: center;"> _____ Signature of Candidate </p>

This appointment is effective on the date it is filed with the appropriate filing authority.

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:

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR **Mr** FIRST **Jack** MI **Justin**
NICKNAME **Justin** LAST **Hewlett** SUFFIX

OFFICE USE ONLY

Date Received

APR 08 2010

CLEBURNE
CLERK

Date Hand-delivered or Date Postmarked

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS
 Change of Address

ADDRESS / PO BOX, APT / SUITE #, CITY, STATE, ZIP CODE
1107 Westhill Dr Cleburne Tx 76033

Receipt #

Amount

Date Processed

Date Imaged

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE PHONE NUMBER EXTENSION
(817) 558-3115

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR **MRS** FIRST **Sydney** MI **B.**
NICKNAME LAST SUFFIX
Hewlett

7 CAMPAIGN
TREASURER
ADDRESS
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #, CITY, STATE, ZIP CODE
1107 Westhill Dr Cleburne Tx 76033

8 CAMPAIGN
TREASURER
PHONE

AREA CODE PHONE NUMBER EXTENSION
(817) 558-3115

9 REPORT TYPE

January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only)
 July 15 8th day before election Exceeded \$500 limit Final report (Attach C/OH - FR)

10 PERIOD
COVERED

Month Day Year THROUGH Month Day Year
2 / 8 / 2010 THROUGH 4 / 8 / 2010

11 ELECTION

ELECTION DATE Month Day Year ELECTION TYPE
5 / 8 / 10 Primary Runoff General Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

MAYOR

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 Code

additional pages

GO TO PAGE 2

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

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

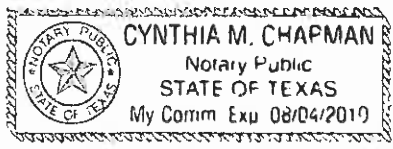
15 C/OH NAME Jack Justin Hewlett 16 ACCOUNT # (Ethics Commission Filers)

17 NOTICE FROM POLITICAL COMMITTEE(S)
 .. 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. ..

COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> additional pages	COMMITTEE NAME
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

18 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 450.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 650.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ -0-
	4. TOTAL POLITICAL EXPENDITURES	\$ 2794.75
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ -0-
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1700.00

19 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 75, Election Code



Justin Hewlett
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Justin Hewlett this the 8th day of April, 2010, to certify which, witness my hand and seal of office.

Cynthia M Chapman Cynthia M Chapman Texas Notary
 Signature of officer administering oath Printed name of officer administering oath 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:
1

2 FILER NAME
Jack Justin Hewlett

3 ACCOUNT # (Ethics Commission filers)

4 Date
2/20/10

5 Full name of contributor out-of-state PAC (ID#:
Steven F. Kleiber

7 Amount of contribution (\$)
200.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
1188 W. Pioneer Pkwy Arlington, TX 76013

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
accountant

10 Employer (See Instructions)
Kleiber & Associates

Date
3/20/10

Full name of contributor out-of-state PAC (ID#:
Jimmy F. Campbell
Contributor address; City; State; Zip Code
Rt 2. Cleburne TX 76031

Amount of contribution (\$)
125.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
banker

Employer (See Instructions)
Community Bank

Date
3/20/10

Full name of contributor out-of-state PAC (ID#:
Cathy Campbell
Contributor address; City; State; Zip Code
Rt 2 Cleburne TX 76031

Amount of contribution (\$)
125.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Housewife

Employer (See Instructions)

Date
4/0/10

Full name of contributor out-of-state PAC (ID#:
Billy Raten
Contributor address; City; State; Zip Code
Box 217 Venus TX 76084

Amount of contribution (\$)
200.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
FARMING

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#:
Contributor address; City; State; Zip Code

Amount of contribution (\$)

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.

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

1

2 FILER NAME

JACK Justin Hewlett

3 ACCOUNT # (Ethics Commission filers)

4 TOTAL OF UNITEMIZED LOANS: ⇒ ⇒ ⇒ ⇒ ⇒ ⇒

\$

5 Date of loan

2/9/10

7 Name of lender

Justin Hewlett

out-of-state PAC (ID# _____)

9 Loan Amount (\$)

500.00

6 Is lender a financial institution?

Y

(N)

8 Lender address; City; State; Zip Code

1107 Westhill Cleburne TX 76033

10 Interest rate

- 0 -

11 Maturity date

5/31/10

12 Principal occupation / Job title (See Instructions)

Computer Technician

13 Employer (See Instructions)

Hewlett Office Systems, LLC

14 Description of Collateral

none

15 GUARANTOR INFORMATION

16 Name of guarantor

18 Amount Guaranteed (\$)

not applicable

17 Guarantor address; City; State; Zip Code

19 Principal Occupation

20 Employer

Date of loan

2/18/10

Name of lender

Justin Hewlett

out-of-state PAC (ID# _____)

Loan Amount (\$)

1200.00

Is lender a financial institution?

Y

N

Lender address; City; State; Zip Code

1107 Westhill Cleburne TX 76033

Interest rate

- 0 -

Maturity date

5/31/10

Principal occupation / Job title (See Instructions)

Computer Technician

Employer (See Instructions)

Hewlett Office Systems

Description of Collateral

none

GUARANTOR INFORMATION

Name of guarantor

Amount Guaranteed (\$)

not applicable

Guarantor address; City; State; Zip Code

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: **1**

2 FILER NAME

Jack Justin Hewlett

3 ACCOUNT # (Ethics Commission files)

4 Date

2/18/10

5 Payee name

Downtown Cleburne Association

7 Amount (\$)

\$ 350.00

6 Payee address; City; State; Zip Code

211 E. Henderson Cleburne Tx 76031

8 Purpose of payment (See instructions regarding type of information required.)

Sponsorship of Casino Night

(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

2/20/10

Payee name

Sagentic Web Design

Amount (\$)

\$ 600.00

Payee address; City; State; Zip Code

6 E. Chambers Cleburne Tx 76031

Purpose of payment (See instructions regarding type of information required.)

Web site

(If travel outside of Texas, complete Schedule T)

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name Office sought Office held

Date

2/24/10

Payee name

Designer Graphics

Amount (\$)

\$ 1844.75

Payee address; City; State; Zip Code

12404 Hwy 155 S. Tyler Tx 75703

Purpose of payment (See instructions regarding type of information required.)

yard signs

(If travel outside of Texas, complete Schedule T)

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name Office sought Office held

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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:

3

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR FIRST MI
Mr Jack Justin
NICKNAME LAST SUFFIX
Justin Hewlett

OFFICE USE ONLY

Date Received

MAY 03 2010

Date Hand Delivered or Date Postmarked

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
 Change of Address

ADDRESS / PO BOX, APT / SUITE #, CITY, STATE, ZIP CODE
1107 Westhill Dr Cleburne TX 76033

Receipt #

Amount

Date Processed

Date Imaged

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION
(817) 558-3115

6 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI
Mrs Sydney B.
NICKNAME LAST SUFFIX
Hewlett

7 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE), APT / SUITE #, CITY, STATE, ZIP CODE
1107 Westhill Dr Cleburne TX 76033

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
(817) 558-3115

9 REPORT TYPE

January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only)
 July 15 8th day before election Exceeded \$500 limit Final report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year THROUGH Month Day Year
4 / 9 / 2010 THROUGH 4 / 30 / 2010

11 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year
5 / 8 / 10
 Primary Runoff General Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Mayor

14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS
 additional pages

.. 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 Code

GO TO PAGE 2

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

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

15 C/OH NAME Jack Justin Hewlett 16 ACCOUNT # (Ethics Commission Filer)

17 NOTICE FROM POLITICAL COMMITTEE(S)

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. **

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

18 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 100.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 200.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 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	\$ -0-
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1700.00

19 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



Justin Hewlett
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Justin Hewlett, this the 3rd day of May, 2010, to certify which, witness my hand and seal of office.

Cynthia M Chapman Cynthia M Chapman Texas Notary Public
Signature of officer administering oath Printed name of officer administering oath 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:

1

2 FILER NAME

Jack Justin Hewlett

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/15/2010

5 Full name of contributor out-of-state PAC (ID# _____)

C.W. White

6 Contributor address; City; State; Zip Code

1223 Sunny Place Cleburne Tx 76033

7 Amount of contribution (\$)

200.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Retired

10 Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID# _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID# _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID# _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID# _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

(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.

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:

5

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR FIRST MI
Mr Jack Justin
NICKNAME LAST SUFFIX
Justin Hewlett

OFFICE USE ONLY

Date Received

JUL 15 2010

Date Hand-Delivered or Date Postmarked

Receipt #

Amount

Date Processed

Date Imaged

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX APT / SUITE # CITY STATE ZIP CODE
1107 Westhill Dr Cleburne Tx 76033

Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE PHONE NUMBER EXTENSION
(817) 558-3115

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR FIRST MI
Mrs Sydney B
NICKNAME LAST SUFFIX
Hewlett

7 CAMPAIGN
TREASURER
ADDRESS
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE) APT / SUITE # CITY STATE ZIP CODE
1107 Westhill Dr. Cleburne Tx 76033

8 CAMPAIGN
TREASURER
PHONE

AREA CODE PHONE NUMBER EXTENSION
(817) 558-3115

9 REPORT TYPE

January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only)
 July 15 8th day before election Exceeded \$500 limit Final report (Attach C/OH - FR)

10 PERIOD
COVERED

Month Day Year Month Day Year
4 / 30 / 2010 THROUGH 7 / 15 / 2010

11 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year
5 / 8 / 10 Primary Runoff General Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Mayor

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 Code

additional pages

GO TO PAGE 2

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

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

15 C/OH NAME

Jack Justin Hewlett

16 ACCOUNT # (Ethics Commission Filers)

17 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. --

COMMITTEE TYPE

GENERAL

SPECIFIC

additional pages

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

18 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)

\$ 500.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 1562.17

CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ 147.87

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 2600.00

19 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

Justin Hewlett
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said *Justin Hewlett* this the *15* day of *July*, 20 *10*, to certify which witness my hand and seal of office.

Cynthia M Chapman
Signature of officer administering oath

Cynthia M Chapman
Printed name of officer administering oath

Notary-Texas
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:

1

2 FILER NAME

JACK Justin Hewlett

3 ACCOUNT # (Ethics Commission filers)

4 Date

5/15/10

5 Full name of contributor out-of-state PAC (ID# _____)

Steven KLIEBER

7 Amount of contribution (\$)

500.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

1188 W. Pioneer Pkwy Arlington, TX 76013

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID# _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID# _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID# _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID# _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

(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.

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E.

2 FILER NAME

JACK Justin Hewlett

3 ACCOUNT # (Ethics Commission filers)

4 TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨

\$

5 Date of loan

5/14/10

7 Name of lender

Justin Hewlett

out-of-state PAC (ID# _____)

9 Loan Amount (\$)

600⁰⁰

6 Is lender a financial institution?

Y N

8 Lender address; City; State; Zip Code

1107 Westhill Cleburne Tx 76037

10 Interest rate

0

11 Maturity date

12/31/10

12 Principal occupation / Job title (See Instructions)

Computer Technician

13 Employer (See Instructions)

Hewlett Office Systems LLC

14 Description of Collateral

none

15 GUARANTOR INFORMATION

not applicable

16 Name of guarantor

18 Amount Guaranteed (\$)

17 Guarantor address; City; State; Zip Code

19 Principal Occupation

20 Employer

Date of loan

7/1/10

Name of lender

Justin Hewlett

out-of-state PAC (ID# _____)

Loan Amount (\$)

300⁰⁰

Is lender a financial institution?

Y N

Lender address; City; State; Zip Code

1107 Westhill Dr Cleburne Tx 76037

Interest rate

-0-

Maturity date

12/31/10

Principal occupation / Job title (See Instructions)

Computer Tech

Employer (See Instructions)

Hewlett Office Systems

Description of Collateral

none

GUARANTOR INFORMATION

not applicable

Name of guarantor

Amount Guaranteed (\$)

Guarantor address; City; State; Zip Code

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.

2 FILER NAME

Jack Justin Hewlett

3 ACCOUNT # (Ethics Commission filers)

4 Date

5/13/10

5 Payee name

Designer Graphics

7 Amount (\$)

1073.92

6 Payee address; City; State; Zip Code

12404 Hwy 155 S. Tyler TX 75703

8 Purpose of payment (See instructions regarding type of information required.)

Signs

(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

6/30/10

Payee name

Lone Star News Group

Amount (\$)

488.25

Payee address; City; State; Zip Code

512 Pala Pinta Weatherford TX 76086

Purpose of payment (See instructions regarding type of information required.)

Ads in Paper

(If travel outside of Texas, complete Schedule T)

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name Office sought Office held

Date

Payee name

Payee address; City; State; Zip Code

Amount (\$)

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

Date

Payee name

Payee address; City; State; Zip Code

Amount (\$)

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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:

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR FIRST MI
Mr. Jack Justin
NICKNAME LAST SUFFIX
Justin Hewlett

OFFICE USE ONLY

Date Received
JAN 31 2011
CITY CLERK

Date Hand-delivered or Postmarked

Receipt # Amount

Date Processed

Date Imaged

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
1107 Westhill Dr. Cleburne Tx 76033

change of address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE PHONE NUMBER EXTENSION
(817) 558-3115

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR FIRST MI
Mrs Sydney B.
NICKNAME LAST SUFFIX
Hewlett

7 CAMPAIGN
TREASURER
ADDRESS
(residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
1107 Westhill Dr Cleburne Tx 76033

8 CAMPAIGN
TREASURER
PHONE

AREA CODE PHONE NUMBER EXTENSION
(817) 558-3115

9 REPORT TYPE

January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only)
 July 15 8th day before election Exceeded \$500 limit Final report (Attach C/OH - FR)

10 PERIOD
COVERED

Month Day Year THROUGH Month Day Year
7 / 15 / 2010 THROUGH 1 / 15 / 2011

11 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year Primary Runoff General Special
5 / 8 / 10

12 OFFICE

OFFICE HELD (if any)
Mayor

13 OFFICE SOUGHT (if known)

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 Code

additional pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

15 C/OH NAME

Jack Justin Hewlett

16 ACCOUNT # (Ethics Commission Filers)

17 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.

COMMITTEE TYPE

GENERAL

SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

18 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 \$50 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

\$ *147.87*

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ *2600.00*

19 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.



Justin Hewlett
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said *Justin Hewlett*, this the *31* day of *January*, 20 *11*, to certify which, witness my hand and seal of office.

Cynthia M Chapman
Signature of officer administering oath

Cynthia M Chapman
Printed name of officer administering oath

Notary-Texas
Title of officer administering oath