#### **COVER SHEET PG 1** CAMPAIGN FINANCE REPORT The SPAC Instruction Guide explains how to complete this form 1 Filer ID 2 Total pages filed: (Ethics Commission filers) 3 COMMITTEE NAME **OFFICE USE ONLY** Date Received Campaign for Houston ADDRESS / PO BOX APT/SUITE # CITY STATE ZIP CODE 10/5/2015 4 COMMITTEE **ADDRESS** 10500 Northwest Freeway Suite 212 Date Hand-delivered or Date Postmarked Houston TX 77092 Change of address MS/MRS/MR FIRST **5 CAMPAIGN** Receipt # **Amount TREASURER** Larry Date Processed NICKNAME LAST SUFFIX NAME Date Imaged Hicks STREET ADDRESS (NO PO BOX PLEASE); APT/SUITE #: STATE: ZIP CODE 6 CAMPAIGN TREASURER'S 10500 Northwest Freeway Suite 212 STREET ADDRESS **Business** Houston TX 77092 STREET OR PO BOX: APT/SUITE #; CITY: STATE; ZIP CODE 7 CAMPAIGN **TREASURER** 10500 Northwest TX 77092 Houston Freeway Suite 212 MAILING ADDRESS Change of Address AREA CODE PHONE # EXTENSION 8 CAMPAIGN TREASURER PHONE (713)785-5515 9 REPORT TYPE Exceeded \$500 limit January 15 30th day before election July 15 8th day before election Dissolution (attach PAC-DR) 10th day after campaign treasurer termination Runoff Day 10 PERIOD **THROUGH COVERED** 9/24/2015 8/7/2015 ELECTION DATE 11 ELECTION Month Day Year X General Special 11/3/2015 Runoff **GO TO PAGE 2**

SPECIFIC-PURPOSE COMMITTEE

FORM SPAC

#### SPECIFIC-PURPOSE COMMITTEE REPORT: FORM SPAC **COVER SHEET PG 2** PURPOSE AND TOTALS 12 COMMITTEE NAME Campaign for Houston 13 Filer ID (Ethics Commission filers) CANDIDATE / OFFICEHOLDER NAME 14 COMMITTEE **PURPOSE** (Attached lists on plain paper to complete CANDIDATE this report if necessary) OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) OFFICEHOLDER []SUPPORT (Candidate or Measure) [X] OPPOSE (Candidate or Measure) BALLOT IDENTIFICATION / # **ELECTION DATE** MEASURE 11/3/2015 Houston Prop 1 DESCRIPTION [] ASSIST (Officeholder) Houston "Equal Rights" Ordinance TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN 15 CONTRIBUTION \$ PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED TOTALS **TOTAL POLITICAL CONTRIBUTIONS** \$274,785.00 (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **EXPENDITURE** TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ **TOTALS TOTAL POLITICAL EXPENDITURES** \$492,231.11 TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$18,494.39 CONTRIBUTION OF REPORTING PERIOD **BALANCE** TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE OUTSTANDING \$50,000.00 LAST DAY OF THE REPORTING PERIOD LOAN TOTALS

16 AFFIDAVI	Т			
		a ir	swear, or affirm, under penalty of perjury ccompanying report is true and correct a formation reqired to be reported by me ullection Code.	and includes all
			Larry M. Hicks	
		_	Signature of Campaign Tre	asurer
AFFIX NOTARY STA	AMP / SEAL ABOVE			
Sworn to and su	bscribed before me, by	the said	, this the	day
of	, 20	, to certify which, witness my hand	and seal of office.	
Signature of office	cer administering oath	Printed name of officer administeri	ng oath Title of officer admi	nistering oath

#### SUBTOTALS - SPAC FORM SPAC **COVER SHEET PG 3** 17 COMMITTEE NAME Campaign for Houston 18 Filer ID (Ethics Commission filers) 19 SCHEDULE SUBTOTALS **SUBTOTAL** NAME OF SCHEDULE **AMOUNT** SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 1 \$ \$270,375.00 2 SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$\$4,410.00 SCHEDULE B: PLEDGED CONTRIBUTIONS 3 \$ SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$ 4 SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR \$ 5 ORGANIZATIOND SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATIONS OR LABOR ORGANIZATION \$ 6 \$ 7 SCHEDULE E: LOANS SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 8 SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 9 SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLICITAL CONTRIBUTIONS 10 \$\$50,000.00 11 SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS \$ 12 \$ 13 SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	S	SCHEDULE A1
The	e Instruction (	Guide explains how to complete	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME		3 Filer ID (Ethics Commission filers)		
4	Date	5 Full name of contributor  Norman E Adams	out of state	PAC(ID# )	7 Amount of contributions (\$)
	8/26/2015	6 Contributor address;	City; Houston	State; Zip Code	1000.00
8	Principal occ	supation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor  Arthur Muller	out of state	PAC(ID# )	7 Amount of contributions (\$)
	8/26/2015	6 Contributor address;	City; Katy	State; Zip Code TX 77494	100.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  Beverly Roberts	out of state	PAC(ID# )	7 Amount of contributions (\$)
	8/26/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77009	100.00
8	Principal occ	rupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Sabina Weir	out of state	PAC(ID# )	7 Amount of contributions (\$)
	8/26/2015	6 Contributor address;	City; Cypress	State; Zip Code TX 77429	300.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

M	ONETAR	Y POLITICAL CONTE	RIBUTION	S	SCHEDULE A1
Th	e Instruction (	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 F	FILER NAME				3 Filer ID (Ethics Commission filers)
		Layton Klotz			7 Amount of contributions (\$)
	8/26/2015	6 Contributor address;	City; Richmond	State; Zip Code TX 77407	10.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	7 Amount of contributions (\$)
	9/24/2015	Texans for Family Values PAC  6 Contributor address;	City; Houston	State; Zip Code TX 77269	7 Amount of contributions (\$)  10000.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor  Mac Haik Ford	out of state	PAC(ID# )	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	8/27/2015		Houston	TX 77024	10000.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	L tions)
4	Date	5 Full name of contributor  Committee to Support R Jack Cagle	out of state	PAC(ID# )	7 Amount of contributions (\$)
	8/28/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77001	25000.00
8	Principal occ	supation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

M	ONETARY	Y POLITICAL CONTR	IBUTION	S	SCHEDULE A1
Th	e Instruction G	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME				3 Filer ID (Ethics Commission filers)
		Edd Hendee			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	8/28/2015		Houston	TX 77024	5000.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Allen R Hartman			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	8/31/2015		Houston	TX 77057	100000.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Law Office of Melanie Flowers, PC	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	8/31/2015		Houston	TX 77002	10000.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Paul Pressler		- (	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	8/31/2015		Houston	TX 77056	5000.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	Litions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Ralph Schmidt			7 Amount of contributions (\$)

MONETAR	RY POLITICAL CONTR	SCHEDULE A		
The Instruction	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FILER NAME				3 Filer ID (Ethics Commission filers)
	6 Contributor address;	City;	State; Zip Code	
9/1/2015		Schulenburg	TX 78956	25000.00
8 Principal of	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ztions)
4 Date	5 Full name of contributor	out of state F	PAC(ID# )	
	Gayle Gruver	_		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/2/2015		Conroe	TX 77304	50.00
8 Principal or	ccupation / Job title (See Instructions)		9 Employer (See Instruc	trions)
4 Date	5 Full name of contributor	out of state F	PAC(ID# )	
	Denise M Williams			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/2/2015		Houston	TX 77041	50.00
8 Principal or	ccupation / Job title (See Instructions)		9 Employer (See Instruc	trions)
4 Date	5 Full name of contributor	out of state F	PAC(ID# )	
	David Paul			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/3/2015		Houston	TX 77043	20.00
8 Principal or	ccupation / Job title (See Instructions)		9 Employer (See Instruc	tions)

M	ONETAR	Y POLITICAL CONTI	RIBUTIONS	S	SCHEDULE A1
The	e Instruction (	Guide explains how to complet	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME		3 Filer ID (Ethics Commission filers)		
4	Date	5 Full name of contributor  Jeffrey Jones	out of state	PAC(ID# )	7 Amount of contributions (\$)
	9/3/2015	6 Contributor address;	City; Houston	State; Zip Code	35.00
	9/3/2013		Houston	17 77004	33.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Paul Guettler	out of state	PAC(ID# )	7 Amount of contributions (\$)
	9/3/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77084	50.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  Joann Jones	out of state	PAC(ID# )	7 Amount of contributions (\$)
	9/3/2015	6 Contributor address;	City; Cypress	State; Zip Code TX 77433	20.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  Ryan Sitton	out of state	PAC(ID# )	7 Amount of contributions (\$)
	9/4/2015	6 Contributor address;	City; Austin	State; Zip Code TX 78734	10000.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

The Instruction	on Guide explains how to comp	1 Total Pages Schedule A1:		
2 FILER NAM	ME			3 Filer ID (Ethics Commission filers)
	Dan Huberty	*		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/4/2015		Houston	TX 77046	5000.00
8 Principa	I occupation / Job title (See Instructions	s)	9 Employer (See Instru	ctions)
4 Date	5 Full name of contributor	out of state I	PAC(ID# )	
	Anthony McCorvey	Ь		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/4/2015		Galena Park	TX 77547	10000.00
8 Principa	I occupation / Job title (See Instructions	s)	9 Employer (See Instru	ctions)
4 Date	5 Full name of contributor	out of state I	PAC(ID# )	
	Bryan Jones			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/4/2015		Pearland	TX 77581	25.00
8 Principa	l occupation / Job title (See Instructions	s)	9 Employer (See Instru	ctions)
4 Date	5 Full name of contributor	out of state I	DAC(ID# )	
4 Date	Monica Benton	Out of State	-AC(ID# )	7 Amount of contributions (\$)
				_
9/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	100.00
3/4/2013		i ioustoii	17. 11024	100.00
8 Principa	l occupation / Job title (See Instructions	s)	9 Employer (See Instru	ctions)
4 Date	5 Full name of contributor	out of state I	PAC(ID# )	
	Christopher Carter			7 Amount of contributions (\$)

MONETAN	Y POLITICAL CONT	KIBUTION	13	SCHEDULE A
The Instruction	Guide explains how to comple	1 Total Pages Schedule A1:		
2 FILER NAME				3 Filer ID (Ethics Commission filers)
9/5/2015	6 Contributor address;	City; Houston	State; Zip Code	20.00
8 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instru	uctions)
4 Date	5 Full name of contributor Astolfo Rios	out of state	PAC(ID# )	7 Amount of contributions (\$)
9/5/2015	6 Contributor address;	City; Houston	State; Zip Code	40.00
8 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instru	uctions)
4 Date	5 Full name of contributor Glenda Piacenti	out of state	PAC(ID# )	7 Amount of contributions (\$)
9/10/2015	6 Contributor address;	City; Porter	State; Zip Code TX 77365	25.00
8 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instru	uctions)
4 Date	5 Full name of contributor Christopher Hrabina	out of state	PAC(ID# )	7 Amount of contributions (\$)
9/11/2015	6 Contributor address;	City; Bayton	State; Zip Code TX 77523	50.00
8 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instru	uctions)

M	ONETAR	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A1
The	e Instruction (	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME		3 Filer ID (Ethics Commission filers)		
4	Date	5 Full name of contributor Bart Standley	out of state	PAC(ID# )	7 Amount of contributions (\$)
	9/11/2015	6 Contributor address;	City; Waller	State; Zip Code TX 77484	100.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor  Gary Nuschler	out of state	PAC(ID# )	7 Amount of contributions (\$)
	9/13/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77080	500.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  Dwayne A Bohac for State Rep	out of state	PAC(ID# )	7 Amount of contributions (\$)
	9/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77055	1000.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  Johnny Baker	out of state	PAC(ID# )	7 Amount of contributions (\$)
	9/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77055	10000.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

M(	ONETAR	Y POLITICAL CONT	RIBUTION	S		SCHEDULE	Α1
The	he Instruction Guide explains how to complete this form.					l Pages Schedule A1:	
2 F	ILER NAME				3 Filer ID (I	Ethics Commission filers)	
		William Carl			7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	9/16/2015		Houston	TX 77007		5000.00	
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# )	<u> </u>		
		Jay E Mincks	Ц		7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	9/17/2015		Kingwood	TX 77345		5000.00	
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# )			
		Jodie L Jiles	_		7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	9/17/2015		Houston	TX 77259		1000.00	
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# )			
		Courtney Kim	Ш		7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	9/17/2015		Houston	TX 77098		500.00	
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# )			
		Mickey Ellis	_		7	Amount of contributions (\$)	

MONETAR	RY POLITICAL CONTR	SCHEDULE A		
The Instruction	Guide explains how to complete	this form.		1 Total Pages Schedule A1:
2 FILER NAME	<u> </u>			3 Filer ID (Ethics Commission filers)
	6 Contributor address;	City;	State; Zip Code	
9/18/2015		Houston	TX 77094	20000.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4 Date	5 Full name of contributor	out of state F	PAC(ID# )	
	Emily Kinkler			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/18/2015		Manvel	TX 77578	30.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor	out of state F	PAC(ID# )	
	Malcolm Morris			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/21/2015		Houston	TX 77019	5000.00
8 Principal oc	Ccupation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)
4 Date	5 Full name of contributor	out of state F	PAC(ID# )	
	Gary Elkins Campaign			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/21/2015		Jersey Village	TX 77040	5000.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	tions)

M	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A		
Th	The Instruction Guide explains how to complete this form.						otal Pages Schedule A1:	
2 F	FILER NAME	:				3 Filer I	D (Ethics Commission filers)	
4	Date	5 Full name of contributor  Nancy Scales	out of state	e PAC(ID# )		7	Amount of contributions (\$)	
	9/23/2015	6 Contributor address;	City; Houston	State;	Zip Code 1		250.00	
8	8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)				
		ATTACH ADDITIO						
1								

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS					SCHEDULE A2			
The I	The Instruction Guide explains how to complete this form.					1 Total Pages Schedule A2:		
2 FIL	ER NAME				3 Fi	iler ID (Ethics Commi	ssion filers)	
4 TO	TAL OF UI	NITEMIZED IN-KIND POLITION	CAL CONTRIBL	JTIONS	\$			
5 Date		6 Full name of contributor  Allen R Hartman	out of state	PAC(ID# )	8	Amount of	9 In-Kind contribution	
		Aller IX Traitman				contributions (\$)	description	
		7 Contributor address;	City;	State; Zip Code			i !	
	8/15/2015		Houston	TX 77057		2205.00	Office space for campaign	
						Check if travel outs Schedule T	ide of Texas, complete	
10	Principal oc	cupation / Job title (See Instructions)		11 Employer (See Instru	uction	ns)		
5	Date	6 Full name of contributor	out of state	PAC(ID# )				
		Allen R Hartman	Ц		8	Amount of contributions (\$)	9 In-Kind contribution description	
		7 Contributor address;	City;	State; Zip Code	-			
,	9/15/2015		Houston	TX 77057		2205.00	Office space for campaign	
						Check if travel outs Schedule T	ide of Texas, complete	
10 Principal occupation / Job title (See Instructions)			11 Employer (See Instru	uction	ns)			
		ATTACH ADDIT	IONAL COPIES	OF THIS SCHEDUL	E A	S NEEDED		
		If contributor is out-of-state F	AC please see in	struction quide for addition	nal r	enorting requireme	nte	

LOANS						SCHEDULE E	
	The	Instruction Guide explains ho	w to complete this	form.		1	Total Pages Schedule E:
2 FI	LER NAME					3	Filer ID (Ethics Commission filers)
4	4 TOTAL OF UNITEMIZED LOANS: => => => => =>						
5	Date of loan	7 Name of lender	out of state PAC(I	D# )			
		Steve Hotze				9	Loan Amount (\$)
	8/26/2015						50,000.00
6	Is Lender a	8 Lender Address;	City;	State;	Zip Code	10	Interest rate
	Financial		Katy	TX	77450		0.00%
	Institution?					11	Maturity date
	No						12/31/2015
12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions)				oyer (See Instr	uction	ns)	
	Physician						
14 Description of collateral 15			Check if perso (See instruction		unds were deposited into political account		
	None				- (Occ mandent	5113)	
16	GUARANTOR	17 Name of guarantor				19	Amount Guaranteed (\$)
	INFORMATION						
		18 Guarantor address;	City;	State;	Zip Code		
	not applicable						
20 Principal Occupation			21 Emp	loyer	•		
		ATTACH ADDITION	IAL COPIES OF	THIS SC	HEDULE AS	S NE	EDED
		If lender is out-of-state PAC, pl	ease see instruction	guide for	additional rep	ortin	g requirements

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission filers)			
4 Date	5 Payee name				
8/26/2015	512 New Media Group				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
10,050.00	800 Town & County Blvd, Su	uite 410			
	Houston TX 77024				
8 PURPOSE OF EXPENDITURE	(a) Category  Advertising Expense	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Ad creation and production			
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held			
4 Date	5 Payee name				
8/28/2015	Sarah Gregg				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
2,258.06	5318 Walnut Vista Dr				
8 PURPOSE OF EXPENDITURE	San Antonio TX 78247	(b) Description			
6 PURPOSE OF EXPENDITURE	Solicitation/Fundraising Expense	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Fundraising consultant			
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held			
4 Date	5 Payee name				
8/28/2015	Cowart & Associates				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
4,500.00	11102 Hidden Bend Dr  Houston TX 77064				
8 PURPOSE OF EXPENDITURE		(b) Description			
O LOVEOSE OF EVERNITURE	i (a) Galegory	(b) Description			

#### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) <sup>2</sup> FILER NAME Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Salaries/Wages/Contract Campaign manager Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 8/28/2015 John Doner & Associates, Inc. 7 Payee address; 6 Amount (\$) City; State; Zip Code 5,412.50 823 Congress Ave, Suite 1030 Austin TX 78701 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Mailing list Advertising Expense Candidate / Officehoder name 9 Complete ONLY if direct office held office sought expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission filers)			
4 Date	5 Payee name				
8/28/2015	Edward M. Shack	0.1. 7. 0.1.			
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
1,960.00	814 San Jacinto Blvd, Suite 2	02			
	Austin TX 78701				
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description			
		Check if travel outside of Texas, complete Schedule T			
		Check if Austin, TX, officeholder living expense			
	Legal Services	Legal fees			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held			
,					
4 Date	5 Payee name				
8/28/2015	The Yates Company				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
10,000.00	PO Box 75190				
	Houston TX 77234				
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description			
		Check if travel outside of Texas, complete Schedule T			
		Check if Austin, TX, officeholder living expense			
	Consulting Expense	Political consulting			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held			
experience to benefit 6/611					
4 Date	5 Payee name				
9/3/2015	American Express				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
99,984.75	P.O.Box 981540				
	El Paso TX 79998				
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description			

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) <sup>2</sup> FILER NAME Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense OTHER (enter a category not Credit card payment listed above) 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 9/3/2015 Larry M. Hicks, CPA 7 Payee address; 6 Amount (\$) City; Zip Code State; 1,265.00 10500 Northwest Freeway, Suite 212 Houston TX 77092 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Accounting and compliance services Accounting/Banking 9 Complete ONLY if direct Candidate / Officehoder name office sought office held

expendituree to benefit C/OH

	The Instruction Guide ex	plains how to complete this form	1.	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME		3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name			
9/14/2015	Gulf Direct, Inc.			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
5,674.88	PO Box 142646			
	Austin TX 78714			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Te	exas, complete Schedule T	
		Check if Austin, TX, officeho	older living expense	
	Advertising Expense	Communications c	onsulting	
	and the second s		-	
9 Complete ONLY if direct	Candidate / Officehoder name	office sought o	ffice held	
expendituree to benefit C/OH				
4 Date	5 Payee name			
9/14/2015	The Yates Company			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
5,000.00	PO Box 75190			
	Houston TX 77234			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Te	exas, complete Schedule T	
		Check if Austin, TX, officeho	older living expense	
	Consulting Expense	Political consulting		
	Zonosimiy Zapones			
9 Complete ONLY if direct	Candidate / Officehoder name	office sought o	ffice held	
expendituree to benefit C/OH				
4 Date	5 Payee name			
9/23/2015	512 New Media Group			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
8,750.00	800 Town & County Blvd, Suite 410			
·				
	Houston TX 77024			
8 PURPOSE OF EXPENDITURE		(b) Description		

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) <sup>2</sup> FILER NAME Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Ad creation and production Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 9/23/2015 **American Express** 7 Payee address; 6 Amount (\$) Zip Code City; State; P.O.Box 981540 100,365.75 El Paso TX 79998 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit card payment OTHER (enter a category not listed above) 9 Complete ONLY if direct Candidate / Officehoder name office sought office held

expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME	3 Filer ID (Ethics Commission filers)			
4 Date	5 Payee name	,			
9/23/2015	Baselice & Associates				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
31,610.00	4131 Spicewood Springs Roa	ad, O2			
	Austin TX 78759				
8 PURPOSE OF EXPENDITURE	(a) Category Polling Expense	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Polling			
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held			
4 Date	5 Payee name				
9/23/2015	Johnny Villareal				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
140.00	17515 Spring Cypress Rd, Ар	ot 179			
	Cypress TX 77246				
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Security			
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held			
4 Date	5 Payee name				
9/23/2015	Larry M. Hicks, CPA				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
196.10	10500 Northwest Freeway, S	uite 212			
O DUDDOSE OF EVDENDITUDE	Houston TX 77092	(h) Description			
8 PURPOSE OF EXPENDITURE	rai Calegory	(b) Description			

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) <sup>2</sup> FILER NAME Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Accounting and compliance services Accounting/Banking 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 9/23/2015 Mark Stepanski 7 Payee address; 6 Amount (\$) City; Zip Code State; 140.00 419 Kielly Road Magnolia TX 77354 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Security Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

#### POLITICAL EXPENDITURES SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission filers) 1 Total pages Schedule F1: <sup>2</sup> FILER NAME 4 Date 5 Payee name 9/23/2015 Sprint 2 Print **6** Amount (\$) 7 Payee address; City; Zip Code State: 3,626.38 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 Yard signs Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 9/23/2015 Unforgettable T-Shirts 7 Payee address; 6 Amount (\$) City; State; Zip Code 947.19 Cherrybrook Pasadena TX 77502 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 T-Shirts 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED