CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

CAMI AICH I III	ANOL ILLI OILI					VER OHEEL I G
The C/OH Instruction	n Guide explains how to com	plete this form	1 Filer ID(Eth	hics Comr	nission filers)	2 Total pages filed
3 CANDIDATE /	MS/MRS/MR	FIRST	MI		OF	FICE USE ONLY
OFFICEHOLDER	Ms.	Karla			Date Receive	ed
NAME	NICKNAME	LAST	SUFFIX		12/4/2015	
		Cisneros				
4 CANDIDATE /	ADDRESS / PO BOX;	APT/SUITE #; CITY;	STATE; ZIP C	ODE		
OFFICEHOLDER	P.O. Box 8830					
MAILING					Date Hand-delive	ered or Date Postmarked
ADDRESS	Houston TX 77249					
Change of address 5 CANDIDATE /	AREA CODE	PHONE NUMBER	EXTENSION			
OFFICEHOLDER	(713) 861-2244		2/112/10/01			
PHONE	(713) 001-2244					
6 CAMPAIGN	MS/MRS/MR	FIRST	MI		Receipt #	Amount
TREASURER	Ms.	Ann			Date Process	sed
NAME	NICKNAME	LAST	SUFFIX		Date Imaged	
		Grandich				
7 CAMPAIGN	STREET ADDRESS (No PO Box Plea	ase);	APT/SUITE #;		CITY; STATE;	ZIP CODE
TREASURER	714 Pecore					
ADDRESS						
(Resident or business)	Houston TX 77009					
8 CAMPAIGN	AREA CODE	PHONE NUMBER	EXTENSION			
TREASURER PHONE	(713) 817-7014					
	January 15 30th day be	efore election Final re	epport (Attach C/OH	- FR)	Exceeded \$500 limit	
9 REPORT TYPE					•	
	July 15 8th day before	ore election X Runoff			15th day after campai	gn treasurer appointment(officeholder only)
10 PERIOD	Month Day	Year			Month	Day Year
COVERED	10/25/201	5	THROUGH		12	/2/2015
11 ELECTION	ELECTION DATE	ELECTION T	YPE			
	Month Day Year	Primary	X Rui	noff	General	Special
	12/12/2015		<u> </u>	11011		Operation
12 OFFICE	OFFICE HELD (if any)		13 OF	FFICE SOUG	HT (if known)	
			Ci	ity Coun	cil - District H	

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 FILER NAME Karla	Cisneros		15 Filer ID (Ethics Com	mission Filers)			
	expenditures may have	f political contributions accepted or political expenditures m been made without the candidate's or officeholder's know receive notice of such expenditures.	ade by political committees to support the ledge or consent. Candidates and officely	e candidate / officeholder. These holders are required to report this			
16 NOTICE FROM	COMMITTEE TYPE	COMMITTEE NAME					
POLITICAL	GENERAL	COMMITTEE ADDRESS					
COMMITTEE(S)							
	SPECIFIC						
		COMMITTEE CAMPAIGN TREASURER NAME					
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS					
17 CONTRIBUTION TOTALS		AL CONTRIBUTIONS OF \$50 OR LESS (ONS), OR GUARANTEES OF LOANS), UNLE		\$			
TOTALS		· · · · · · · · · · · · · · · · · · ·		Ψ			
	2 TOTAL POLITIC	CAL CONTRIBUTIONS		\$23,725.00			
	(OTHER THAN F	PLEDGES, LOANS, OR GUARANTEES OF		,			
EXPENDITURE	3 TOTAL POLITIC	AL EXPENDITURES OF \$100 OR LESS, U	NLESS ITEMIZED				
TOTALS				\$			
	4 TOTAL POLITIC	CAL EXPENDITURES					
				\$24,606.85			
CONTRIBUTION		AL CONTRIBUTIONS MAINTAINED AS OF					
BALANCE	OF REPORTING	PERIOD		\$5,770.75			
OUTSTANDING LOAN		PAL AMOUNT OF ALL OUTSTANDING LOA	NS AS OF THE	_			
TOTALS	LAST DAY OF T	HE REPORTING PERIOD		\$			
18 AFFIDAVIT							
		report is true a	rm, under penalty of perjury, the nd correct and includes all info	rmation required to be			
		reported by me	e under Title 15, Election Code				
			Karla Cisneros				
			Signature of Candidate or 0				
AFFIX NOT STAMP / SE	EAL ABOVE						
Sworn to and subscribed	l before me, by the said	d	, this the	day			
of	, 20	, to certify which, witness my ha	and and seal of office.				
Signature of officer admir	nistering oath	Print name of officer administering or	ath Title of officer	administering oath			

SU	JΒ	TOTALS - COH	FORM C/OH
			COVER SHEET PG 3
19 F	FIL	ER NAME Karla Cisneros	20 Filer ID (Ethics Commission Filers)
21	S	CHEDULE SUBTOTALS	SUBTOTAL
	Ν	AME OF SCHEDULE	AMOUNT
1.		SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	23725
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS	
4.		SCHEDULE E: LOANS	
5.		SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	24606.85
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLICITAL CONTRIBUTION	IS
8.		SCHEDULE F4: EXPENDITURES MADE FROM CREDIT CARD	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF	F C/OH
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRI	BUTIONS
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RE	ETURNED TO FILER

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

FORM C/OH ADDENDUM

C/OH NAME Karla Cisneros

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.

M	ONETAR'	Y POLITICAL CONT	SCHEDULE A1		
Th	e Instruction (Guide explains how to comple	1 Total Pages Schedule A1:		
2 F	ILER NAME I	Karla Cisneros			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Matthew Hartzell	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77009	\$300.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Howard Jefferson	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/19/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77035	\$500.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Edgardo Colon P.C.	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/19/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77007-5473	\$500.00
8 Principal occupation / Job title (See Instructions) 9 Emp		9 Employer (See Instruct	tions)		
4	Date	5 Full name of contributor David M. Mincberg	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/19/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77046-0107	\$500.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct Flagship Properties	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	

M	ONETAR	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A1
Th	e Instruction	Guide explains how to complet	1 Total Pages Schedule A1:		
2 F	FILER NAME	Karla Cisneros			3 Filer ID (Ethics Commission filers)
		Neil Thomas			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/19/2015		Houston	TX 77030	250.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Barron Wallace	Ш		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/19/2015		Houston	TX 77021	250.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Claudia Williamson	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	•
	11/19/2015		Houston	TX 77008-1507	200.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
	Date	5 Full name of contributor	out of state	PAC(ID#)	1
4	Date	LAN-PAC	Out of state	FACID#)	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/19/2015		Houston	TX 77042	250.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Ousley Lacy			7 Amount of contributions (\$)

M	ONETAR'	Y POLITICAL CONTR	IBUTIONS	5	SCHEDULE A1
Th	e Instruction C	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME I	Karla Cisneros			3 Filer ID (Ethics Commission filers)
		6 Contributor address;	City;	State; Zip Code	
	11/19/2015		Houston	TX 77047	500.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)
	President			Lazer Construction Com	npany, Inc.
4	Date	5 Full name of contributor	out of state F	PAC(ID#)	
		Cisneros Design Studio Architects LLC	П		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/14/2015		Houston	TX 77007-3387	2,500.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Ū	·				,
4	Date	5 Full name of contributor	out of state F	PAC(ID#)	
		3480 West 11th Street LLC	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/18/2015		Houston	TX 77002	1,000.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID#)	
		Janet E. Vander Lee	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/12/2015		Houston	TX 77009-1015	50.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	Litions)
4	Date	5 Full name of contributor	out of state F	PAC(ID#)	T
•		Norton Rose Fulbright US LLP Texas Committee		` '	7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	RIBUTIONS	5	SCHEDULE A1
Th	e Instruction G	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 F	FILER NAME I	Karla Cisneros			3 Filer ID (Ethics Commission filers)
		6 Contributor address;	City;	State; Zip Code	
	11/5/2015		Houston	TX 77010	1,000.00
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		K. Lance Gould	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/14/2015		Houston	TX 77005	500.00
8	Principal occu	Principal occupation / Job title (See Instructions)			Detions)
	Physician			University of Texas Med	dical School at Houston
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Greater Houston Restaurant Association PAC			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/11/2015		Houston	TX 77007-5067	250.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	otions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Belmont Holdings LLC	Ц		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/19/2015		Houston	TX 77007	500.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Linebarger Goggan Blair & Sampson, LLP	Ц		7 Amount of contributions (\$)

MONET	ARY POLITICAL CONTR	SCHEDULE A		
The Instruct	ion Guide explains how to complete	1 Total Pages Schedule A1:		
2 FILER NA	ME Karla Cisneros			3 Filer ID (Ethics Commission filers)
	6 Contributor address;	City;	State; Zip Code	
11/20/201	15	Austin	TX 78760	1,000.00
8 Principa	al occupation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4 Date	5 Full name of contributor Sue Ann Payne	out of state F	PAC(ID#)	7 Amount of contributions (\$)
11/20/201	6 Contributor address;	City; Montgomery	State; Zip Code	100.00
8 Princip	al occupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor Harry Hartley	out of state F	PAC(ID#)	7 Amount of contributions (\$)
11/19/201	6 Contributor address;	City; League City	State; Zip Code TX 77573	1,000.00
8 Principa Preside	al occupation / Job title (See Instructions)		9 Employer (See Instruction I.C.T. Engines, Inc.	I tions)
4 Date	5 Full name of contributor Melissa Noriega	out of state F	PAC(ID#)	7 Amount of contributions (\$)
11/20/201	6 Contributor address;	City; Houston	State; Zip Code TX 77023	100.00
8 Principa	al occupation / Job title (See Instructions)		9 Employer (See Instruc	I tions)

M	ONETARY	POLITICAL CONTI	RIBUTIONS	5	SCHEDULE A1
Th	e Instruction G	Guide explains how to complet	te this form.		1 Total Pages Schedule A1:
2 F	FILER NAME K	Karla Cisneros			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor The Clifford Group	out of state I	PAC(ID#)	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code	250.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Alexander Harber	out of state I	PAC(ID#)	7 Amount of contributions (\$)
	11/19/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77042	500.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Schlumberger	I tions)
4	Date	5 Full name of contributor William Vela	out of state I	PAC(ID#)	7 Amount of contributions (\$)
	11/19/2015	6 Contributor address;	City; Sugar Land	State; Zip Code TX 77479	100.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Peter Brown	out of state I	I PAC(ID#)	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77098	500.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Better Houston	I tions)
4	Date	5 Full name of contributor	out of state I	PAC(ID#)	

M	ONETAR	Y POLITICAL CONT	TRIBUTIONS	5		SCHEDULE	A 1
Th	e Instruction G	Guide explains how to compl	1 Total Pages Schedule A1:				
2 F	ILER NAME	Karla Cisneros			3 Filer ID (Ethics Co	mmission filers)	
		Kenneth Valach	1		7 Amo	unt of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/16/2015		Houston	TX 77024		1,000.00	
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc			
4	Date	5 Full name of contributor	out of state F	PAC(ID#)			
•		Glenda Owen		,	7 Amo	unt of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/14/2015		Houston	TX 77009		500.00	
8	Principal occi Dentist	upation / Job title (See Instructions))	9 Employer (See Instruction Self	I tions)		
4	Date	5 Full name of contributor David Cisneros	out of state F	PAC(ID#)	7 Amoi	unt of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/12/2015		Los Angeles	CA 90026		200.00	
8	Principal occi	upation / Job title (See Instructions))	9 Employer (See Instruc	[tions)		
4	Date	5 Full name of contributor	out of state F	PAC(ID#)			
		Marlene Marker			7 Amoi	unt of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/11/2015		Houston	TX 77055-7509		2,000.00	
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)		
	CEO			Marker Group			
4	Date	5 Full name of contributor James Reuther	out of state F	AC(ID#)	7 Amo	unt of contributions (\$)	

M	ONETAR'	Y POLITICAL CONTR	SCHEDULE A		
Th	ne Instruction G	Guide explains how to complete	1 Total Pages Schedule A1:		
2 I	FILER NAME I	Karla Cisneros	3 Filer ID (Ethics Commission filers)		
	11/7/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77042	1,000.00
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruction Park Road Builders	ctions)
4	Date	5 Full name of contributor John Schaff	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/6/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77023	125.00
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
4	Date	5 Full name of contributor Alan Atkinson	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/5/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	5,000.00
8		upation / Job title (See Instructions) y & Real Estate		9 Employer (See Instruction Self Employed	Letions)
4	Date	5 Full name of contributor Tashon D. Thomas	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/28/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77079	200.00
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)

M	ONETAR	Y POLITICAL CONT	RIBUTION	S		SCHEDULE A1
Th	e Instruction	Guide explains how to comple	1 Tot	tal Pages Schedule A1:		
2 I	FILER NAME	Karla Cisneros	3 Filer ID	(Ethics Commission filers)		
4	Date	5 Full name of contributor Betty Grandich	out of state	PAC(ID#)	7	Amount of contributions (\$)
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77009	-	500.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instru	ctions)	
4	Date	5 Full name of contributor Becky Houston	out of state	PAC(ID#)	7	Amount of contributions (\$)
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77009	-	250.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instru	ctions)	
4	Date	5 Full name of contributor Lance Gilliam	out of state	PAC(ID#)	7	Amount of contributions (\$)
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	-	250.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instru	ctions)	
4	Date	5 Full name of contributor Dody Blackman	out of state	PAC(ID#)	7	Amount of contributions (\$)
	11/29/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77009	-	100.00
8	Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)				ctions)	

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
2 FILER NAME Karla Cisneros	3 Filer ID (Ethics Commission filers)
	1
ATTACH ADDITIONAL COPIES OF THIS S	CHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide	e for additional reporting requirements

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:				
	² FILER NAME Karla Cisneros	3 Ther ID (Ethics Commission mers)		
4 Date	5 Payee name			
11/23/2015	Harris County Democratic Pa	· ·		
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
120.00	1445 North Loop W, Ste. 110			
	Houston TX 77008			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Texas, complete Schedule T		
		Check if Austin, TX, officeholder living expense		
	Fees	membership Fee		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held		
expendituree to benefit C/OH				
4 Date	5 Payee name			
11/23/2015	Sprint 2 Print			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
2,354.44	8748 Clay Rd., Ste. 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		
	Printing Expense	Printing		
	Trinting Expense	g		
9 Complete ONLY if direct	Candidate / Officehoder name	 office sought office held		
expendituree to benefit C/OH				
4 Date	5 Payee name			
11/30/2015	Johnston Campaigns			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
6,941.80	2978 Rising Tide Lane	•		
0,041.00	2070 Moning Flue Latte			
	Houston TX 77573			
DIIDDOSE OF EVDENDITUDE		(h) Description		
8 PURPOSE OF EXPENDITURE	(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) ² FILER NAME Karla Cisneros Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Printing & Mail **Printing Expense** 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/20/2015 Johnston Campaigns 7 Payee address; 6 Amount (\$) City; Zip Code State; 1,656.85 2978 Rising Tide Lane Houston TX 77573 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Printing & Mail **Printing Expense** 9 Complete ONLY if direct Candidate / Officehoder name 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 Karla Cisneros	3	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/18/2020	Harris County Democratic Pa	arty	
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1,000.00	1445 North Loop W, Ste. 110		
	Houston TX 77008		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehold	der living expense
	Printing Expense	Printing & Mail	
	3 7 3 3		
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought offi	ce held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/10/2015	Johnston Campaigns		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
7,150.02	2978 Rising Tide Lane		
	Houston TX 77573		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehold	der living expense
	Printing Expense	Printing & Mail	
		_	
9 Complete ONLY if direct	Candidate / Officehoder name o	ffice sought offi	ce held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/20/2015	Paypal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
3.20	2211 North First		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE		(b) Description	
	İ	İ	

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) ² FILER NAME Karla Cisneros Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Fees Fee 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/20/2015 Paypal 7 Payee address; 6 Amount (\$) State; Zip Code City; 2211 North First 7.55 San Jose CA 95131 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name 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 Karla Cisneros	3	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/19/2015	Paypal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
14.80	2211 North First		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
		Check if Austin, TX, officeh	older living expense
	Fees	Fee	
9 Complete ONLY if direct	Candidate / Officehoder name	office sought c	office held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/19/2015	Paypal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
3.20	2211 North First		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
		Check if Austin, TX, officeh	older living expense
	Fees	Fee	
9 Complete ONLY if direct	Candidate / Officehoder name	office sought c	office held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/18/2015	Paypal Paypal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
14.80	2211 North First		
	San Jose CA 95131		
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) ² FILER NAME Karla Cisneros Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Fees Fee 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/16/2015 Paypal 7 Payee address; 6 Amount (\$) Zip Code City; State; 2211 North First 29.30 San Jose CA 95131 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name 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 Karla Cisneros		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/14/2015	Paypal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
14.80	2211 North First		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Fees	Fee	
9 Complete ONLY if direct	Candidate / Officehoder name o	office sought of	ffice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/12/2015	Paypal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
6.10	2211 North First		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Fees	Fee	
	. 555		
9 Complete ONLY if direct	Candidate / Officehoder name o	I office sought of	ffice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/11/2015	Paypal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
58.30	2211 North First		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE		(b) Description	
1	· ·	(

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) ² FILER NAME Karla Cisneros Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Fees Fee 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/7/2015 Paypal 7 Payee address; 6 Amount (\$) State; Zip Code City; 2211 North First 29.30 San Jose CA 95131 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.			
Total pages Schedule F1:	² FILER NAME Karla Cisneros	3	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/6/2015	Paypal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
3.93	2211 North First		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description Check if travel outside of Telegraphic Check if Austin, TX, officeholder Fee	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought c	office held
4 Date	5 Payee name		
11/5/2015	 Paypal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
145.30	2211 North First		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
	Fees	Check if travel outside of Te Check if Austin, TX, officehoree	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought c	office held
4 Date	5 Payee name		
11/30/2015	Paypal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
7.55	2211 North First		
	San Jose CA 95131		
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) ² FILER NAME Karla Cisneros Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Fees Fee 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/30/2015 Paypal 7 Payee address; 6 Amount (\$) State; Zip Code City; 2211 North First 7.55 San Jose CA 95131 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

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	The Instruction Guide exp	plains how to complete this form	•
1 Total pages Schedule F1:	² FILER NAME Karla Cisneros		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/29/2015	Paypal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
3.20	2211 North First		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Fees	Fee	
	. 555		
9 Complete ONLY if direct	Candidate / Officehoder name o	l office sought of	fice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
12/1/2015	Facebook		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
11.88	1601 Willow Rd.		
	Menlo Park CA 94025-1452		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Advertising Expense	Ads	•
	Advertising Expense		
9 Complete ONLY if direct	Candidate / Officehoder name o	l office sought of	fice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/2/2015	Facebook		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1.91	1601 Willow Rd.		
	Menlo Park CA 94025-1452		
8 PURPOSE OF EXPENDITURE		(b) Description	
1	1	1	

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) ² FILER NAME Karla Cisneros Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Advertising Expense Ads 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/2/2015 Facebook 7 Payee address; 6 Amount (\$) Zip Code City; State; 1601 Willow Rd. 38.63 Menlo Park CA 94025-1452 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Ads Advertising Expense 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: ² FILER NAME Karla Cisneros 4 Date 5 Payee name 10/30/2015 Johnston Campaigns **6** Amount (\$) 7 Payee address; State: Zip Code City; 3,482.44 2978 Rising Tide Lane Houston TX 77573 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense **Printing Expense** Printing & Mail 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/17/2015 David Modlin 7 Payee address; 6 Amount (\$) City; State; Zip Code 4006 Amberlee Ct. 1,500.00 Spring TX 77386-2075 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Other **Returned Contribution** 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