### CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

#### FORM C/OH COVER SHEET PG 1

The C/OH Instruction	n Guide explains how to com	plete this form	1 Filer ID(Ethi	cs Commission filers)	2 Total pages filed
3 CANDIDATE /	MS/MRS/MR	FIRST	MI		ICE USE ONLY
OFFICEHOLDER		Chris		Date Receive	d
NAME	NICKNAME	LAST	SUFFIX	10/5/2015	
		Brown			
4 CANDIDATE /	ADDRESS / PO BOX;	APT/SUITE #; CIT	Y; STATE; ZIP CO	DE	
OFFICEHOLDER	P.O. Box 56386				
MAILING				Date Hand-delive	ered or Date Postmarked
ADDRESS	Houston TX 77256				
Change of address					
5 CANDIDATE /	AREA CODE	PHONE NUMBER	EXTENSION		
OFFICEHOLDER	(713) 942-5816				
PHONE					
6 CAMPAIGN	MS/MRS/MR	FIRST	MI	Receipt #	Amount
TREASURER		James	L.	Date Process	ed
NAME	NICKNAME	LAST	SUFFIX	Date Imaged	
		Robertson			
7 CAMPAIGN	STREET ADDRESS (No PO Box Plea	se);	APT/SUITE # ;	CITY; STATE;	ZIP CODE
TREASURER	10333 Richmond Ave.				
ADDRESS	Suite 550				
(Business)	Houston TX 77042				
8 CAMPAIGN	AREA CODE	PHONE NUMBER	EXTENSION		
TREASURER PHONE	(713) 871-9600				
	January 15 X 30th day be	fore election	al repport (Attach C/OH -	FR) Exceeded \$500 limit	
9 REPORT TYPE					
	July 15 8th day befo	pre election	noff	15th day after campaig	In treasurer appointment(officeholder only)
10 PERIOD	Month Day	Year		Month	Day Year
COVERED	7/1/2015		THROUGH	9/2	24/2015
11 ELECTION	ELECTION DATE	ELECTIO	N TYPE		
	Month Day Year		-	-	-
	11/3/2015	Primary	Runc	ff X General	Special
12 OFFICE	OFFICE HELD (if any)		13 OFF	ICE SOUGHT (if known)	
			Co	ntroller	

### CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM	C/OH
 <u> </u>	

14 FILER NAME Chris Brown

**COVER SHEET PG 2** 15 Filer ID (Ethics Commission Filers)

	expenditures may have	political contributions accepted or political expenditures been made without the candidate's or officeholder's kno eceive notice of such expenditures.	made by political committees to support owledge or consent. Candidates and offi	the candidate / officeholder. These ceholders are required to report this
16 NOTICE	COMMITTEE TYPE	COMMITTEE NAME		
FROM				
POLITICAL	GENERAL	COMMITTEE ADDRESS		
COMMITTEE(S)				
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
_				
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS		
17 CONTRIBUTION		AL CONTRIBUTIONS OF \$50 OR LESS ( NS, OR GUARANTEES OF LOANS), UNL		¢
TOTALS	1 220 220, 2014			\$
	2 TOTAL POLITIC	AL CONTRIBUTIONS		£ 42 820 00
	OTHER THAN F	LEDGES, LOANS, OR GUARANTEES O	FLOANS)	\$42,820.00
	<u> </u>		,	
EXPENDITURE TOTALS	3 TOTAL POLITIC	AL EXPENDITURES OF \$100 OR LESS,	UNLESS IT EMIZED	\$234.54
	4 TOTAL POLITIC	AL EXPENDITURES		\$181,923.68
				φ101,923.00
CONTRIBUTION	0	AL CONTRIBUTIONS MAINTAINED AS C	OF THE LAST DAY	• • • • • • • • •
BALANCE	OF REPORTING	PERIOD		\$106,165.14
OUTSTANDING LOAN	6 TOTAL PRINCIP	AL AMOUNT OF ALL OUTSTANDING LC	DANS AS OF THE	
TOTALS	LAST DAY OF T	HE REPORTING PERIOD		\$0.00
18 AFFIDAVIT				
			firm, under penalty of perjury,	
			and correct and includes all in ne under Title 15, Election Coo	
			Chris Browr	1
			Signature of Candidate o	r Officeholder
AFFIX NOT STAMP / SE				
	-			
	-			day
of	, 20	, to certify which, witness my	hand and seal of office.	
Signature of officer admi	nistering oath	Print name of officer administering	oath Title of office	er administering oath
		-		

### SUBTOTALS - COH

## FORM C/OH COVER SHEET PG 3

19 F	9 FILER NAME Chris Brown 20 Filer ID (Ethics Commission Filers)					
21	1 SCHEDULE SUBTOTALS SUBTOTAL					
	Ν	IAME OF SCHEDULE	AMOUNT			
1		SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 36220			
2		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 6600			
3		SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0			
4		SCHEDULE E: LOANS	\$ 0			
5		SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 181689			
6		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ O			
7		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLICITAL CONTRIBUTION	1S \$ 0			
8		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ O			
9	9       SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH       \$ 0					
10	10         SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS         \$ 0					
11		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RI	ETURNED TO FILER \$ 0			

### CANDIDATE / OFFICEHOLDER REPORT: NOTICE FROM POLITICAL COMMITTEE(S)

#### C/OH NAME Chris Brown

#### FORM C/OH ADDENDUM

ACCOUNT # (Ethics Commission filers)

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.

The l	nstruction (	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FIL	ER NAME	Chris Brown			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor out of state PAC(ID# )			
		Michael Casey			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	7/1/2015		Houston	TX 77019	250
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Data				1
4	Date	5 Full name of contributor Shelly Cyprus	out of state	FAU(ID# )	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	7/1/2015		Sugar Land	TX 77478	50
8	Principal occ	supation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
-	2010	Christopher Riley			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	7/1/2015		Houston	TX 77055	100
8	Principal occ	supation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Elizabeth & Malcolm Gillis		- ( )	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
-	7/5/2015		Houston	TX 77025	100
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
o	i moipai occ				
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

SCHEDULE	A1
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The Instruction	Guide explains how to complet	e this form.		1 Total Pages Schedule A1:
2 FILER NAME	Chris Brown			3 Filer ID (Ethics Commission filers)
	George Agamemnon			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
7/11/2015		Dallas	TX 75206	500
8 Principal oco Owner	cupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
4 Date	5 Full name of contributor Tatiana Chavanelle	out of state	PAC(ID# )	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
7/11/2015		Houston	TX 77082	50
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
4 Date	5 Full name of contributor Marcelo Meira	out of state	PAC(ID# )	7 Amount of contributions (\$)
7/11/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	- 100
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
4 Date	5 Full name of contributor George L. Agamemnon	out of state	PAC(ID# )	7 Amount of contributions (\$)
7/13/2015	6 Contributor address;	City; Dallas	State; Zip Code TX 75206	- 500
8 Principal oco Owner	cupation / Job title (See Instructions)		9 Employer (See Instru	L ctions)
4 Date	5 Full name of contributor Kristi Thibaut	out of state	PAC(ID# )	7 Amount of contributions (\$)

The Instruction	n Guide explains how to comp	lete this form.		1 Total Pages Schedule A1:
2 FILER NAME	E Chris Brown			3 Filer ID (Ethics Commission filers)
				-
	6 Contributor address;	City;	State; Zip Code	
7/13/2015		Houston	TX 77024	250
3 Principal o	ccupation / Job title (See Instructions	)	9 Employer (See Instru	ictions)
Date	5 Full name of contributor	out of state	PAC(ID# )	
	John Virden			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
7/20/2015		Houston	TX 77003	50
Principal o	ccupation / Job title (See Instructions	)	9 Employer (See Instru	ictions)
1 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Anne Clutterbuck			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
7/30/2015		Houston	TX 77005	250
3 Principal o	ccupation / Job title (See Instructions	)	9 Employer (See Instru	uctions)
4 Date	5 Full name of contributor	out of state	• PAC(ID# )	
	Gustav Kopriva			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
7/30/2015		Houston	TX 77008	250
3 Principal o	ccupation / Job title (See Instructions	)	9 Employer (See Instru	ictions)

The Instru	ction Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FILER N	AME Chris Brown			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor	5 Full name of contributor out of state PAC(ID# )		
	Joe Siff			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
7/30/20	15	Houston	TX 77005	100
8 Princ	pal occupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	James Bell			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/3/20	15	Houston	TX 77098	400
8 Princ	pal occupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Robert Ryan			7 Amount of contributions (\$)
		Cite ::	Otata Zin Orada	
8/3/20	6 Contributor address;	City; Houston	State; Zip Code	100
0/3/20		nousion	17 11021	
8 Princ	pal occupation / Job title (See Instructions)		9 Employer (See Instruc	L ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Chris Williams			7 Amount of contributions (\$)
0/0/00	6 Contributor address;	City;	State; Zip Code	
8/3/20	G	Houston	TX 77079	250
8 Princ	pal occupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
I	I			1

The	Instruction G	uide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FI	ILER NAME C	Chris Brown			3 Filer ID (Ethics Commission filers)
		Erich Hoff			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	8/4/2015		Houston	TX 77009	40
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4	Date	5 Full name of contributor John Woods	out of state	PAC(ID# )	7 Amount of contributions (\$)
	8/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77008	- 100
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instrue	ctions)
4	Date	5 Full name of contributor Jason Arnoldy	out of state	PAC(ID# )	7 Amount of contributions (\$)
	8/5/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77005	- 100
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instrue	ctions)
4	Date	5 Full name of contributor Beth Bryant	out of state	PAC(ID# )	7 Amount of contributions (\$)
	8/5/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77007	- 40
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instrue	L ctions)
4	Date	5 Full name of contributor Tyler Crabtree	out of state	PAC(ID# )	7 Amount of contributions (\$)

The Instruction	Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:
2 FILER NAME	E Chris Brown			3 Filer ID (Ethics Commission filers)
	6 Contributor address;	City;	State; Zip Coo	 le
8/5/2015		Houston	TX 77008	500
8 Principal o	ccupation / Job title (See Instructions)		9 Employer (See Ins	tructions)
CFO				
4 Date	5 Full name of contributor Jared LeBlanc	out of state	PAC(ID# )	7 Amount of contributions (\$)
8/5/2015	6 Contributor address;	City; Houston	State; Zip Coo TX 77006	Je 500
	ccupation / Job title (See Instructions)		9 Employer (See Ins	tructions)
Attorney				
4 Date	5 Full name of contributor Kathryn Moore	out of state	PAC(ID# )	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Coo	 le
8/5/2015		Houston	TX 77005	80
8 Principal o	ccupation / Job title (See Instructions)		9 Employer (See Ins	tructions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Michael Moore			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Coo	 le
8/5/2015		Houston	TX 77005	40
8 Principal o	ccupation / Job title (See Instructions)		9 Employer (See Ins	structions)

The Instruction	Guide explains how to comple	1 Total Pages Schedule A1:		
2 FILER NAME	Chris Brown			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	James Phelan			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/5/2015		Houston	TX 77019	80
0,0,2010				
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	I
	Adrienne Schwartz			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	•
8/5/2015		Houston	TX 77007	50
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	ztions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	I
	Divya Chundru			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/6/2015		Pearland	TX 77584	100
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	ztions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	1
	Asha Dhume		,	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	·
8/6/2015		Sugar Land	TX 77479	100
		0		
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	Ltions)
				1
4 Date	5 Full name of contributor	out of state	PAC(ID# )	

SCHEDULE	<b>A1</b>
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he Instruction (	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
FILER NAME	Chris Brown			3 Filer ID (Ethics Commission filers)
	Rehar Farooq			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/6/2015		Sugar Land	TX 77479	60
Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Date	5 Full name of contributor	out of state I	PAC(ID# )	
	Fubright & Jaworski LLP Texas Committee			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
8/6/2015		Houston	TX 77010	1000
Principal occ	Lupation / Job title (See Instructions)		9 Employer (See Instruc	L ctions)
Date	5 Full name of contributor	out of state I	PAC(ID# )	
	Barrington Hammond			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/6/2015		Houston	TX 77007	40
Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Date	5 Full name of contributor	out of state I	PAC(ID# )	1
	Brian S. Jelks			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/6/2015		Greenville	MS 38701	40
Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
Date	5 Full name of contributor	out of state I	PAC(ID# )	T

SCHEDULE	A1
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The Instruction G	uide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FILER NAME C	hris Brown			3 Filer ID (Ethics Commission filers)
	Susanna Kise			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
8/6/2015		Houston	TX 77006	40
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Emmelie Kopp	out of state	PAC(ID# )	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/6/2015		Houston	TX 77021	50
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Jim Lewis	out of state	PAC(ID# )	7 Amount of contributions (\$)
8/6/2015	6 Contributor address;	City; Bellaire	State; Zip Code TX 77401	- 100
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Locke Lord LLP	out of state	PAC(ID# )	7 Amount of contributions (\$)
8/6/2015	6 Contributor address;	City; Dallas	State; Zip Code TX 75201	- 1000
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	_Lctions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	

The Instruction	Guide explains how to complet	1 Total Pages Schedule A1:		
2 FILER NAME	Chris Brown			3 Filer ID (Ethics Commission filers)
	6 Contributor address;	City;	State; Zip Code	-
8/6/2015		Manvel	TX 77578	100
Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Date	5 Full name of contributor	out of state	PAC(ID# )	
	Lenard M. Polk			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/6/2015		Houston	TX 77090	100
Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Date	5 Full name of contributor	out of state	PAC(ID# )	
	Rita Lucido, P.C.			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
8/6/2015		Houston	TX 77002	200
Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Date	5 Full name of contributor	out of state	PAC(ID# )	
	Ann Baum Sakowitz			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
8/6/2015		Houston	TX 77006	100
Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)

The Instruction	Guide explains how to comple	te this form		1 Total Pages Schedule A1:
2 FILER NAME	Chris Brown			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor out of state PAC(ID# )			
	Edward Sanchez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
8/6/2015		Houston	TX 77027	40
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	1
	Anne Sears			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/6/2015		Houston	TX 77007	40
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	L ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Marvin Wolff			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
8/6/2015		Houston	TX 77024	800
8 Principal oc	L cupation / Job title (See Instructions)		9 Employer (See Instruc	L ctions)
Tennis Instr	uctor			
4 Date	5 Full name of contributor Atul Kothari	out of state	PAC(ID# )	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
8/7/2015		Sugar Land	TX 77479	1000
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	L ctions)
СРА				
4 Date	5 Full name of contributor	out of state	PAC(ID# )	

SCHEDULE	A1
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The Instructio	n Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:
2 FILER NAM	IE Chris Brown			3 Filer ID (Ethics Commission filers)
	Chris Bradshaw			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
8/9/2015		Houston	TX 77027	1000
8 Principal CEO	occupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Larry Whaley	out of state	PAC(ID# )	7 Amount of contributions (\$)
8/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	- 1000
3 Principal Engineer	occupation / Job title (See Instructions)		9 Employer (See Instrue	ctions)
4 Date	5 Full name of contributor Yolanda Black Navarro	out of state	PAC(ID# )	7 Amount of contributions (\$)
8/15/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77023	40
8 Principal	occupation / Job title (See Instructions)		9 Employer (See Instrue	ctions)
4 Date	5 Full name of contributor Margrit Young	out of state	PAC(ID# )	7 Amount of contributions (\$)
8/27/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	- 50
8 Principal	occupation / Job title (See Instructions)		9 Employer (See Instrue	L ctions)
4 Date	5 Full name of contributor Mark A. Goldberg	out of state	PAC(ID# )	7 Amount of contributions (\$)

SCHEDULE A	1
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The Instruction	Guide explains how to complet	1 Total Pages Schedule A1:		
2 FILER NAME	Chris Brown			3 Filer ID (Ethics Commission filers)
	6 Contributor address;	City;	State; Zip Code	
8/31/2015		Houston	TX 77025	100
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instru	ictions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Southwest Laborers District Council SW LIUNA PAC			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/31/2015		Austin	TX 78751	750
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instru	ictions)
۷ Date	5 Full name of contributor	out of state		T
4 Date	Andrews & Kurth Texas PAC		FAG(ID# )	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/2/2015		Houston	TX 77002	1000
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instru	ictions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Mel Jacobs			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/15/2015		Houston	TX 77056	250
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instru	ictions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Nathan Reedy	_		7 Amount of contributions (\$)

SCHEDULE	<b>A1</b>
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The Instruction G	uide explains how to complete	1 Total Pages Schedule A1:		
2 FILER NAME C	Chris Brown			3 Filer ID (Ethics Commission filers)
	6 Contributor address;	City;	State; Zip Code	
9/15/2015		Houston	TX 77023	100
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor	out of state F		
4 Date	Achille Arcidiacono			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/16/2015		Houston	TX 77098	1000
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Real Estate B				,
4 Date	5 Full name of contributor	out of state F	PAC(ID# )	
	CP & Y PAC			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/16/2015		Houston	TX 77042	1000
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor	out of state F	PAC(ID# )	
	Truman Edminster			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/16/2015		Houston	TX 77006	500
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	l tions)
Engineer				

The Instruction (	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FILER NAME	Chris Brown	3 Filer ID (Ethics Commission filers)		
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Joshua Espinedo			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/16/2015		Houston	TX 77023	250
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Cullen Geiselman			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/16/2015		Houston	TX 77006	500
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Philanthropis	t			
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Mark Goldberg			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/16/2015		Houston	TX 77025	150
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Marc Melcher			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/16/2015		Houston	TX 77005	500
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	Lions)
Vice Preside	nt			
4 Date	5 Full name of contributor	out of state	PAC(ID# )	

SCHEDULE	A1
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he Instruction	Guide explains how to compl	ete this form.		1 Total Pages Schedule A1:
FILER NAME	Chris Brown			3 Filer ID (Ethics Commission filers)
	PPGC Action Fund, Inc PAC			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/16/2015		Houston	TX 77023	250
Principal or	ccupation / Job title (See Instructions)	1	9 Employer (See Instruc	ctions)
Date	5 Full name of contributor Randhir Sahni	out of state	PAC(ID# )	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/16/2015		Houston	TX 77024	250
Principal or	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Date	5 Full name of contributor Joseph Soliz	out of state	PAC(ID# )	7 Amount of contributions (\$)
9/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77063	- 100
Principal or				
Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	cuons)
Date	5 Full name of contributor John Woods	out of state	PAC(ID# )	7 Amount of contributions (\$)
9/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77004	- 250
Principal or	ccupation / Job title (See Instructions)		9 Employer (See Instrue	ctions)
Date	5 Full name of contributor Rich Levy	out of state	PAC(ID# )	7 Amount of contributions (\$)
	I			20 of 80

SCHEDULE A	1
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The Instruction (	Guide explains how to complete	1 Total Pages Schedule A1:		
2 FILER NAME	Chris Brown			3 Filer ID (Ethics Commission filers)
	6 Contributor address;	City;	State; Zip Code	-
8/20/2015		Houston	TX 77006	100
8 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	L ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID#_)	
	Michael and Kaitlyn Scheurich		,	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
8/27/2015		Houston	TX 77005	100
8 Principal occ	supation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Jason Yoo			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
8/28/2015		Houston	TX 77279	1000
8 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
CEO/Owner				
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Jeanette Rash			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/1/2015		Houston	TX 77020-2033	500
8 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	L ctions)
Owner				

The Instruction	Guide explains how to comple	1 Total Pages Schedule A1:		
2 FILER NAME	Chris Brown			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Glen Gondo			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/3/2015		Houston	TX 77082	500
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
President	,			
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Thomas Blocher			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/4/2015		Houston	TX 77024	250
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	 xtions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	TOMMY ALLEN			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/7/2015		Houston	TX 77096	130
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	xtions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Brad Bucher			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/11/2015		houston	TX 77079	100
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	 :tions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	

SCHEDULE	A1
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he Instruction	Guide explains how to compl	ete this form.		1 Tota	I Pages Schedule A1:
FILER NAME	Chris Brown			3 Filer ID (	Ethics Commission filers)
	Luisa Ludtke			7	Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code		
9/14/2015		Houston	TX 77079		100
Principal oc	ccupation / Job title (See Instructions)	)	9 Employer (See Instru	uctions)	
Date	5 Full name of contributor	out of state	e PAC(ID# )		
	Mark I Kaufman			7	Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code		
9/14/2015		Houston	TX 77056		250
Principal oc	ccupation / Job title (See Instructions	)	9 Employer (See Instru	uctions)	
Principal oc	5 Full name of contributor		9 Employer (See Instru	uctions)	
				7	Amount of contributions (\$)
	5 Full name of contributor			7	Amount of contributions (\$)
	5 Full name of contributor John Gay	out of state	e PAC(ID# )	7 	Amount of contributions (\$)
Date 9/14/2015	5 Full name of contributor John Gay	Out of state City; Dallas	PAC(ID# ) State; Zip Code	7	
Date 9/14/2015	5 Full name of contributor John Gay 6 Contributor address;	City; Dallas	PAC(ID# ) State; Zip Code TX 75244	7	
Date 9/14/2015 Principal oc	5 Full name of contributor John Gay 6 Contributor address; ccupation / Job title (See Instructions)	City; Dallas	9 Employer (See Instru	7	
Date 9/14/2015 Principal oc	5 Full name of contributor John Gay 6 Contributor address; ccupation / Job title (See Instructions) 5 Full name of contributor	City; Dallas	9 Employer (See Instru	7	50
Date 9/14/2015 Principal oc	5 Full name of contributor John Gay 6 Contributor address; ccupation / Job title (See Instructions) 5 Full name of contributor Michael Moore	City; Dallas	PAC(ID# ) State; Zip Code TX 75244 9 Employer (See Instru- PAC(ID# )	7	50
Date 9/14/2015 Principal oc Date 9/14/2015	5 Full name of contributor John Gay 6 Contributor address; ccupation / Job title (See Instructions) 5 Full name of contributor Michael Moore	out of state City; Dallas	PAC(ID# ) State; Zip Code TX 75244 9 Employer (See Instru PAC(ID# ) State; Zip Code	7  Juctions)	50 Amount of contributions (\$)
Date 9/14/2015 Principal oc Date 9/14/2015	5 Full name of contributor John Gay 6 Contributor address; 5 Full name of contributor Michael Moore 6 Contributor address;	out of state	PAC(ID# ) State; Zip Code TX 75244 9 Employer (See Instru- PAC(ID# ) State; Zip Code TX 77005	7  Juctions)	50 Amount of contributions (\$)

The Instruction (	Guide explains how to complete	this form.		1 Total Pages Schedule A1:
2 FILER NAME	Chris Brown			3 Filer ID (Ethics Commission filers)
	6 Contributor address;	City;	State; Zip Code	-
9/14/2015		Houston	TX 77019	500
8 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instru	L ctions)
Vice Preside	ent			
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Robert Hilliard			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/15/2015		Chicago	IL 60657	100
8 Principal occ	Lupation / Job title (See Instructions)		9 Employer (See Instrue	L ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Leah Stolar			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/15/2015		Houston	TX 77027	500
8 Principal occ Attorney	cupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Harry Mach			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/18/2015		Houston	TX 77019	500
8 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instru	L ctions)
CEO				

The Instruction	Guide explains how to comple	1 Total Pages Schedule A1:		
2 FILER NAME	Chris Brown	3 Filer ID (Ethics Commission filers)		
4 Date	5 Full name of contributor	PAC(ID# )		
	Mir Azizi			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/18/2015		Houston	TX 77002	2000
B Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
President	· · · · · · · · · · · · · · · · · · ·			
1 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Eric Barvin			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/21/2015		Houston	TX 77025	1000
3 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instru-	ctions)
Real Estate	Developer			
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Alexander Obregon			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/22/2015		Houston	TX 77045	100
3 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
1 Date	5 Full name of contributor Anjana Jackson	out of state	PAC(ID# )	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	•
9/23/2015		Houston	TX 77079	50
3 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instru-	L ctions)
				T
4 Date	5 Full name of contributor	out of state	PAC(ID#)	

SCHEDULE	A1
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The Instruction (	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FILER NAME (	Chris Brown			3 Filer ID (Ethics Commission filers)
	William Dolman			7 Amount of contributions (\$)
_ / /	6 Contributor address;	City;	State; Zip Code	
9/23/2015		Ardmore	OK 73402	100
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Samuel Abraham	out of state	PAC(ID# )	7 Amount of contributions (\$)
9/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77098	- 100
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Shavonnah Schreiber	out of state	PAC(ID# )	7 Amount of contributions (\$)
9/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77007	35
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Mary Patton	out of state	PAC(ID# )	7 Amount of contributions (\$)
9/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	- 100
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	L ctions)
4 Date	5 Full name of contributor Sims McCutchan	out of state	PAC(ID# )	7 Amount of contributions (\$)

## MONETARY POLITICAL

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:

2 FILER NAME	Chris Brown			3 Filer ID (Ethics Commission filers)
9/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77248-7155	- 50
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
4 Date	5 Full name of contributor Shailendra Sacheti	out of state	PAC(ID# )	7 Amount of contributions (\$)
9/23/2015	6 Contributor address;	City; The Woodlands	State; Zip Code TX 77381	- 250
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
4 Date	5 Full name of contributor Amy Pierce	out of state	PAC(ID# )	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	- 500
8 Principal oct Homemaker	cupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
4 Date	5 Full name of contributor Kate Stukenberg	out of state	PAC(ID# )	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77025	- 75
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instru	_lctions)
4 Date	5 Full name of contributor Meredith Riddle Chastang	out of state	PAC(ID# )	7 Amount of contributions (\$)

SCHEDULE A	1
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The Instruction (	Guide explains how to complete	this form.		1 Total Pages Schedule A1:
2 FILER NAME	Chris Brown			3 Filer ID (Ethics Commission filers)
	1			
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	TX 77027	250
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Jackie Mazow			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	TX 77004-6931	100
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Merrell Athon			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	TX 77098	1000
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	
Partner				
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	MARLIN AND AMY SANDLIN JR			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	TX 77006	500
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Physician				

The Instruction	Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:
2 FILER NAME	Chris Brown			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	John Goott			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	TX 77056	500
3 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
President/C	EO			
4 Date	5 Full name of contributor	out of state	PAC(ID# )	Τ
	Eric Houston			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	TX 77098	200
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	John Weatherly			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	TX 77063	50
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	
4 Date	5 Full name of contributor	out of state	PAC(ID# )	<u> </u>
	Michael M Fowler			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	TX 77006	100
3 Principal oct	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	

SCHEDULE	A1
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The Instructior	n Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:
2 FILER NAM	E Chris Brown			3 Filer ID (Ethics Commission filers)
	George L Murray			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/24/2015		Houston	TX 77019	50
8 Principal c	Deccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Shannan Nobles	out of state	PAC(ID# )	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/24/2015		Houston	TX 77014	250
8 Principal c	occupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Michael McEnany	out of state	PAC(ID# )	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77005	- 100
8 Principal c	occupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Everett Anschutz	_		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/24/2015		Houston	TX 77042	1500
8 Principal c Attorney	occupation / Job title (See Instructions)		9 Employer (See Instruc	L ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	John Parkerson			7 Amount of contributions (\$)

SCHEDULE A	41
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The Instruction (	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FILER NAME	Chris Brown			3 Filer ID (Ethics Commission filers)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	50
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Inst	ructions)
4 Date	5 Full name of contributor Sheila Condon	out of state	PAC(ID# )	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77025	500
8 Principal occ President	upation / Job title (See Instructions)		9 Employer (See Inst	ructions)
4 Date	5 Full name of contributor Veena Mahadevan	out of state	PAC(ID# )	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Mountain View	State; Zip Code CA 94041	500
8 Principal occ Consultant	upation / Job title (See Instructions)		9 Employer (See Inst	ructions)
4 Date	5 Full name of contributor Craig Corbell	out of state	PAC(ID# )	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77023	1000
8 Principal occ President	upation / Job title (See Instructions)		9 Employer (See Inst	ructions)
4 Date	5 Full name of contributor Edmond Wulfe	out of state	PAC(ID# )	7 Amount of contributions (\$)

SCHEDULE A	1
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The Instruction Guide explains how to complete this form.				1 Total Pages Schedule A1:	
2 FILER NAME	Chris Brown			3 Filer ID (Ethics Commission filers)	
	6 Contributor address;	City;	State; Zip Cod	e	
9/24/2015		Houston	TX 77056	500	
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Ins	tructions)	
Real Estate I	Developer				
4 Date	5 Full name of contributor	out of state	PAC(ID# )		
	Aimee Bertrand			7 Amount of contributions (\$)	
	6 Contributor address;	City;	State; Zip Cod	e	
9/21/2015		Kingwood	TX 77345	100	
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Ins	tructions)	
4 Date	5 Full name of contributor	out of state	PAC(ID# )		
	Darrin Hall	_		7 Amount of contributions (\$)	
	6 Contributor address;	City;	State; Zip Cod	e	
9/21/2015		Seabrook	TX 77586	300	
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Ins	tructions)	
4 Date	5 Full name of contributor	out of state	PAC(ID# )		
	George Pontikes			7 Amount of contributions (\$)	
	6 Contributor address;	City;	State; Zip Cod	e	
9/24/2015		Houston	TX 77041	1000	
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Ins	I tructions)	
President					
	ATTACH ADDITION	AL COPIES	OF THIS SCHED	JLE AS NEEDED	
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements					

## NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE	A2

CONT	RIBU	FIONS					
The Instruction Guide explains how to complete this form.				1 Total Pages Schedule A2:			
2 FILER NAME Chris Brown				3 Fi	ler ID (Ethics Commi	ssion filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS			\$6,6	\$6,600.00			
5 Dai	te	6 Full name of contributor	out of state F	PAC(ID# )			
		Travis French			8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code			
7/20/	/2015		McAllen	TX 78504		3500.00	Web App development
				_		Check if travel outsi Schedule T	de of Texas, complete
10 Prii	ncipal occu	pation / Job title (See Instructions)		11 Employer (See Instru	iction	s)	
Ow	vner			Amplify Media & Market	ing		
5 Dat	te	6 Full name of contributor	out of state F	PAC(ID# )			
		Marc Melcher			8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code			
9/15/	/2015		Houston	TX 77056		3000.00	Event catering
						Check if travel outsi Schedule T	de of Texas, complete
10 Prii	ncipal occu	pation / Job title (See Instructions)		11 Employer (See Instru	iction	s)	
We	ealth Manag	ement Advisor, Vice President		Merrill Lynch Wealth Ma	inage	ment, Bank of Americ	ca C
5 Dat	te	6 Full name of contributor	out of state F	PAC(ID# )			
		Aimee Bertrand			8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code			
9/19/	/2015		Kingwood	TX 77345		100.00	Food and Beverages
						Check if travel outsi Schedule T	de of Texas, complete
10 Prin	ncipal occu	pation / Job title (See Instructions)		11 Employer (See Instru	iction	s)	
		ATTACH ADDITIO		L OF THIS SCHEDUL	E AS	S NEEDED	
		If contributor is out-of-state PA					nts

#### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

	The Instruction Guide ex	plains how to complet	e this form.
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
7/2/2015	Strong Strategies LLC		
6 Amount (\$)	7 Payee address; City;	State; Zip Co	de
1,519.14	1551 San Felipe, Unit 117E		
	Houston TX 77056		
B PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel o	utside of Texas, complete Schedule T
		Check if Austin,	TX, officeholder living expense
	Consulting Expense	Campa	gn fundraising & compliance services
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held
4 Date	5 Payee name		
7/2/2015	Houston GLBT Political Cau	cus	
6 Amount (\$)	7 Payee address; City;	State; Zip Co	de
20.00	PO Box 66664		
	Houston TX 77266		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel o	utside of Texas, complete Schedule T
		Check if Austin,	TX, officeholder living expense
	Contributions/Donations	Membe	rship fees
	Made By Candidate/Officeholder/Politi		
	cal Committee		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held
4 Date	5 Payee name		
7/2/2015	Houston GLBT Political Cau		
6 Amount (\$)	7 Payee address; City;	State; Zip Co	de
20.00	PO Box 66664		

(b) Description

Houston TX 77266

8 PURPOSE OF EXPENDITURE (a) Category

SCHEDULE F1

#### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown		3 Filer ID (Ethics Commission filers)	
	Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee	Check if travel outside of Te Check if Austin, TX, officeho Membership fees		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought of	ffice held	
4 Date	5 Payee name			
7/2/2015	Houston GLBT Political Cauc	cus		
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
20.00	PO Box 66664 Houston TX 77266			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
	Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee	Check if travel outside of Te Check if Austin, TX, officeho Membership fees		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought of	ffice held	

#### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

	The Instruction Guide ex	xplains how to co	omplete this form	·
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown			3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name			
7/2/2015	Houston GLBT Political Cau	JCUS		
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
20.00	PO Box 66664			
	Houston TX 77266			
<b>PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description		
		Check if tr	ravel outside of Te	xas, complete Schedule T
		Check if A	Austin, TX, officeho	lder living expense
	Contributions/Donations		lembership fees	
	Made By Candidate/Officeholder/Politi			
	cal Committee			
9 Complete ONLY if direct	Candidate / Officehoder name	office sought	of	fice held
expendituree to benefit C/OH				
Date	5 Payee name			
7/2/2015	Houston GLBT Political Cau	JCUS		
δ Amount (\$)	7 Payee address; City;	State;	Zip Code	
20.00	PO Box 66664			
	Houston TX 77266			
B PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if tr	ravel outside of Te	xas, complete Schedule T
		Check if A	Austin, TX, officeho	lder living expense
	Contributions/Donations		lembership fees	
	Made By			
	Candidate/Officeholder/Politi cal Committee			
9 Complete ONLY if direct		office sought	of	fice held
expendituree to benefit C/OH				
Late	5 Payee name			
7/2/2015	Houston GLBT Political Cau	ucus		
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
20.00	PO Box 66664			

Houston TX 77266

SCHEDULE F1

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown		3 Filer ID (Ethics Commission filers)	
	Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee	Check if travel outside of Te Check if Austin, TX, officehc Membership fees		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought of	ffice held	
4 Date	5 Payee name			
7/2/2015	Houston GLBT Political Cauc	cus		
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
20.00	PO Box 66664 Houston TX 77266			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
	Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee	Check if travel outside of Te Check if Austin, TX, officehc Membership fees		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought of	ffice held	

8 PURPOSE OF EXPENDITURE (a) Category

	The Instruction Guide ex	explains how to c	omplete this forr	n.
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown	<u></u>	<u>p</u>	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name			
7/2/2015	Prevent Blindness			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
100.00	2202 Waugh Drive			
	Houston TX 77006			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
	Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee	i	Austin, TX, officeh Donation	exas, complete Schedule T nolder living expense
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought		office held
4 Date	5 Payee name			
7/10/2015	Mariah Grayson			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
210.00	4700 Calhoun Rd.			
	Houston TX 77004			
8 PURPOSE OF EXPENDITURE	(a) Category Salaries/Wages/Contract Labor	Check if <i>i</i>	travel outside of T	exas, complete Schedule T holder living expense
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	(	office held
4 Date	5 Payee name			
7/10/2015	Burt Levine			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
300.00	9600 Glenfield Ct, Suite 148			
	Houston TX 77096			

(b) Description

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown		3 Filer ID (Ethics Commission filers)		
	Salaries/Wages/Contract Labor	Check if travel outside of Te Check if Austin, TX, officeho Contract services fo	older living expense		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	ffice held		
4 Date	5 Payee name				
7/10/2015	Johnston Campaigns				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
3,000.00	2978 Rising Tide Lane League City TX 77573				
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description			
	Consulting Expense	Check if travel outside of Te Check if Austin, TX, officeho Campaign consultin	older living expense		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	ffice held		

	The Instruction Guide ex	valains how to	complete this form	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown			3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name			
7/10/2015	Party City		7: 0 1	
<b>6</b> Amount (\$)	7 Payee address; City;	State;	Zip Code	
98.28	516 Gulfgate Center Mall			
	Houston TX 77087			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	ı	
		Check if	travel outside of T	exas, complete Schedule T
		Check if	Austin, TX, officeh	older living expense
	Office Overhead/Rental		Office supplies	
	Expense			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	C	office held
expendituree to benefit 0/011				
4 Date	5 Payee name			
7/13/2015	Harris County Tejano Demo	crats		
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
95.00	3715 North Main			
	Houston TX 77009			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	1	
		Check if	travel outside of T	exas, complete Schedule T
		Check if	Austin, TX, officeh	older living expense
	Contributions/Donations		Membership dues	
	Made By			
	Candidate/Officeholder/Politi cal Committee			
9 Complete ONLY if direct	Candidate / Officehoder name	office sought	(	office held
expendituree to benefit C/OH				
4 Date	5 Payee name			
7/13/2015	Solidarity Campaigns			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
2,750.00	198 Skytrail Dr.			
_,. 00100				
	New Braunfels TX 78130			
8 PURPOSE OF EXPENDITURE		(b) Description	<u> </u>	

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown	3	3 Filer ID (Ethics Commission filers)		
	Consulting Expense	Check if travel outside of Tex Check if Austin, TX, officehold Research			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought offi	ice held		
4 Date	5 Payee name				
7/13/2015	Office Max				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
241.99	1576 West Gray Houston TX 77019				
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description			
		Check if travel outside of Tex Check if Austin, TX, officehold	der living expense		
	Office Overhead/Rental Expense	Office supplies for he	eadquarters		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought offi	ice held		

	The Instruction Guide ex	xplains how to cor	nplete this form	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown			3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name			
7/13/2015	Harris County Tejano Demo	ocrats		
6 Amount (\$)	7 Payee address; City;	State; Z	ip Code	
20.00	2314 Tannehill Drive			
	Houston TX 77008			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
	Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee	Check if Au Me		xas, complete Schedule T Ider living expense
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	of	fice held
4 Date	5 Payee name			
7/13/2015	Harris County Tejano Demo	ocrats		
6 Amount (\$)	7 Payee address; City;		ip Code	
20.00	2314 Tannehill Drive Houston TX 77008			
		(b) Decorintion		
8 PURPOSE OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee	Check if Au Me		xas, complete Schedule T Ider living expense
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	of	fice held
4 Date	5 Payee name			
7/13/2015	Harris County Tejano Demo	ocrats		
6 Amount (\$)	7 Payee address; City;		ip Code	
20.00	2314 Tannehill Drive			
	Houston TX 77008			

8 PURPOSE OF EXPENDITURE (a) Category

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown		3 Filer ID (Ethics Commission filers)		
	Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Membership fees			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought of	ffice held		
4 Date	5 Payee name				
7/13/2015	Harris County Tejano Democ	rats			
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
20.00	2314 Tannehill Drive Houston TX 77008				
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description			
	Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee	Check if travel outside of Te Check if Austin, TX, officeho Membership fees			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought of	ffice held		

	The Instruction Guide ex	xplains how to co	mplete this form	l.
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown			3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name			
7/13/2015	Harris County Tejano Demo	ocrats		
6 Amount (\$)	7 Payee address; City;	State; 2	Zip Code	
20.00	2314 Tannehill Drive			
	Houston TX 77008			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	avel outside of Te	exas, complete Schedule T
		Check if A	ustin. TX. officeho	older living expense
	Contributions/Donations Made By Candidate/Officeholder/Politi		lembership fees	
	cal Committee			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	of	ffice held
4 Date	5 Payee name			
7/13/2015	Harris County Tejano Demo	ocrats		
6 Amount (\$)	7 Payee address; City;		Zip Code	
20.00	2314 Tannehill Drive			
	Houston TX 77008			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if tr	avel outside of Te	exas, complete Schedule T
		Check if A	ustin, TX, officeho	older living expense
	Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee		lembership fees	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	of	ffice held
4 Date	5 Payee name			
7/13/2015	Harris County Tejano Demo	ocrats		
6 Amount (\$)	7 Payee address; City;		Zip Code	
20.00	2314 Tannehill Drive			
	Houston TX 77008			

8 PURPOSE OF EXPENDITURE (a) Category

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown		3 Filer ID (Ethics Commission filers)		
	Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Membership fees			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought of	ffice held		
4 Date 7/13/2015	5 Payee name Harris County Tejano Democ	srats			
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
20.00	2314 Tannehill Drive Houston TX 77008				
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description			
	Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee	Check if travel outside of Te Check if Austin, TX, officeho Membership fees			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought of	ffice held		

	The Instruction Guide e	explains how to co	mplete this form	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown			3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name			
7/14/2015	Vistaprint			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
36.97	95 Hayden Avenue			
	Lexington MA 2421			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if tr	avel outside of Te	xas, complete Schedule T
		Check if A	ustin, TX, officehc	older living expense
	Advertising Expense	P	rinting of campaig	n materials
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	of	fice held
4 Date	5 Payee name			
7/23/2015	Sprint 2 Print	<b>0</b>		
6 Amount (\$)	7 Payee address; City;	State; 2	Zip Code	
562.90	8748 Clay Road, Suite 300			
	Houston TX 77080			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	and a statistic of Ta	
				xas, complete Schedule T
				lder living expense
	Advertising Expense		ampaign yard sigi	ns
9 Complete ONLY if direct	Candidate / Officehoder name	office sought	of	ifice held
expendituree to benefit C/OH		J. J		
4 Date	5 Payee name			
7/24/2015	Mariah Grayson			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	

(b) Description

4700 Calhoun Rd.

Houston TX 77004

150.00

8 PURPOSE OF EXPENDITURE (a) Category

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown		3 Filer ID (Ethics Commission filers)		
	Salaries/Wages/Contract Labor	Check if travel outside of Te Check if Austin, TX, officeho Campaign staffing			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name c	office sought of	ffice held		
4 Date	5 Payee name				
7/27/2015	Greater Heights Chamber of	Commerce			
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
65.00	545 West 18th Street Houston TX 77008				
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description			
	Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee	Check if travel outside of Te Check if Austin, TX, officeho Event ticket	•		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name c	office sought of	ffice held		

		explains how to complete this form.	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown	3 Filer ID (Ethics Co	ommission filers)
4 Date	5 Payee name		
7/31/2015	Bridge Strategies		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
2,125.00	5106 West 43rd		
	Houston TX 77092		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Texas, complete Scheo	lule T
		Check if Austin, TX, officeholder living expense	
	Salaries/Wages/Contract	Campaign managing services	
	Labor		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held	
	 T=		
4 Date	5 Payee name		
7/31/2015	Pathfinder Opinion Resea		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
9,475.00	2721 Devine Street, 2nd Fl	101	
	Columbia SC 29205		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Texas, complete Schec	lule T
		Check if Austin, TX, officeholder living expense	
	Polling Expense	Poll	
0. Complete ONIL V if direct	Candidate / Officehoder name		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officenoder name	office sought office held	
4 Date	5 Payee name		
7/31/2015	Piryx, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
100.20	649 Mission St.		
100.20			
	#204		
	San Francisco CA 94105		

8 PURPOSE OF EXPENDITURE (a) Category

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown		3 Filer ID (Ethics Commission filers)	
	Fees	Check if travel outside of Te Check if Austin, TX, officeho Online donation fee	older living expense	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held	
4 Date	5 Payee name			
8/3/2015	Aubrey R. Taylor Communic	ations		
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
375.00	957 Nasa Parkway, #251 Houston TX 77058			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
	Advertising Expense	Check if travel outside of Te Check if Austin, TX, officeho Advertisement in H		
<ul> <li>9 Complete ONLY if direct expendituree to benefit C/OH</li> </ul>	Candidate / Officehoder name	pffice sought o	ffice held	
	1			

I KOM I OEITIOAE			
1 Total pages Schodula E1.		plains how to complete this form	3 Filer ID (Ethics Commission filers)
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown		
4 Date 8/3/2015	5 Payee name NGP VAN		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
320.00	1101 15th St NW, Suite 500		
	Washington DC 20005	1	
8 PURPOSE OF EXPENDITURE	(a) Category Office Overhead/Rental	(b) Description Check if travel outside of Te Check if Austin, TX, officeho Database access	
	Expense		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held
4 Date	5 Payee name		
8/5/2015	Andre Humphrey Photograp	hy	
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
300.00	PO Box 1941		
	Houston TX 77251		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
	Office Overhead/Rental	Check if travel outside of Te Check if Austin, TX, officeho Fundraiser photogr	older living expense
	Expense		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held
4 Date	5 Payee name		
8/5/2015	L'Olivier		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1,400.00	240 Westheimer Rd.		

Houston TX 77006

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown	3 Filer ID (Ethics Commission filers)	
	Event Expense	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Fundraiser restaurant rental	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held	
4 Date	5 Payee name		
8/10/2015	L'Olivier		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1,100.00	240 Westheimer Rd. Houston TX 77006		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
	Event Expense	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Fundraising venue	
<ul> <li>9 Complete ONLY if direct expendituree to benefit C/OH</li> </ul>	Candidate / Officehoder name	office sought office held	

	The Instruction Guide	explains how to co	omplete this form	n.
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown			3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name			
8/13/2015	Strong Strategies LLC			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
1,500.00	1551 San Felipe, Unit 117E			
	Houston TX 77056			
8 PURPOSE OF EXPENDITURE	(a) Category Consulting Expense	Check if A	Austin, TX, officer	exas, complete Schedule T nolder living expense npliance services
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought		office held
4 Date	5 Payee name			
8/13/2015	Mariah Grayson			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
220.00	4700 Calhoun Rd. Houston TX 77004			
8 PURPOSE OF EXPENDITURE		(b) Description		
	Salaries/Wages/Contract Labor	Check if tr		exas, complete Schedule T nolder living expense
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought		office held
4 Date	5 Payee name			
8/13/2015	Burt Levine			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
300.00	9600 Glenfield Ct, Suite 148	3		
	Houston TX 77096			

8 PURPOSE OF EXPENDITURE (a) Category

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	Check if travel outside of Te Check if Austin, TX, officeho Contract services fo	older living expense
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	ffice held
4 Date	5 Payee name		
8/13/2015	Jewish Herald Voice		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
321.00	PO Box 153 Houston TX 77098		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
	Advertising Expense	Check if travel outside of Te Check if Austin, TX, officeho Rosh Hashanah Ao	older living expense
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	ffice held

	The Instruction Guide ex	xplains how to co	omplete this for	m.
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown	<u>.</u>		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name			
8/17/2015	Citywide Beauticians			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
500.00	3903 Tolnay St			
	Houston TX 77021			
8 PURPOSE OF EXPENDITURE	(a) Category Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee	Check if A		Texas, complete Schedule T holder living expense
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought		office held
4 Date	5 Payee name			
8/17/2015	Crestmont Park Civic Assoc	ciation		
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
250.00	5200 Selinsky Drive Houston TX 77048			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
	Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee	Check if A	Austin, TX, office	Texas, complete Schedule T holder living expense stmont Park Civic Association Banquet
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought		office held
4 Date	5 Payee name			
8/17/2015	Texas Spring Cypress Chap	pter - The Links	s, Inc.	
6 Amount (\$)	7 Payee address; City;		Zip Code	
250.00	27104 Monarch Woods			

	The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown		3 Filer ID (Ethics Commission filers)	
		Advertising Expense	Check if travel outside of Te Check if Austin, TX, officeho Advertisement in e	older living expense	
9	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	ffice held	
4	Date	5 Payee name			
	8/18/2015	Johnston Campaigns			
6	Amount (\$)	7 Payee address; City;	State; Zip Code		
	2,000.00	2978 Rising Tide Lane League City TX 77573			
8	PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Consulting Expense	Check if travel outside of Te Check if Austin, TX, officeho Campaign consultin	older living expense	
9	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	ffice held	

	The Instruction Guide	explains how to complete this form.
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name	I
8/20/2015	Shipley Donuts	
Amount (\$)	7 Payee address; City;	State; Zip Code
44.02	6802 Stellalink Rd	
	Houston TX 77025	
B PURPOSE OF EXPENDITURE	(a) Category	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
	Event Expense	Food & beverages for event
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held
Date	5 Payee name	
8/20/2015	Family Dollar	
Amount (\$)	7 Payee address; City;	State; Zip Code
85.52	6865 TC Jester Blvd	
	Houston TX 77056	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description
		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
	Office Overhead/Rental Expense	Office supplies
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held
4 Date	5 Payee name	
8/25/2015	Weights + Measures	
0/20/2010		

8/25/2015	Weights + Measures		
6 Amount (\$)	7 Payee address; City;	State;	Zip Code
93.07	2808 Caroline Street		
	Houston TX 77004		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	n

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown		3 Filer ID (Ethics Commission filers)	
	Event Expense	Check if travel outside of Tex Check if Austin, TX, officehol Food & beverages fo	lder living expense	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought off	ice held	
4 Date	5 Payee name			
8/26/2015	Bridge Strategies			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
4,250.00	5106 West 43rd Houston TX 77092			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Tex Check if Austin, TX, officehol		
	Salaries/Wages/Contract Labor	Campaign managing	g services	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought off	ice held	

	I he Instruction Guide e	xplains how to complete this for	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
8/26/2015	Sprint 2 Print		
S Amount (\$)	7 Payee address; City;	State; Zip Code	
1,384.52	8748 Clay Road, Suite 300		
	Houston TX 77080		
<b>B PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description	
		Check if travel outside of T	Texas, complete Schedule T
		Check if Austin, TX, office	holder living expense
	Advertising Expense	Yard signs and t-	shirts
O Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held
Date	5 Payee name		
8/26/2015	Sprint 2 Print		
Amount (\$)	7 Payee address; City;	State; Zip Code	
2,692.72	8748 Clay Road, Suite 300		
	Houston TX 77080		
B PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of T	Texas, complete Schedule T
		Check if Austin, TX, office	holder living expense
	Advertising Expense	Yard signs & burr	nper magnets
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held
4 Date	5 Payee name		
8/26/2015	Weights + Measures		

8/26/2015	Weights + Measures	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
93.07	2808 Caroline St.	
	Houston TX 77004	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown		3 Filer ID (Ethics Commission filers)	
	Event Expense	Check if travel outside of Te Check if Austin, TX, officeho Fundraising meeting	older living expense	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	fice held	
4 Date	5 Payee name			
8/27/2015	Piryx, Inc.			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
264.84	649 Mission St.			
	#204			
	San Francisco CA 94105			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Tex Check if Austin, TX, officeho	lder living expense	
	Fees	Online donation fee	S	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	fice held	

	The Instruction Guide ex	plains how to comple	ete this form.
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
8/27/2015	LULAC Regional		
6 Amount (\$)	7 Payee address; City;	State; Zip Co	ode
86.38	1019 W Gardner Street		
	Houston TX 77009		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel of	outside of Texas, complete Schedule T
		Check if Austin,	, TX, officeholder living expense
	Contributions/Donations	Donati	on to LULAC Regional Women's Conference
	Made By		
	Candidate/Officeholder/Politi cal Committee		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought	office held
expendituree to benefit C/OH			
4 Date	5 Payee name		
8/27/2015	Greater Houston Partnership	р	
6 Amount (\$)	7 Payee address; City;	State; Zip Co	ode
275.00	1200 Smith, Suite 700		
	Houston TX 77002		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel of	outside of Texas, complete Schedule T
		Check if Austin,	, TX, officeholder living expense
	Contributions/Donations	Donati <sup>,</sup>	on to Greater Houston Partnership Banquet
	Made By		
	Candidate/Officeholder/Politi cal Committee		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought	office held
expendituree to benefit C/OH			
4 Date	5 Payee name		
8/31/2015	City of Houston - Planning &	Development	
6 Amount (\$)	7 Payee address; City;	State; Zip Co	ode
25.00	1611 Walker		

(b) Description

Houston TX 77002

8 PURPOSE OF EXPENDITURE (a) Category

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown		3 Filer ID (Ethics Commission filers)	
	Office Overhead/Rental Expense	Check if travel outside of Te Check if Austin, TX, officeho City map		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held	
4 Date	5 Payee name			
8/31/2015	Pathfinder Opinion Research	1		
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
9,475.00	2721 Devine Street, 2nd Floo Columbia SC 29205	r		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
	Polling Expense	Check if travel outside of Te Check if Austin, TX, officeho Poll		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held	

	The Instruction Guide e	xplains how to complete	this form.
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
9/2/2015	NGP VAN		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	)
320.00	1101 15th St NW, Suite 500		
	Washington DC 20005		
8 PURPOSE OF EXPENDITURE		Check if Austin, T	side of Texas, complete Schedule T X, officeholder living expense
	Office Overhead/Rental Expense	Database	access
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held
4 Date	5 Payee name		
9/8/2015	Office Depot		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	)
10.83	1576 West Gray St.		
	Houston TX 77019		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
			side of Texas, complete Schedule T X, officeholder living expense
	Office Overhead/Rental Expense	Office su	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held
4 Date	5 Payee name		
9/8/2015	Amazon		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	9
57.80	410 Terry Ave. North		

8 PURPOSE OF EXPENDITURE (a) Category

Seattle WA 98109

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown		3 Filer ID (Ethics Commission filers)	
	Office Overhead/Rental Expense	Check if travel outside of Te Check if Austin, TX, officeho Office supplies for	older living expense	
<ul> <li>9 Complete ONLY if direct expendituree to benefit C/OH</li> </ul>	Candidate / Officehoder name	office sought o	ffice held	
4 Date	5 Payee name			
9/10/2015	Burt Levine			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
300.00	9600 Glenfield Ct, Suite 148 Houston TX 77096			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
	Salaries/Wages/Contract Labor	Check if travel outside of Te Check if Austin, TX, officeho Contract services for	older living expense	
9 Complete ONLY if direct		office sought o	ffice held	
expendituree to benefit C/OH		-		

	The Instruction Guide	explains how to comp	lete this form.	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown		3 Filer ID (Ethics Commission fi	lers)
4 Date	5 Payee name		I	
9/11/2015	Johnston Campaigns			
6 Amount (\$)	7 Payee address; City;	State; Zip	Code	
2,000.00	2978 Rising Tide Lane			
	League City TX 77573			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
	Consulting Expense	Check if Aust	l outside of Texas, complete Schedule T n, TX, officeholder living expense paign consulting	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held	
4 Date	5 Payee name			
9/11/2015	Mariah Grayson			
6 Amount (\$)	7 Payee address; City;	State; Zip	Code	
190.00	4700 Calhoun Rd.			
	Houston TX 77004			
8 PURPOSE OF EXPENDITURE	(a) Category Salaries/Wages/Contract Labor	Check if Aust	l outside of Texas, complete Schedule T n, TX, officeholder living expense paign staffing	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held	
4 Date	5 Payee name			
9/12/2015	Marco Wang			
6 Amount (\$)	7 Payee address; City;	State; Zip	Code	
1,200.00	5135 Forest Sage Lane			
	Katy TX 77494			

8 PURPOSE OF EXPENDITURE (a) Category

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown	3 Filer ID (Ethics Commission filers)		
	Advertising Expense	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Photography for campaign collateral		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held		
4 Date	5 Payee name			
9/14/2015	Harris County Tejano Demo	crats		
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
500.00	3715 North Main Houston TX 77009			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
	Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Event ticket		
9 Complete ONLY if direct expendituree to benefit C/OH				

	The Instruction Guide e	xplains how to complete this f	orm.
Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown		3 Filer ID (Ethics Commission filers)
Date	5 Payee name		1
9/14/2015	K-Ree Signs		
Amount (\$)	7 Payee address; City;	State; Zip Code	
1,750.00	9211 Dulcimer Street		
	Houston TX 77051		
PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside o Check if Austin, TX, offic	of Texas, complete Schedule T ceholder living expense
	Advertising Expense	Campaign field	work & signage
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held
- Date	5 Payee name		
9/14/2015	Strong Strategies LLC		
Amount (\$)	7 Payee address; City;	State; Zip Code	
2,097.02	1551 San Felipe, Unit 117E		
	Houston TX 77056		
B PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside o	f Texas, complete Schedule T
		Check if Austin, TX, offic	ceholder living expense
	Consulting Expense	Campaign fund	Iraising & compliance services
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held
Date	5 Payee name		
9/14/2015	Mundy Katowitz Media, Inc		

9/14/2015	Mundy Katowitz Medi	a, Inc.		
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
100,000.00	1322 G St., S.E.			
	Washington DC 2000	3		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Descripti	ption	

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown		3 Filer ID (Ethics Commission filers)	
	Advertising Expense	Check if travel outside of Te Check if Austin, TX, officeh Television advertis	older living expense	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held	
4 Date	5 Payee name			
9/14/2015	Frost Bank			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
25.00	9821 Katy Freeway			
	Suite 100			
	Houston TX 77024			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Te		
	Fees	Bank wire fee		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held	

	The Instruction Guide ex	plains now to complete	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
9/14/2015	Houston Symphony		
6 Amount (\$)	7 Payee address; City;	State; Zip Cod	e
400.00	615 Louisiana, Suite 102		
	Houston TX 77002		
<b>B PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description	
		Check if travel ou	tside of Texas, complete Schedule T
		Check if Austin, T	X, officeholder living expense
	Contributions/Donations	Donation	as for Houston Symphony Gala
	Made By Candidate/Officeholder/Politi		
	cal Committee		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held
expendituree to benefit C/Orr			
4 Date	5 Payee name		
9/14/2015	ACTBlue		
6 Amount (\$)	7 Payee address; City;	State; Zip Cod	e
25.00	366 Summer Street		
	Somerville MA 2144		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel ou	tside of Texas, complete Schedule T
		Check if Austin, T	X, officeholder living expense
	Contributions/Donations	ACTBlue	Contribution
	Made By		
	Candidate/Officeholder/Politi cal Committee		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought	office held
expendituree to benefit C/OH			
4 Date	5 Payee name		
9/14/2015	NAACP Houston		
6 Amount (\$)	7 Payee address; City;	State; Zip Cod	e
300.00	2002 Wheeler Ave.		

(b) Description

Houston TX 77004

8 PURPOSE OF EXPENDITURE (a) Category

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown		3 Filer ID (Ethics Commission filers)	
	Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee	Check if travel outside of Te Check if Austin, TX, officeho Donation to NAACF	older living expense	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought of	fice held	
4 Date 9/14/2015	5 Payee name Road Women			
6 Amount (\$) 250.00	<ul> <li>Payee address; City;</li> <li>PO Box 22678, Houston, TX 7</li> <li>Houston TX 77004</li> </ul>	State; Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee	(b) Description Check if travel outside of Te Check if Austin, TX, officeho Donation made to F	older living expense	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought of	fice held	

	The Instruction Guide	explains how to complete t	this form.
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
9/17/2015	Johnston Campaigns		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
816.50	2978 Rising Tide Lane		
	League City TX 77573		
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense		side of Texas, complete Schedule T K, officeholder living expense
			g
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held
4 Date	5 Payee name		
9/17/2015	Party City		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
21.56	3225 Southwest Fwy		
	Houston TX 77027		
8 PURPOSE OF EXPENDITURE	(a) Category		side of Texas, complete Schedule T K, officeholder living expense
	Event Expense	Party supp	olies for Meet & Greet event
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held
4 Date	5 Payee name		

9/17/2015	Harris County Democratic Party							
6 Amount (\$)	7 Payee address; City;	Payee address; City; State; Zip Code						
500.00	1445 North Loop West	1445 North Loop West						
	Houston TX 77008							
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description						

The Instruction Guide explains how to complete this form.						
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown		3 Filer ID (Ethics Commission filers)			
	Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Donation for Johnson Rayburn Richards Dinner				
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought of	ffice held			
4 Date 9/18/2015	5 Payee name YMCA of Greater Houston					
6 Amount (\$) 790.00	7 Payee address; City; 808 Pease St. Houston TX 77002	State; Zip Code				
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	(b) Description Check if travel outside of Te Check if Austin, TX, officeho Venue for video				
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought of	ffice held			

8 PURPOSE OF EXPENDITURE (a) Category

	The Instruction Guide ex	plains how to complete this form.			
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown	3 Filer ID (Ethics Commission filers	5)		
4 Date	5 Payee name				
9/18/2015	City Wide Beauticians & Ba	bers Association			
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
250.00	3903 Tolnay St				
	Houston TX 77021				
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description			
		Check if travel outside of Texas, complete Schedule T			
		Check if Austin, TX, officeholder living expense			
	Contributions/Donations	Contribution for luncheon			
	Made By Candidate/Officeholder/Politi				
	cal Committee				
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held			
·					
4 Date	5 Payee name				
9/18/2015	Sprint 2 Print				
<b>6</b> Amount (\$)	7 Payee address; City;	State; Zip Code			
1,407.25	8748 Clay Road, Suite 300				
	Houston TX 77080				
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	Campaign signage			
	Can didata / Office he day a serie				
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held			
4 Date	5 Payee name				
9/18/2015	Randalls				
9/18/2015 6 Amount (\$)	7 Payee address; City;	State; Zip Code			
	2225 Louisiana				
13.04					
	Houston TX 77002				

(b) Description

The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown		3 Filer ID (Ethics Commission filers)				
	Office Overhead/Rental Expense	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Phone Banking Supplies					
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held				
4 Date	5 Payee name						
9/18/2015	Arne's						
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
80.97	2830 Hicks Street Houston TX 77007						
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description					
	Food/Beverage Expense	Check if travel outside of Te Check if Austin, TX, officeho Food & beverages	older living expense				
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held				

	The Instruction Guide e	explains how to complete this form.
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name	
9/18/2015	Foodarama	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
5.00	4805 Old Galveston RD	
	Houston TX 77017	
<b>B PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description
		Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
	Food/Beverage Expense	Food & beverages for event
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held
4 Date	5 Payee name	
9/18/2015	Scout Communications	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
5,600.00	357 Vista Creek Drive	
	Stockbridge GA 30281	
B 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	Production fee
Complete ONLY if direct     expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held
4 Date	5 Payee name	
9/18/2015	Frost Bank	

9/18/2015	Frost Bank	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
25.00	9821 Katy Freeway	
	Suite 100	
	Houston TX 77024	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

The Instruction Guide explains how to complete this form.						
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown		3 Filer ID (Ethics Commission filers)			
	Fees	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Bank wire fee				
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held			
4 Date	5 Payee name					
9/19/2015	Ice Box 4166					
6 Amount (\$)	7 Payee address; City;	State; Zip Code				
4.01	2350 Pease Houston TX 77003					
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description				
	Food/Beverage Expense	Check if travel outside of Te Check if Austin, TX, officeho Food & beverages	older living expense			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held			

	The Instruction Guide	e explains how to	complete this fo	rm.
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown	n		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name			
9/22/2015	Elite Change, Inc.			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
1,666.60	315 West Alabama St, #10	)0		
	Houston TX 77006			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Descriptio	n	
		Check	if travel outside of	Texas, complete Schedule T
		Check	if Austin, TX, office	eholder living expense
	Consulting Expense		Field program	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought		office held
4 Date	5 Payee name			
9/22/2015				
9/22/2015 6 Amount (\$)	Johnston Campaigns 7 Payee address; City;	State;	Zip Code	
11,106.44	2978 Rising Tide Lane	Oldic,		
11,100.44				
	League City TX 77573			
B PURPOSE OF EXPENDITURE		(b) Descriptio	n	
				Texas, complete Schedule T
				eholder living expense
	Advertising Expense		Print & Mail prog	
			i init a man prog	, cont
9 Complete ONLY if direct	Candidate / Officehoder name	office sought		office held
expendituree to benefit C/OH				
4 Date	5 Payee name			
9/22/2015	Johnston Campaigns			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
816.50	2978 Rising Tide Lane			

The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown		3 Filer ID (Ethics Commission filers)				
	Advertising Expense	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Pushcards printing					
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held				
4 Date	5 Payee name						
9/24/2015	Polk Shell						
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
6.00	4910 Polk St Houston TX 77023						
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description					
	Food/Beverage Expense	Check if travel outside of Te Check if Austin, TX, officeho Food & beverages	older living expense				
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held				

	The Instruction Guide exp	plains how to c	omplete this for	' <b>m.</b>
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Chris Brown			3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name			1
9/24/2015	Fiestas Patrias			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
170.00	PO Box 262871			
	Houston TX 77206			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
	Fees	Check if		Texas, complete Schedule T holder living expense on fees
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	office sought		office held
4 Date	5 Payee name			
8/20/2015	Reflections of Christ's Kingdo			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
250.00	9321 Edgebrook Drive			
	Houston TX 77075			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if	travel outside of	Texas, complete Schedule T
		Check if	Austin, TX, office	holder living expense
	Contributions/Donations		Donation	
	Made By Candidate/Officeholder/Politi			
	cal Committee			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	office sought		office held

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

E	EXPENDITURES MADE BY CREDIT CARD SCHE							
	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F4:	2	FILER NAME (	hris Brown		3 Filer ID (Ethics Commission filers)		
4	TOTAL OF UNITEMIZED EXPE	ND	ITURES CHARGED TO	A CREDIT CAR	)	\$\$99.81		
5	Date	6	Payee name					
	9/24/2015		Costco Whole	sale				
7	Amount (\$)	8	Payee address;	City;	Sta	te; Zip Code		
	99.81		1150 Bunker H	ill Rd				
			Houston TX 7	7055				
9	TYPE OF EXPENDITURE		X Political			Non-Political		
10	PURPOSE OF EXPENDITURE	· · ·	) Category (See Categories	listed at the top of this	(b) D	escription		
		SCI	ledule)			Check if travel outside of Texas, complete Schedule	e T	
						Check if Austin, TX, officeholder living expense		
			Food/Beverage	Expense		Food for Meet & Greet		
			r ood, Dororage	Experies				
11	Complete ONLY if direct expendituree to benefit C/OH	Ca	andidate / Officehoder r	ame	<u> </u>	office sought office	held	

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## ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES

	MADE FROM PERSONAL FUNDS		
The Instruction Guide explains how to complete this form.			
1	Total Pages Schedule G:	<sup>2</sup> FILER NAME Chris Brown	3 FilerID (Ethics Commission filers)
4	Date	5 Payee name	·
6	Amount (\$)	7 Payee Address;	City; State; Zip Code
	Reimbursement from		
	political contributions		
	intended		
8	PURPOSE OF EXPENDITURE	(a) Category	(b) Description
			Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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

SCHEDULE G