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May 1, 2020

Federal Election Commission
Office of Complaints Examination and Legal Admin.
Attn: Kathryn Ross, Paralegal
Via email: cela@fec.gov

RE: MUR 7709

Dear Ms. Ross:

I write on behalf of Chad Norvell in his capacity as a candidate for Fort Bend County, Texas Constable, Pct. 3, and his associated campaign account, "Supporters of Chad Norvell," identified as respondents to MUR 7709.

Chad Norvell is a longtime friend, co-worker, and supporter of Troy E. Nehls. Mr. Norvell is also currently a candidate for Constable in Fort Bend County. He received a contribution of \$1,000 from Troy Nehls' state campaign (received on December 11, 2019), which he properly reported on his state campaign finance report (see **Exhibit 1**). This is a contribution to Norvell's campaign from Troy Nehls and had nothing to do with his role as treasurer for Nehls for Congress. Norvell is serving as treasurer of Nehls for Congress as a volunteer because he supports Troy Nehls' campaign for Congress and wanted to help out. In fact, Norvell has served as treasurer for Troy Nehls' state campaign account for years, at least for the eight years that Nehls has served as Sheriff. The attached **Exhibit 2** is a screenshot of the list of publicly-available campaign finance reports filed by candidate Troy E. Nehls on the Fort Bend County website, which reflect that Norvell has been listed as treasurer for Troy Nehls' state campaign for as far back as the website goes. Troy Nehls and Trever Nehls both support Norvell's campaign, and, in fact, Trever Nehls also contributed \$1,000 in December 2019.

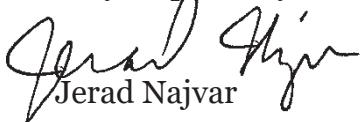
The complainant appears to be confused as to why Troy Nehls' state campaign finance report (Exhibit D to the Complaint) reports his contribution as being made to "Supporters of Chad Norvell." It is common for Texas state and local candidates to refer to their campaigns or campaign accounts as "Friends of" or "Supporters of" the candidate. This is a means of indicating that an advertisement is made by, or a contribution is made to, a campaign fund. Norvell follows this convention, and frequently refers to his campaign as "Supporters of Chad Norvell" or "Chad Norvell for Constable." Nonetheless, for official filing purposes, nonfederal candidates in Texas are required by Texas law to appoint a campaign treasurer and file reports of campaign activity *under their own name*, as a candidate (or officeholder, as applicable). Tex. Elec. Code §§ 252.001, 254.063, 254.064. Nonfederal candidates in Texas must file these

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reports under their own name regardless of whether they establish any separate political committees. *See Tex. Ethics Com'n, Campaign Finance Guide for Candidates and Officeholders Who File With Local Filing Authorities* (rev. Jan. 1, 2020) at 3 ("Often a candidate or officeholder chooses to establish a specific-purpose political committee. A political committee is subject to *separate* filing requirements. Establishing a specific-purpose political committee does not relieve a candidate or officeholder of the obligation to file as an individual.").¹ Therefore, the complaint is correct—that there is no separate entity registered as "Supporters of Chad Norvell"—but that is because all the information is reported, as required under Texas law, in Norvell's reports as the candidate. *See Exhibit 1* (Norvell's January 15, 2020 "Candidate/Officeholder Campaign Finance Report" form).

Please let me know if I can be of further assistance.

Very respectfully,



Jerad Najvar

Encl.

¹ https://www.ethics.state.tx.us/data/resources/guides/coh_local_guide.pdf (last visited Apr. 17, 2020).

**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: <i>7</i>	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <i>MR</i>	FIRST <i>CHAD</i>	MI <i>G.</i>	OFFICE USE ONLY		
	NICKNAME	LAST <i>Novel</i>	SUFFIX	Date Received		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE <i>28010 WIND HAWK DR Katy, TX 77494</i>			REC'D-BBM-80 JAN 15 2020		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE <i>(81)</i>	PHONE NUMBER <i>665-0563</i>	EXTENSION	FORT BEND COUNTY ELECTIONS Date Hand-delivered or Date Postmarked		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <i></i>	FIRST <i>MANDI</i>	MI <i></i>	Receipt # <input type="text"/> Amount \$ <input type="text"/>		
	NICKNAME	LAST <i>Bronsekk</i>	SUFFIX	Date Processed		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE <i>3010 RIVERBEND DR ROSENBERG, TX 77471</i>					
8 CAMPAIGN TREASURER PHONE	AREA CODE <i>(81)</i>	PHONE NUMBER <i>282-7476</i>	EXTENSION			
9 REPORT TYPE	<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 <i>12</i>	Day <i>9</i>	Year <i>2019</i>	Month <i>12</i>	Day <i>31</i>	Year <i>2019</i>
11 ELECTION	ELECTION DATE <i>3/13/20</i>		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special			
12 OFFICE	OFFICE HELD (if any)			13 OFFICE SOUGHT (if known) <i>FORT BEND COUNTY PCT. 3 CONSTABLE</i>		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME	<i>Norvell, Chad</i>		15 Filer ID (Ethics Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S)	<p>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.</p>		
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED	\$ —	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <i>5,300 02</i>	
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ —	
	4. TOTAL POLITICAL EXPENDITURES	\$ <i>3,843 88</i>	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <i>1,617 18</i>	
	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ —	
18 AFFIDAVIT	<p>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.</p> <p><i>Chad Norvell</i></p> <p>Signature of Candidate or Officeholder</p>		
<p>AFFIX NOTARY STAMP / SEAL ABOVE</p> <p>Sworn to and subscribed before me, by the said <u>Chad Norvell</u>, this the <u>14th</u> day of <u>January</u>, 20<u>20</u><u>20</u>, to certify which, witness my hand and seal of office.</p> <p><i>Suzie Lynn Becker</i></p> <p>Signature of officer administering oath</p> <p><i>Suzie Lynn Becker</i></p> <p>Printed name of officer administering oath</p> <p><i>Admin Asst</i></p> <p>Title of officer administering oath</p>			

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

19 FILER NAME	20 Filer ID (Ethics Commission Filers)	
Norvell, Chad		
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT	
1. <input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 5,300.00	
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	\$ 2,843.88	
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	\$ 1,000.00	
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 type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2

2 FILER NAME

Norvell, Chad

3 Filer ID (Ethics Commission Filers)

4 Date

12/11/19

5 Full name of contributor

TREVOR J. NEHLS

 out-of-state PAC (ID#:

6 Contributor address:

City: State: Zip Code

3934 SCENIC ORCHARD RICHMOND, TX 77467

7 Amount of contribution (\$)

\$1,000.00

8 Principal occupation / Job title (See Instructions)

CONSTABLE

9 Employer (See Instructions)

FORT BEND COUNTY

Date

12/11/19

Full name of contributor

TROY E. NEHLS

 out-of-state PAC (ID#:

Contributor address:

City: State: Zip Code

Amount of contribution (\$)

\$1,000.00

4002 SCENIC ORCHARD RICHMOND, TX 77467

Principal occupation / Job title (See Instructions)

SHERIFF

Employer (See Instructions)

FORT BEND COUNTY

Date

12/19/19

Full name of contributor

EUGENE DEWVEALL

 out-of-state PAC (ID#:

Contributor address:

City: State: Zip Code

Amount of contribution (\$)

\$100.00

17226 MESA SPRINGS CT. MASTISON, TX 77095

Principal occupation / Job title (See Instructions)

DEPUTY

Employer (See Instructions)

FORT BEND COUNTY

Date

12/20/19

Full name of contributor

JULIE BLOOMFIELD

 out-of-state PAC (ID#:

Contributor address:

City: State: Zip Code

Amount of contribution (\$)

\$200.00

14506 LAKESIDE VIEW WAY Cypress, TX 77429

Principal occupation / Job title (See Instructions)

DEPUTY

Employer (See Instructions)

FORT BEND COUNTY

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

Norvell Response

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: <i>2</i>
2 FILER NAME <i>Norvell, CHAD</i>				3 Filer ID (Ethics Commission Filers)
4 Date <i>12/21/19</i>	5 Full name of contributor <i>Thomas GoodFellow</i>	<input type="checkbox"/> out-of-state PAC (ID#: _____)		7 Amount of contribution (\$) <i>\$500.00</i>
6 Contributor address; <i>PO Box 2361 SPRINGS, TX 77383</i>		City;	State;	Zip Code
8 Principal occupation / Job title (See Instructions) <i>DEPUTY</i>		9 Employer (See Instructions) <i>FORT BEND COUNTY</i>		
Date <i>12/21/19</i>	Full name of contributor <i>JAMES MONEY</i>	<input type="checkbox"/> out-of-state PAC (ID#: _____)		Amount of contribution (\$) <i>\$2,500.00</i>
Contributor address; <i>404 INSURANCE RD RICHMOND, TX 77469</i>		City;	State;	Zip Code
Principal occupation / Job title (See Instructions) <i>RETIRED</i>		Employer (See Instructions)		
Date	Full name of contributor	<input type="checkbox"/> out-of-state PAC (ID#: _____)		Amount of contribution (\$)
Contributor address;		City;	State;	Zip Code
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date	Full name of contributor	<input type="checkbox"/> out-of-state PAC (ID#: _____)		Amount of contribution (\$)
Contributor address;		City;	State;	Zip Code
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

Norvell Response

**POLITICAL EXPENDITURES MADE
FROM POLITICAL CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Monvell, CHAD</i>	3 Filer ID (Ethics Commission Filers)	
4 Date <i>12/30/19</i>	5 Payee name <i>ALLIED SIGNS</i>		
6 Amount (\$) <i>\$2578.28</i>	7 Payee address: <i>6820 Harwin</i>	City: <i>HOUSTON</i> State: <i>TX</i> Zip Code <i>77036</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <i>CAMPAGN SIGNS</i>	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date <i>12/30/19</i>	Payee name <i>LOWE'S</i>		
Amount (\$) <i>\$12130</i>	Payee address: <i>9505 SPRING GREEN</i>	City: <i>Katy</i> State: <i>TX</i> Zip Code <i>77494</i>	
 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <i>T-POSTS, SIGN SUPPLIES</i>	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date <i>12/31/19</i>	Payee name <i>FACEBOOK</i>		
Amount (\$) <i>\$14430</i>	Payee address: <i>1 FACEBOOK WAY MENLO PARK, CA 94025</i>	City:	State: Zip Code
 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <i>CAMPAGN PAGE PROMOTION</i>	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
1	Norvell, CHAD		
4 Date	5 Payee name		
12/9/19	FORT BEND COUNTY REPUBLICAN PARTY		
6 Amount (\$) \$1,000.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address: PO Box 461	City: SUGAR LAND TX Zip Code 77487 State:	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) FEES	(b) Description FILING FEE	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9	Candidate / Officeholder name		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Office sought	Office held
Date	Payee name		
Amount (\$)	Payee address:	City:	State: Zip Code
<input type="checkbox"/> Reimbursement from political contributions intended			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought
	Office held		
Date	Payee name		
Amount (\$)	Payee address:	City:	State: Zip Code
<input type="checkbox"/> Reimbursement from political contributions intended			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought
	Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Norvell Response

Forms provided by Texas Ethics Commission

EXHIBIT 1

www.ethics.state.tx.us

Revised 9/26/2019

Category:

Office:

Candidate: Troy E. Nehls

Treasurer:

File Date (From): (to):

Order by: Office Candidate File Date

5 Files found

Category	Office	Candidate	Treasurer	File Date
Contributions and Expenditures - Semi Annual	Sheriff	Nehls, Troy E.	Chad Norvell	Friday, January 10, 2020 
Contributions and Expenditures - Semi Annual	Sheriff	Nehls, Troy E.	Chad Norvell	Friday, July 12, 2019 
Contributions and Expenditures - Semi Annual	Sheriff	Nehls, Troy E.	Chad Norvell	Tuesday, January 15, 2019 
Contributions and Expenditures - Semi Annual	Sheriff	Nehls, Troy E.	Chad Norvell	Monday, July 16, 2018 
Contributions and Expenditures - Semi Annual	Sheriff	Nehls, Troy E.	Chad Norvell	Tuesday, January 16, 2018 