SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC COVER SHEET PG 1

The SPAC Instructio	n Guide explains how to com	plete this form	1 Filer ID (Ethics Commission filers)	2 Total pages filed:	
	1				
3 COMMITTEE NAME				E USE ONLY	
	No on Houston Prop 1			Date Received	
4 COMMITTEE	ADDRESS / PO BOX	APT/SUITE # CITY	STATE ZIP CODE	10/26/2015	
ADDRESS	PO Box 431158				
				Date Hand-delivered	or Date Postmarked
	Houston TX 77243				
Change of address					
5 CAMPAIGN	MS/MRS/MR	FIRST	МІ	Receipt #	Amount
TREASURER		Josh		Date Processed	
NAME	NICKNAME	LAST	SUFFIX	Date Imaged	
		Flynn			
6 CAMPAIGN	STREET ADDRESS (NO PO BOX PLE	ASE);	APT/SUITE #;	CITY; STATE;	ZIP CODE
TREASURER'S	2751 Durban Dr				
STREET ADDRESS					
Residence	Houston TX 77043				
7 CAMPAIGN	STREET OR PO BOX;	APT/SUITE #;	CITY;	STATE;	ZIP CODE
TREASURER	PO Box 431158		Houston	ТХ	77243
MAILING ADDRESS					
Change of Address					
8 CAMPAIGN	AREA CODE	PHONE #	EXTENSION		
TREASURER PHONE	(281)	597-8868			
9 REPORT TYPE					
	January 15	30th day before e	election	Exceeded \$500 limit	
		-	_		
	July 15	X 8th day before ele	ection	Dissolution (attach PAC-DR)
		Runoff	Г	10th day after campa	ign treasurer termination
10 PERIOD	Month Day	Year		Month Day	Year
COVERED	9/25/2015	т	HROUGH	10/24/2	015
11 ELECTION	ELECTION DATE				
	Month Day Year				
	11/3/2015	Primary	Runoff	XGeneral	Special
		GO TO P	AGE 2		

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC

COVER SHEET PG 2

12 COMMITTEE NAM	IE No o	n Houston Prop 1	13 Filer ID (Ethics Commission filers)				
14 COMMITTEE			CANDIDATE / OFFICEHOL	_DER NAME			
PURPOSE							
(Attached lists on plain paper to com	plete	CANDIDATE					
this report if necessary)			OFFICE SOUGHT (candida	ate) / OFFICE HELD (office	eholder)		
[] SUPPORT		OFFICEHOLDER	/				
(Candidate or Measure)							
[X] OPPOSE							
(Candidate or Measure)			BALLOT IDENTIFICATION	/ #	ELECTION DATE		
		X MEASURE	Houston Prop 1		11/3/2015		
[] ASSIST			DESCRIPTION				
(Officeholder)			Houston Equal Rights	Ordinance			
15 CONTRIBUTION 1 TOTAL POLITICAL CONTRIBUTIONS TOTALS			DNS OF \$50 OR LESS (OTHE TEES OF LOANS), UNLESS IT	S OF \$50 OR LESS (OTHER THAN \$ ES OF LOANS), UNLESS ITEMIZED			
		L POLITICAL CONTRIBUTI ER THAN PLEDGES, LOAN	ONS S, OR GUARANTEES OF LO/	ANS)	\$16,952.21		
EXPENDITURE 3 TOTAL POLITICAL EXPENDITURES			ES OF \$100 OR LESS, UNLES	SS ITEMIZED	\$		
4 TOTAL POLITICAL EXPENDITURE			RES	\$14,175.79			
CONTRIBUTION BALANCE	0	L POLITICAL CONTRIBUTIO	DNS MAINTAINED AS OF THE	NS MAINTAINED AS OF THE LAST DAY \$2,626.42			
OUTSTANDING LOAN TOTALS	0	L PRINCIPAL AMOUNT OF DAY OF THE REPORTING	ALL OUTSTANDING LOANS A PERIOD	AS OF THE	\$0.00		

16	AFFIDAVIT			
		acc info	vear, or affirm, under penalty of perjury companying report is true and correct a prmation reqired to be reported by me u ction Code.	nd includes all
			Larry M. Hicks	
			Signature of Campaign Tre	asurer
AFFI	X NOTARY STAMP / SEAL ABOVE			
Swo	rn to and subscribed before me, by	the said	, this the	day
of _	, 20	_ , to certify which, witness my hand a	and seal of office.	
Sigr	nature of officer administering oath	Printed name of officer administering	g oath Title of officer admi	nistering oath

SU	BTOTALS - SPAC	FORM SPAC									
		C	OVER SHEET PG 3								
17 C	17 COMMITTEE NAME No on Houston Prop 1 18 Filer ID (Ethics Commission filers)										
19	SCHEDULE SUBTOTALS		SUBTOTAL								
	NAME OF SCHEDULE		AMOUNT								
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ \$11,000.00								
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ \$2,952.21								
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$								
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LA	BOR ORGANIZATION	\$								
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPO ORGANIZATIOND	RATION OR LABOR	\$								
6.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATIONS OR LABO	OR ORGANIZATION	\$								
7.	SCHEDULE E: LOANS		\$								
8.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$ \$8,373.58								
9.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ \$5,802.21								
10.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLICITAL CONTRIBU	TIONS	\$								
11.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ \$5,802.21								
12.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINES	S OF C/OH	\$								
13.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CON	NTRIBUTIONS	\$								
14.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTION	IS RETURNED TO FILER	\$								

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE	A1
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The Instruction G	Guide explains how to complete	1 Total Pages Schedule A1:								
2 FILER NAME		3 Filer ID (Ethics Commission filers)								
4 Date	5 Full name of contributor Jim Wise	PAC(ID#)	7 Amount of contributions (\$)							
9/28/2015	6 Contributor address;	City; Kingwood	State; Zip Code TX 77345	5000.00						
8 Principal occu	I upation / Job title (See Instructions)		9 Employer (See Instruc	stions)						
4 Date	5 Full name of contributor Jim Smith	out of state	PAC(ID#)	7 Amount of contributions (\$)						
9/28/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	5000.00						
8 Principal occu	I upation / Job title (See Instructions)		9 Employer (See Instruc	L trions)						
4 Date	5 Full name of contributor Sue Sloan	out of state	PAC(ID#)	7 Amount of contributions (\$)						
9/28/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77074	1000.00						
8 Principal occu	J upation / Job title (See Instructions)	9 Employer (See Instruc	L ctions)							
	ATTACH ADDITIO	NAL COPIES	OF THIS SCHEDUL	E AS NEEDED						
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements										

NON-MONETARY (IN-KIND) POLITICAL

	S	СН	ED	ULE	A2
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со	NTRIBU	TIONS					
The	Instruction G	uide explains how to complete		1 Total Pages Schedule A2:			
2 FII	ER NAME		3 Fi	ler ID (Ethics Commis	ssion filers)		
4 TC	TAL OF UN	TEMIZED IN-KIND POLITICAI	\$				
5	Date	6 Full name of contributor					
		Sandie Mullins Moger Campaign	PAC(ID#)	8	Amount of contributions (\$)	9 In-Kind contribution description	
		7 Contributor address;	City;	State; Zip Code			
	10/13/2015		Houston	TX 77077		150.00	Accounting services
						Check if travel outsi Schedule T	de of Texas, complete
10	Principal occu	pation / Job title (See Instructions)		11 Employer (See Instru	iction	s)	
5	Date	6 Full name of contributor	out of state	PAC(ID#)			
		US Pastor Council			8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code			
	10/22/2015		Houston	TX 77269		2024.28	Signs
						Check if travel outsi Schedule T	de of Texas, complete
10	Principal occu	pation / Job title (See Instructions)		11 Employer (See Instru	Iction	s)	
5	Date	6 Full name of contributor	out of state	PAC(ID#)			
		US Pastor Council			8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code			
	10/16/2015		Houston	TX 77269		3777.93	Signs
					Check if travel outsi Schedule T	de of Texas, complete	
10	Principal occu	pation / Job title (See Instructions)	11 Employer (See Instru	iction	s)		
		ATTACH ADDITIO	NAL COPIES	OF THIS SCHEDULI	E AS	S NEEDED	
		If contributor is out-of-state PAC					nts
L							

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F1:	² FILER NAME	3 Filer ID (Ethics Commission filers)							
4 Date	5 Payee name								
10/9/2015	Clear Channel								
6 Amount (\$)	7 Payee address; City;	State; Zip Code							
7,500.00	20880 Stone Oak Parkway								
	San Antonio TX 78258								
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description							
		Check if travel outside of Texas, complete Schedule T							
		Check if Austin, TX, officeholder living expense							
	Advertising Expense	Billboard							
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held							
4 Date	5 Payee name								
10/9/2015	Clear Channel	State: Zin Code							
6 Amount (\$)	7 Payee address; City;	State; Zip Code							
873.58	20880 Stone Oak Parkway								
	San Antonio TX 78258								
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description							
		Check if travel outside of Texas, complete Schedule T							
		Check if Austin, TX, officeholder living expense							
	Advertising Expense	Billboard							
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held							
expendituree to benefit C/OH									

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE F1

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2	2
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	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F2:	2	FILER NAME	3 Filer ID (Ethics Commission filers)						
4	TOTAL OF UNITEMIZED UNP	AID IN	CURRED OBLIGATIONS		\$					
5	Date 10/8/2015	6	Payee name American Express							
7	Amount (\$) 3,777.93	8	Payee address; City; PO Box 981540 El Paso TX 79998		State; Zip Code					
9	TYPE OF EXPENDITURE	X	Political		Non-Political					
10	PURPOSE OF EXPENDITURE	(a) Ca	OTHER (enter a category not listed above)	(b	b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit card payment					
11	Complete ONLY if direct expendituree to benefit C/OH	Cand	idate / Officehoder name	1	office sought office held					

5	Date	6		Payee name					
	10/6/2015			American Express					
7	Amount (\$)	8		Payee address; City;		St	ate;	Zip Code	
	2,024.28			PO Box 981540					
				El Paso TX 79998					
9	TYPE OF EXPENDITURE		Х	Political			Non-Poli	itical	
10	PURPOSE OF EXPENDITURE	(a	i) Ca	oTHER (enter a category not listed above)	(1	b) [Check if A	n ravel outside of Texas, complete Schedu Austin, TX, officeholder living expense Credit card payment	ıle T
11	Complete ONLY if direct expendituree to benefit C/OH	C	and	idate / Officehoder name			office s	sought offic	ce held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F4:	2 FILER NAME 3 Filer ID (Ethics Commis	ssion filers)
4	TOTAL OF UNITEMIZED EXPE	NDITURES CHARGED TO A CREDIT CARD \$	
5	Date	6 Payee name	
	10/8/2015	Houston Sign Co	
7	Amount (\$)	8 Payee address; City; State; Zip Code	
	3,777.93	5801 Chimney Rock	
		Houston TX 77081	
9	TYPE OF EXPENDITURE	X Political Non-Political	
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehol	der living expense
		Advertising Expense Signs	
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name office sought	office held
5	Date	6 Payee name	
	10/6/2015	Houston Sign Co	
7	Amount (\$)	8 Payee address; City; State; Zip Code	
	2,024.28	5801 Chimney Rock	
		Houston TX 77081	
9	TYPE OF EXPENDITURE	X Political Non-Political	
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehol	der living expense
		Advertising Expense Signs	
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name office sought	office held
1			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE F4