CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

				h: O	-11 (1)	0.7-1-1
	Guide explains how to com			hics Comm	nission filers)	2 Total pages filed
3 CANDIDATE /	MS/MRS/MR	FIRST	MI		OFF	ICE USE ONLY
OFFICEHOLDER	Mr.	William	R		Date Received	d
NAME	NICKNAME	LAST	SUFFIX		12/4/2015	
	Bill	Frazer				
4 CANDIDATE /	ADDRESS / PO BOX;	APT/SUITE #; CIT	Y; STATE; ZIP C	CODE		
OFFICEHOLDER	4130 Turnberry Circle					
MAILING					Date Hand-deliver	red or Date Postmarked
ADDRESS	Houston TX 77025					
Change of address						
5 CANDIDATE /	AREA CODE	PHONE NUMBER	EXTENSION			
OFFICEHOLDER	(713) 429-1773					
PHONE			,			
6 CAMPAIGN	MS/MRS/MR	FIRST	MI		Receipt #	Amount
TREASURER	Mr.	David	G		Date Processe	ed
NAME	NICKNAME	LAST	SUFFIX		Date Imaged	
		Acosta				
7 CAMPAIGN	STREET ADDRESS (No PO Box Pleas	se);	APT/SUITE #;	•	CITY; STATE;	ZIP CODE
TREASURER	1703 W 12th St					
ADDRESS						
(Business)	Houston TX 77008					
8 CAMPAIGN	AREA CODE	PHONE NUMBER	EXTENSION			
TREASURER PHONE	(713) 504-9681					
9 REPORT TYPE	January 15 30th day bel	fore election Fir	nal repport (Attach C/OH	1 - FR)	Exceeded \$500 limit	
9 KEPOKI TIPE	July 15 8th day befo	re election X Ru	noff		15th day after campaign	n treasurer appointment(officeholder only)
10 PERIOD	Month Day	Year			Month	Day Year
COVERED	10/25/2019	5	THROUGH		12/2	2/2015
11 ELECTION	ELECTION DATE	ELECTIO	N TYPE			
	Month Day Year			,,		П
	12/12/2015	Primary	X Ru	inoff	General	Special
12 OFFICE	OFFICE HELD (if any)		13 ^{OI}	FFICE SOUG	HT (if known)	
			С	ontroller		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 FILER NAME Williar	n R Frazer		15 Filer ID (Ethics Com	mission Filers)	
	expenditures may have	olitical contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These een made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this ceive notice of such expenditures.			
16 NOTICE	COMMITTEE TYPE	COMMITTEE NAME			
FROM	_	Campaign for Houston			
POLITICAL	X GENERAL	COMMITTEE ADDRESS			
COMMITTEE(S)		PO Box 75190			
	SPECIFIC				
		Houston TX 77234			
		COMMITTEE CAMPAIGN TREASURER NAME			
·		Standley Bart			
X additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS			
		PO Box 75190			
		TV 77004			
		Houston TX 77234		T	
17 CONTRIBUTION TOTALS		AL CONTRIBUTIONS OF \$50 OR LESS (O NS, OR GUARANTEES OF LOANS), UNLE		\$0.00	
1017120				V 0.00	
	2 TOTAL POLITIC	CAL CONTRIBUTIONS		\$138,040.73	
	(OTHER THAN F	PLEDGES, LOANS, OR GUARANTEES OF	LOANS)		
EXPENDITURE	3 TOTAL POLITIC	AL EXPENDITURES OF \$100 OR LESS, U	NLESS ITEMIZED		
TOTALS	3			\$0.00	
	4 TOTAL POLITICAL EXPENDITURES				
	4 TOTAL POLITIC	CAL EXPENDITURES		\$164,769.38	
- 2- 2				,	
CONTRIBUTION	5 TOTAL POLITIC OF REPORTING	AL CONTRIBUTIONS MAINTAINED AS OF PERIOD	THE LAST DAY	\$49,606.31	
BALANCE	0	, ,		1949,000.31	
OUTSTANDING LOAN	6 TOTAL PRINCIP	PAL AMOUNT OF ALL OUTSTANDING LOA	NS AS OF THE		
TOTALS	LAST DAY OF T	HE REPORTING PERIOD		\$32,500.00	
18 AFFIDAVIT					
			rm, under penalty of perjury, th		
			nd correct and includes all info e under Title 15, Election Code		
			William R. Fraze	er .	
			Signature of Candidate or	Officeholder	
AFFIX NOT STAMP / SE	EAL ABOVE				
Sworn to and subscribed	before me, by the said	d	this the	day	
				aay	
OT	, 20	, to certify which, witness my ha	and and seal of office.		
Signature of officer admir	nistering oath	Print name of officer administering of	ath Title of officer	administering oath	

SUBTOTALS - COH FORM C/OH **COVER SHEET PG 3** 19 FILER NAME William R Frazer 20 Filer ID (Ethics Commission Filers) 21 SCHEDULE SUBTOTALS **SUBTOTAL** NAME OF SCHEDULE **AMOUNT** SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 125,180.00 1. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 2. 12,860.73 SCHEDULE B: PLEDGED CONTRIBUTIONS 3. SCHEDULE E: LOANS 4. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 5. 137,693.48 SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLICITAL CONTRIBUTIONS SCHEDULE F4: EXPENDITURES MADE FROM CREDIT CARD 8. \$7,103.22 SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. 19,972.68 SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS 11. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER 12.

CANDIDATE / OFFICEHOLDER REPORT: FORM C/OH **NOTICE FROM POLITICAL COMMITTEE(S) ADDENDUM** ACCOUNT # (Ethics C/OH NAME William R Frazer 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. COMMITTEE TYPE COMMITTEE NAME 17 NOTICE **FROM** Conservative Republicans of Harris County χ GENERAL COMMITTEE ADDRESS **POLITICAL** COMMITTEE(S) PO Box 75190 SPECIFIC Houston TX 77234 COMMITTEE CAMPAIGN TREASURER NAME Standley, Bart COMMITTEE CAMPAIGN TREASURER ADDRESS PO Box 75190 Houston TX 77234

MC	ONETARY	Y POLITICAL CONTI	RIBUTIONS	5	SCHEDULE A1
The	Instruction G	Guide explains how to complet	1 Total Pages Schedule A1:		
2 F	ILER NAME V	William R Frazer			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Martha Wong	out of state F	PAC(ID#)	7 Amount of contributions (\$)
	10/25/2015	6 Contributor address;	City; Houston	State; Zip Code	100.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Mischer Investments LP	out of state F	PAC(ID#)	7 Amount of contributions (\$)
	10/27/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77046	1,500.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Dennis Arnie	out of state F	PAC(ID#)	7 Amount of contributions (\$)
	10/29/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77007	500.00
8	Principal occupation / Job title (See Instructions) CPA			9 Employer (See Instruction Arnie & Company PC	I tions)
4	Date	5 Full name of contributor Thomas Braniff	out of state F	PAC(ID#)	7 Amount of contributions (\$)
	10/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77054	100.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID#)	

MONETAR	RY POLITICAL CON	TRIBUTION	S	SCHEDULE A1
The Instruction	Guide explains how to comp	1 Total Pages Schedule A1:		
2 FILER NAME	: William R Frazer			3 Filer ID (Ethics Commission filers)
	Judson Bryant		,	7 Amount of contributions (\$)
10/30/2015	6 Contributor address;	City; Houston	State; Zip Code	50.00
8 Principal oc	ccupation / Job title (See Instructions)	9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Joan Dunlap	Ш		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
10/30/2015		Houston	TX 77057	250.00
8 Principal oc	ccupation / Job title (See Instructions)	9 Employer (See Instruc	tions)
СРА			Self-employed	
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	SIMA Of Houston			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
10/30/2015		Houston	TX 77092	250.00
8 Principal oc	ccupation / Job title (See Instructions)	9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Michael Donaldson	out of state	PAC(ID#)	7 Amount of contributions (\$)
	Michael Donaidson			Amount of continuations (ϕ)
	6 Contributor address;	City;	State; Zip Code	•
11/1/2015		Houston	TX 77024	100.00
8 Principal oc	ccupation / Job title (See Instructions)	9 Employer (See Instruc	Letions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	1
. 200	HOUCONPAC		,	7 Amount of contributions (\$)

MONE	ETAR	Y POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
The Insti	ruction (Guide explains how to complete	1 Total Pages Schedule A1:		
2 FILER	NAME	William R Frazer			3 Filer ID (Ethics Commission filers)
		6 Contributor address;	City;	State; Zip Code	
11/3/	/2015		Houston	TX 77292	1,000.00
8 Pri	incipal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)
4 Da	ite	5 Full name of contributor	out of state	PAC(ID#)	
		Camille Reiser			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	•
11/4/	/2015		Houston	TX 77007	5,000.00
8 Pri	incipal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	Lations)
Fin	nance Mgr			Upstream Brokers	
4 Da	ate	5 Full name of contributor	out of state	PAC(ID#)	
		Thomas Reiser	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
11/4/	/2015		Houston	TX 77007	5,000.00
8 Pri	incipal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
CE	EO			Upstream Brokers	
4 Da	ite	5 Full name of contributor	out of state	PAC(ID#)	
		Charles Riepe	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
11/5/	/2015		Houston	TX 77019	100.00
8 Pri	incipal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	ctions)

M(ONETAR	Y POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1
The	e Instruction (Guide explains how to comple	1 Total Pages Schedule A1:		
2 F	ILER NAME	William R Frazer	3 Filer ID (Ethics Commission filers)		
4	Date	5 Full name of contributor Rick Russler	out of state F	PAC(ID#)	7 Amount of contributions (\$)
	11/5/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77079	100.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor G Arthur Donnelly	out of state I	PAC(ID#)	7 Amount of contributions (\$)
	11/6/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	100.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Steven Finkelman	out of state R	PAC(ID#)	7 Amount of contributions (\$)
	11/6/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77096	250.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Melissa Frazier	out of state f	PAC(ID#)	7 Amount of contributions (\$)
	11/6/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77006	500.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct Comfort Systems USA	I tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID#)	

MONI	ETAR	Y POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
The Inst	truction G	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FILER	R NAME V	Villiam R Frazer			3 Filer ID (Ethics Commission filers)
		James Hibbert	,		7 Amount of contributions (\$)
11/6	6/2015	6 Contributor address;	City;	State; Zip Code	1,000.00
11/0	0/2013		Houston	17 11031	1,000.00
8 Pr	incipal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	itions)
Ba	anker			JPMorgan	
4 Da	ate	5 Full name of contributor	out of state	PAC(ID#)	
		Mitchell Kiffe	Ц		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
11/6	6/2015		Great Falls	VA 22066	100.00
8 Pr	incipal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4 Da	ate	5 Full name of contributor	out of state	PAC(ID#)	
		Sharon Kline	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
11/6	6/2015		Newport Beach	CA 92660	100.00
8 Pr	incipal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	Litions)
4 Da	ate	5 Full name of contributor	out of state	PAC(ID#)	
		Mark Lee	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
11/6	6/2015		Houston	TX 77096	1,000.00
8 Pr	incipal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
At	torney			AIG	
4 Da	ate	5 Full name of contributor	out of state	PAC(ID#)	

M	ONETAR	Y POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
The	e Instruction	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 F	ILER NAME	William R Frazer			3 Filer ID (Ethics Commission filers)
		Christopher Mark Murrah			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/6/2015		Houston	TX 77025	200.00
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#)	
		Norton Rose Fulbright US LLP Texas Committee			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/6/2015		Houston	TX 77010	2,500.00
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#)	
		Ted Dom			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/8/2015		Houston	TX 77019	100.00
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#)	
		Mark Brown	Ц		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/9/2015		Houston	TX 77006	100.00
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#)	
•	*		1 1	` '	l .

M	ONETARY	POLITICAL CONTI	RIBUTIONS	5	SCHEDULE A1
Th	e Instruction G	duide explains how to complet	1 Total Pages Schedule A1:		
2 F	ILER NAME V	Villiam R Frazer			3 Filer ID (Ethics Commission filers)
		David Grimes			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/9/2015		Houston	TX 77098	5,000.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	Litions)
	Investments	,		Self	,
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Windi Grimes			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/9/2015	o contributor address,	Houston	TX 77098	5,000.00
	11/3/2010		Houston	17 11000	0,000.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Investments			Self	
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Florence McGee			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/9/2015		Houston	TX 77057	3,000.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Ŭ	Retired	,		Retired	,
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Richard Nelson			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/9/2015		Houston	TX 77057	100.00
8	Principal occu	Ipation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Matthew Rotan	Ц		7 Amount of contributions (\$)

MON	ETAR	Y POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
The Ins	struction G	Guide explains how to complete	1 Total Pages Schedule A1:		
2 FILE	R NAME \	William R Frazer			3 Filer ID (Ethics Commission filers)
11/	9/2015	6 Contributor address;	City;	State; Zip Code	500.00
	rincipal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 D	ate	5 Full name of contributor Stephen Sweet	out of state	PAC(ID#)	7 Amount of contributions (\$)
11/	9/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77079	500.00
	rincipal occi	upation / Job title (See Instructions)		9 Employer (See Instruction Alliance Residential Cor	
4 D	ate	5 Full name of contributor Andrews & Kurth Texas PAC	out of state	PAC(ID#)	7 Amount of contributions (\$)
11/1	10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77002	2,500.00
8 P	rincipal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)
4 D	ate	5 Full name of contributor Daniel Clinton	out of state	PAC(ID#)	7 Amount of contributions (\$)
11/1	10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	250.00
8 P	rincipal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	etions)

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1
Th	e Instruction (Guide explains how to comple	1 Total Pages Schedule A1:		
2 F	FILER NAME	William R Frazer			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Bonnie Hibbert	out of state PAC(ID#)		7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	1,000.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct Retired	tions)
4	Date	5 Full name of contributor Dennis Johnston	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	100.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor John Ray	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77042	100.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Molly Salazar	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77023	50.00
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 CONT	RIBUTION	S	SCHEDULE A1
Th	e Instruction (Guide explains how to comple	1 Total Pages Schedule A1:		
2 F	FILER NAME	William R Frazer			3 Filer ID (Ethics Commission filers)
		Joshua Sanders			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/10/2015		Houston	TX 77027	500.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Policy Direct	or		Hall Attorneys, P.C.	
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Clayton Trier			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/10/2015		Houston	TX 77024	500.00
8	Principal occ	rupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Retired			Retired	
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Michael Vitek	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/10/2015		Houston	TX 77018	100.00
8	Principal occ	rupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Joe Carl White			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/10/2015		Houston	TX 77030	50.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		John Foster			7 Amount of contributions (\$)

M	ONETARY	POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
Th	e Instruction G	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 F	FILER NAME V	Villiam R Frazer			3 Filer ID (Ethics Commission filers)
	11/11/2015	6 Contributor address;	City; Belaire	State; Zip Code TX 77401	50.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)
4	Date	5 Full name of contributor Gregory Mayer	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/11/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77007	100.00
8	Principal occu	Ipation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)
4	Date	5 Full name of contributor Gary Moss	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/11/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	250.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)
4	Date	5 Full name of contributor Beverly Roberts	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/11/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77079	200.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	etions)

M	ONETARY	Y POLITICAL CONT	RIBUTIONS	S	SCHEDULE A1
Th	e Instruction G	Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:
2 F	FILER NAME V	William R Frazer			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Susan Sample	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/11/2015	6 Contributor address;	City; Houston	State; Zip Code	100.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		J. David Heaney			7 Amount of contributions (\$)
	11/12/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	2,500.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Heaney Rosenthal Inc.	I tions)
4	Date	5 Full name of contributor William Kyle	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/12/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	100.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor David Rosenfield	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/12/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	100.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	

M	ONETARY	POLITICAL CONTF	RIBUTIONS	8	SCHEDUL	E A1
Th	e Instruction G	uide explains how to complete		1 Total Pages Schedule A1:		
2 F	FILER NAME W	/illiam R Frazer			3 Filer ID (Ethics Commission filers)	
		Nancy Toberman			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/12/2015		Sugar Land	TX 77479	100.00	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	I tions)	
4	Date	5 Full name of contributor	out of state I	PAC(ID#)		
		Reed Wood			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/12/2015		Kingwood	TX 77345	500.00	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)	
	СРА			Conklin Hruzek & Co.		
4	Date	5 Full name of contributor Bolivar Andrews	out of state f	PAC(ID#)	7 Amount of contributions (\$)	
	11/13/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	150.00	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)	
4	Date	5 Full name of contributor	out of state I	PAC(ID#)		
		John B Brock	_		7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/13/2015		Houston	TX 77056	1,000.00	
8	Principal occu	Pation / Job title (See Instructions)		9 Employer (See Instruc	I tions)	
	Retired			Retired		
4	Date	5 Full name of contributor	out of state I	PAC(ID#)	7 Amount of contributions (*)	
		IEC Tx Gulf Coast PA			7 Amount of contributions (\$)	

M	ONETAR	Y POLITICAL CONTR	SCHEDULE A1		
Th	e Instruction G	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 F	FILER NAME V	Villiam R Frazer			3 Filer ID (Ethics Commission filers)
	11/13/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77007	2,500.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor Philip McCormick	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/13/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77025	500.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Retired	<u>I</u> tions)
4	Date	5 Full name of contributor David Sprague	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/13/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77096	500.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc RSM US LLP	Letions)
4	Date	5 Full name of contributor Thomas Wright	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/13/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	500.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc RSM US LLP	tions)

M	ONETAR	Y 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	ILER NAME V	William R Frazer			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Wendy Krueger	out of state I	PAC(ID#)	7 Amount of contributions (\$)
	11/14/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	1,000.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct CyFairSchools	tions)
4	Date	5 Full name of contributor Edward Goldsberry	out of state I	PAC(ID#)	7 Amount of contributions (\$)
	11/15/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77055	100.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Steven Goodman	out of state I	PAC(ID#)	7 Amount of contributions (\$)
	11/15/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77007	500.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Goodman Financial Corp	
4	Date	5 Full name of contributor Barry Margolis	out of state I	PAC(ID#)	7 Amount of contributions (\$)
	11/15/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	500.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state I	PAC(ID#)	

MO	NETARY	POLITICAL CONTR	RIBUTION	S	SCHEDULE A	1
The	Instruction G	uide explains how to complete	e this form.		1 Total Pages Schedule A1:	
2 FIL	ER NAME W	/illiam R Frazer			3 Filer ID (Ethics Commission filers)	
		Roland Sledge			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
1	11/15/2015		Houston	TX 77005	250.00	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	etions)	
4	Date	5 Full name of contributor	out of state	PAC(ID#)		
		Neil K Alexander	П		7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
1	11/16/2015		Houston	TX 77005	1,000.00	
8	Principal occul	pation / Job title (See Instructions)		9 Employer (See Instruc Porter & Hedges	Letions)	
4	Date	5 Full name of contributor Michael Baker	out of state	PAC(ID#)	7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
1	11/16/2015		Houston	TX 77035	25.00	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	etions)	
4	Date	5 Full name of contributor	out of state	PAC(ID#)		_
		George Boss			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
1	11/16/2015		Houston	TX 77056	1,000.00	
8	Principal occu	L pation / Job title (See Instructions)		9 Employer (See Instruc	Letions)	_
	Managing Dire	ector		The Boss Group		
4	Date	5 Full name of contributor Thomas Braniff	out of state	PAC(ID#)	7 Amount of contributions (\$)	
I		I			1	

MONETA	ARY POLITICAL CONTI	S	SCHEDULE A1		
The Instruction	on Guide explains how to complet	e this form.		1 Total Pages Schedule A1:	
2 FILER NAN	ME William R Frazer	, ,		3 Filer ID (Ethics Commission filers)	
	6 Contributor address;	City;	State; Zip Code		
11/16/2015	5	Houston	TX 77054	100.00	
8 Principal	I occupation / Job title (See Instructions)		9 Employer (See Instruc	etions)	
4 Date	5 Full name of contributor O H Crosswell	out of state	PAC(ID#)	7 Amount of contributions (\$)	
	6 Contributor address;	City;	State; Zip Code		
11/16/2015	5	Houston	TX 77027	1,000.00	
8 Principal	I occupation / Job title (See Instructions) ents		9 Employer (See Instruc Griggs Corp.	etions)	
4 Date	5 Full name of contributor William Gamble	out of state	PAC(ID#)	7 Amount of contributions (\$)	
11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77096	1,000.00	
8 Principal	l occupation / Job title (See Instructions)		9 Employer (See Instruction SIGACO LLC	I otions)	
4 Date	5 Full name of contributor Joseph Joyce	out of state	PAC(ID#)	7 Amount of contributions (\$)	
11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77069	500.00	
	l occupation / Job title (See Instructions)		9 Employer (See Instruc Kinder Morgan Midstrea		

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	S	SCHEDULE A1
Th	e Instruction G	Guide explains how to complete	te this form.		1 Total Pages Schedule A1:
2 F	FILER NAME \	William R Frazer			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Michael Melody	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	1,000.00
8		upation / Job title (See Instructions) anaging Director / Co-Head		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor Edward Neuhaus	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Austin	State; Zip Code TX 78738	150.00
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor Lynn Post	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77005	100.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor Thomas Smith	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	1,000.00
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruction Adams Resources	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 compl		1 Total Pages Schedule A1:	
2 F	ILER NAME	William R Frazer			3 Filer ID (Ethics Commission filers)
		George Bobbitt	,		7 Amount of contributions (\$)
	44/47/2045	6 Contributor address;	City;	State; Zip Code	500.00
	11/17/2015		Houston	TX 77096	500.00
8	Principal occ Retired	cupation / Job title (See Instructions)		9 Employer (See Instruc Retired	tions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		John B Brock	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/17/2015		Houston	TX 77056	4,000.00
8	Principal occ	Leupation / Job title (See Instructions))	9 Employer (See Instruc Retired	I tions)
4	Date	5 Full name of contributor Holloway Frost	out of state	PAC(ID#)	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/17/2015		Houston	TX 77001	5,000.00
8	Principal occ	cupation / Job title (See Instructions))	9 Employer (See Instruc Retired	Ltions)
4	Date	5 Full name of contributor Mark Johnson	out of state	PAC(ID#)	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/17/2015		Sugar Land	TX 77498	250.00
8	Principal occ)	9 Employer (See Instruc	tions)
	СРА			Fitts Roberts & Co PC	
4	Date	5 Full name of contributor Lawrence J Melody	out of state	PAC(ID#)	7 Amount of contributions (\$)

M	ONETARY	POLITICAL CONTR	IBUTION	S	SCHEDULE A1
Th	e Instruction G	uide explains how to complete	this form.		1 Total Pages Schedule A1:
2 F	FILER NAME V	Villiam R Frazer			3 Filer ID (Ethics Commission filers)
	11/17/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	1,000.00
8	Principal occu	Ipation / Job title (See Instructions)		9 Employer (See Instruction Retired	I tions)
4	Date	5 Full name of contributor Fred Robertson	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/17/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	1,000.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)
4	Date	5 Full name of contributor Ann Trammell	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/17/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	300.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor George Brian Vachris	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/17/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77023	50.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)

M	ONETARY	POLITICAL CONTI	RIBUTIONS	8	SCHEDULE A1
The	e Instruction G	Guide explains how to complet	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME V	Villiam R Frazer			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Kathaleen Wall	out of state F	PAC(ID#)	7 Amount of contributions (\$)
	11/17/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77001	5,000.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor John-Sun Cha	out of state F	PAC(ID#)	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Spring	State; Zip Code TX 77381	100.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Todd Hibbert	out of state F	PAC(ID#)	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	1,000.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	L tions)
4	Date	5 Full name of contributor Aamir Maniar	out of state F	PAC(ID#)	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Sugar Land	State; Zip Code TX 77479	500.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID#)	

The Instruction Guide explains how to complete this form. 2 FILER NAME William R Frazer Farukh Seyar Farukh Seyar Formula Seyar 6 Contributor address: Caly: Subset: Zip Code Sugar Land TX 77478 1,000,00 8 Principal accupation / Job title (See Instructions) CPA 4 Date 5 Full name of contributor Haroon Shalkh CPA 5 Full name of contributor Haroon Shalkh 6 Contributor address: Caly: Subset: Zip Code Houston TX 77082 2,500,00 9 Employer (See Instructions) HRSS 4 Date 5 Full name of contributor Associated Builders & Contractors Of Greater Houston, PAC 11/19/2015 Full name of contributor Associated Builders & Contractors Of Greater Houston, PAC 11/19/2015 Full name of contributor Associated Builders & Contractors Of Greater Houston, PAC 11/19/2015 Full name of contributor Associated Builders & Contractors Of Greater Houston, PAC 11/19/2015 Full name of contributor Associated Builders & Contractors Of Greater Houston, PAC 11/19/2015 Full name of contributor Associated Builders & Contractors Of Greater Houston, PAC 11/19/2015 Full name of contributor Associated Builders & Contractors Of Greater Houston PAC 11/19/2015 Full name of contributor Associated Builders & Contractors Of Greater Houston PAC 11/19/2015 Full name of contributor Associated Builders & Contractors Of Greater Houston PAC TX 77098 2.500.00 Amount of contributions (\$) Amount of contributions (\$) Amount of contributions (\$) Amount of contributions (\$) Full name of contributor Amount of contributions (\$) Full name of contributor Amount of contributions (\$) TX 77057 Amount of contributions (\$)	M	ONETAR	Y POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
Farrukh Seyar Farrukh Seyar	Th	e Instruction (Guide explains how to complete	this form.		1 Total Pages Schedule A1:
11/18/2015 State: Zip Code 1,000.00	2 F	FILER NAME	William R Frazer			3 Filer ID (Ethics Commission filers)
11/18/2015 Sugar Land TX 77478 1,000.00			Farrukh Seyar			7 Amount of contributions (\$)
4 Date S Full name of contributor Out of state PAC(ID#) 7 Amount of contributions (\$)		11/18/2015	6 Contributor address;	-		1,000.00
A Date S Full name of contributor Out of state PAC(ID#) 7 Amount of contributions (\$)	8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Haroon Shaikh Haroon Shaikh		СРА			HRSS	
11/18/2015 City; State; Zip Code Houston TX 77082 2,500.00	4	Date		out of state	PAC(ID#)	
8 Principal occupation / Job title (See Instructions) CPA 4 Date 5 Full name of contributor Associated Builders & Contractors Of Greater Houston /PAC 6 Contributor address; City; State; Zip Code Houston TX 77098 2,500.00 8 Principal occupation / Job title (See Instructions) 4 Date 5 Full name of contributor Of Greater Houston /PAC 6 Contributor address; City; State; Zip Code Houston TX 77098 7 Amount of contributors 9 Employer (See Instructions) 7 Amount of contributors 6 Contributor address; City; State; Zip Code Houston TX 77057 5 Full name of contributors 6 Contributor address; City; State; Zip Code Houston TX 77057 5 State; Zip Code Houston TX 77057			Haroon Shaikh			Amount of contributions (\$)
8 Principal occupation / Job title (See Instructions) CPA 4 Date 5 Full name of contributor Associated Builders & Contractors Of Creater Houston /PAC 6 Contributor address: City: State: Zip Code Houston TX 77098 2,500.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 9 Employer (See Instructions) 7 Amount of contributions (\$) 11/19/2015 9 Employer (See Instructions) 7 Amount of contributions (\$) 4 Date 5 Full name of contributor Robert Biehl 7 Amount of contributions (\$) 6 Contributor address: City: State: Zip Code Houston TX 77057 5 State: Zip Code Houston TX 77057 5 State: State			6 Contributor address;	City;	State; Zip Code	
A Date 5 Full name of contributor Out of state PAC(ID#) 7 Amount of contributions (\$)		11/18/2015		Houston	TX 77082	2,500.00
4 Date 5 Full name of contributor Associated Builders & Contractors Of Greater Houston /PAC 7 Amount of contributions (\$)	8	Principal occ	supation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Associated Builders & Contractors Of Greater Houston /PAC 6 Contributor address; City; State; Zip Code Houston TX 77098 2,500.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 7 Amount of contributions (\$) 4 Date 5 Full name of contributor Robert Biehl 7 Amount of contributions (\$) 6 Contributor address; City; State; Zip Code Houston TX 77057 50.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)		СРА			HRSS	
Houston TX 77098 2,500.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 4 Date	4	Date	Associated Builders & Contractors	out of state	PAC(ID#)	7 Amount of contributions (\$)
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 4 Date 5 Full name of contributor Out of state PAC(ID#) 7 Amount of contributions (\$) 6 Contributor address; City; State; Zip Code Houston TX 77057 50.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)			6 Contributor address;	City;	State; Zip Code	
4 Date 5 Full name of contributor out of state PAC(ID#) Robert Biehl 7 Amount of contributions (\$) 6 Contributor address; City; State; Zip Code 11/19/2015 Houston TX 77057 50.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)		11/19/2015		Houston	TX 77098	2,500.00
Robert Biehl 7 Amount of contributions (\$) 6 Contributor address; City; State; Zip Code 11/19/2015 Houston TX 77057 50.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
6 Contributor address; City; State; Zip Code 11/19/2015 Houston TX 77057 50.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	4	Date	5 Full name of contributor	out of state	PAC(ID#)	
11/19/2015 Houston TX 77057 50.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)			Robert Biehl	_		7 Amount of contributions (\$)
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)			6 Contributor address;	City;	State; Zip Code	
		11/19/2015		Houston	TX 77057	50.00
4 Date 5 Full name of contributor out of state PAC(ID#)	8	Principal occ	Lupation / 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 CONTI	RIBUTION	S	SCHEDULE A1
Th	e Instruction (Guide explains how to complet	1 Total Pages Schedule A1:		
2 F	ILER NAME	William R Frazer			3 Filer ID (Ethics Commission filers)
		Judson Bryant			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/19/2015		Houston	TX 77077	50.00
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#)	
		Virgie Bryant	Ц		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/19/2015		Houston	TX 77024	100.00
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#)	
		Patricia Curtis			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/19/2015		Houston	TX 77027	250.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Data	Te e il consert contributor	I and of state	DAG(ID)()	1
4	Date	5 Full name of contributor David Durham	out of state	PAC(ID#)	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/19/2015		Houston	TX 77080	100.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Thomas Fish			7 Amount of contributions (\$)

M	ONETAR	RY POLITICAL CONTR	RIBUTION	S		SCHEDULE A1
Th	e Instruction	Guide explains how to complete	1 Tota	al Pages Schedule A1:		
2 FILER NAME William R Frazer						(Ethics Commission filers)
		6 Contributor address;	City;	State; Zip Code		
	11/19/2015		Houston	TX 77024		250.00
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	tions)	
4	Date	5 Full name of contributor	out of state	PAC(ID#)		
		Raymond Frierson			7	Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code		
	11/19/2015		Houston	TX 77002		1,000.00
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)	
	CPA			Frierson Solá Simonton	& Kutac PL	LC
4	Date	5 Full name of contributor	out of state	PAC(ID#)		
		Malcolm Gibson			7	Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code		
	11/19/2015		Houston	TX 77027		250.00
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	tions)	
4	Date	5 Full name of contributor	out of state	PAC(ID#)		
		HAA Better Government Fund			7	Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code		
	11/19/2015		Houston	TX 77041		5,000.00
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)	

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	S	SCHEDULE A1
The	e Instruction (Guide explains how to comple	1 Total Pages Schedule A1:		
2 F	ILER NAME	William R Frazer	3 Filer ID (Ethics Commission filers)		
4	Date	5 Full name of contributor Steven Harris			7 Amount of contributions (\$)
	11/19/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77055	250.00
8	Principal acc	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
0	Fillicipal occ	Apation / Job title (See Instructions)		3 Employer (See Instruc	uons)
4	Date	5 Full name of contributor HOUCONPAC	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/19/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77292	1,000.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Evan Howell	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/19/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77255	100.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Buffie Ingersoll	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/19/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77080	100.00
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 CONTR	RIBUTION	S	SCHEDULE A	1
Th	e Instruction (Guide explains how to complete		1 Total Pages Schedule A1:	_	
2 F	TILER NAME	William R Frazer			3 Filer ID (Ethics Commission filers)	_
		Joyce Janak			7 Amount of contributions (\$)	_
		6 Contributor address;	City;	State; Zip Code		
	11/19/2015		Houston	TX 77074	500.00	
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	ptions)	_
	Retired			Retired		
4	Date	5 Full name of contributor	out of state	PAC(ID#)		_
		Jacey Jetton			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/19/2015		Richmond	TX 77407	50.00	
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)	_
_	Data	To Full come of contributor	I and of otata	DAC(ID#)	1	
4	Date	5 Full name of contributor Janet Johnson	out of state	PAC(ID#)	7 Amount of contributions (\$)	
		Janet Johnson			Amount of continuations (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/19/2015		Houston	TX 77019	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#)	Assessed of a satisfaction (C)	
		Bob Jones			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/19/2015		Houston	TX 77079	2,500.00	
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)	_
	Engineering			Jones Engineering Solutions		
4	Date	5 Full name of contributor	out of state	PAC(ID#)		_

M	ONETAR	Y POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
Th	e Instruction (Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME	William R Frazer			3 Filer ID (Ethics Commission filers)
		Kingwood Area Republican Women's Club			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/19/2015		Kingwood	TX 77325	100.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Todd Kulp	П		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/19/2015		Houston	TX 77025	100.00
8	Principal occ	Cupation / Job title (See Instructions)		9 Employer (See Instruc	Itions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Nancy Lucke	Ц		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/19/2015		Houston	TX 77098	30.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	Itions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		John R Madsen	Ц		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/19/2015		Houston	TX 77067	200.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
	Date	leeu	T.L. and A.A.	PAG(IDII)	Γ
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 comple	1 Total Pages Schedule A1:		
2 F	ILER NAME	William R Frazer			3 Filer ID (Ethics Commission filers)
		PAC Of Winstead PC			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/19/2015		Dallas	TX 75201	1,000.00
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#)	
		Joseph Pelati	Ц		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/19/2015		Houston	TX 77007	200.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Rothfelder & Falick LLP	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/19/2015		Houston	TX 77002	250.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
1	Date	5 Full name of contributor	out of state	PAC(ID#)	T
4	Date	C E Roundtree	Unit of state	1 10(10#)	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/19/2015		Houston	TX 77022	100.00
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#)	
		Nancy Rutledge			7 Amount of contributions (\$)

M	ONETAR'	Y POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
Th	e Instruction G	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME \	William R Frazer	3 Filer ID (Ethics Commission filers)		
		6 Contributor address;	City;	State; Zip Code	
	11/19/2015		Houston	TX 77025	1,000.00
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
	Executive Dir			Houston CPA Society	
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Paula Saizan			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	•
	11/19/2015		Houston	TX 77064	200.00
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Don Sumners			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	•
	11/19/2015		Houston	TX 77055	100.00
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	otions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Peter Taaffe	Ц		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	•
	11/19/2015		Houston	TX 77005	250.00
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	Letions)

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1
The	e Instruction G	Guide explains how to comple	1 Total Pages Schedule A1:		
2 F	ILER NAME \	William R Frazer	3 Filer ID (Ethics Commission filers)		
4 Date		5 Full name of contributor out of state Robert Vestewig		PAC(ID#)	7 Amount of contributions (\$)
	11/19/2015	6 Contributor address;	City; Houston	State; Zip Code	250.00
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor	out of state I	PAC(ID#)	
		John Wall	Ц		7 Amount of contributions (\$)
	11/19/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77005	100.00
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct	L tions)
4	Date	5 Full name of contributor Milton West	out of state I	PAC(ID#)	7 Amount of contributions (\$)
	11/19/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77063	500.00
8	Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instruct Law Office of Milton H W	,	
4	Date	5 Full name of contributor Carlton Jarvis	out of state I	PAC(ID#)	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77006	150.00
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor	out of state I	PAC(ID#)	

M	ONETAR'	Y POLITICAL CONT	TRIBUTION	S		SCHEDULE	A 1
Th	e Instruction C	Guide explains how to compl	1 Total Pag	ges Schedule A1:			
2 F	FILER NAME	William R Frazer			3 Filer ID (Ethics	s Commission filers)	
		Susan Lawhon			7 A	amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/21/2015		Houston	TX 77057		1,000.00	
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)		
	Community V	/olunteer		N/A			
4	Date	5 Full name of contributor	out of state	PAC(ID#)			
		Wea Lee	_		7 A	amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/21/2015		Houston	TX 77072		1,500.00	
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)		
	CEO			Southern News Group			
4	Date	5 Full name of contributor	out of state	PAC(ID#)			
		Preston Moore			7 A	amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/21/2015		Houston	TX 77056		100.00	
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)		
					_		
4	Date	5 Full name of contributor Scott Otto	out of state	PAC(ID#)	7 ^	mount of contributions (\$)	
		Scott Otto			7 A	mount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/21/2015		Houston	TX 77062		250.00	
8	Principal occ	Upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)		
4	Date	5 Full name of contributor	out of state	PAC(ID#)			
		Alan Hassenflu			7 A	amount of contributions (\$)	

M	ONETAR	Y POLITICAL CONTR	SCHEDULE A1		
Th	e Instruction G	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME \	William R Frazer			3 Filer ID (Ethics Commission filers)
	11/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77005	5,000.00
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruction Fidelis Realty Partners	etions)
4	Date	5 Full name of contributor Heidi Perry	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/23/2015	6 Contributor address;	City; Dallas	State; Zip Code TX 75225	250.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
4	Date	5 Full name of contributor Houston Westside PAC	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77242-1487	500.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	I trions)
4	Date	5 Full name of contributor Larry Johnson	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	1,000.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc The Johnson Developm	

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1
Th	e Instruction G	Guide explains how to complete	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME \	William R Frazer			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor M J Khan	out of state I	PAC(ID#)	7 Amount of contributions (\$)
	11/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77072	500.00
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc Self	tions)
4	Date	5 Full name of contributor Jacqueline Marlette	out of state I	PAC(ID#)	7 Amount of contributions (\$)
	11/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77077	50.00
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor Lois O'Connor	out of state I	PAC(ID#)	7 Amount of contributions (\$)
	11/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77096	250.00
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor Jim Bartley	out of state I	PAC(ID#)	7 Amount of contributions (\$)
	11/25/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77099	250.00
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor	out of state I	PAC(ID#)	

M	ONETAR	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A1			
Th	e Instruction (Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:			
2 F	FILER NAME	William R Frazer			3 Filer ID (Ethics Commission filers)			
		Jerry Finger			7 Amount of contributions (\$)			
	11/25/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	500.00			
8	Principal occ Retired	cupation / Job title (See Instructions)		9 Employer (See Instruction Finger Investments	ctions)			
4	Date	5 Full name of contributor Mischer Investments LP	out of state	PAC(ID#)	7 Amount of contributions (\$)			
	11/25/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77046	3,000.00			
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)			
4	Date	5 Full name of contributor William Penland	out of state	PAC(ID#)	7 Amount of contributions (\$)			
	11/25/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	250.00			
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	ptions)			
4	Date	5 Full name of contributor Janice Wilhelm	out of state	PAC(ID#)	7 Amount of contributions (\$)			
	11/25/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77077	100.00			
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)			
4	Date	5 Full name of contributor Jo Ann Petersen	out of state	PAC(ID#)	7 Amount of contributions (\$)			

MONETAR	RY POLITICAL CONTR	SCHEDULE A1			
The Instruction	Guide explains how to complete	this form.		1 Total Pages Schedule A1:	
2 FILER NAME	William R Frazer			3 Filer ID (Ethics Commission filers)	
	6 Contributor address;	City;	State; Zip Code	-	
11/27/2015		Houston	TX 77057	100.00	
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)	
4 Date	5 Full name of contributor	out of state	PAC(ID#)		
	Tom Hail			7 Amount of contributions (\$)	
	6 Contributor address;	City;	State; Zip Code	-	
11/30/2015		Houston	TX 77057	200.00	
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)	
4 Date	5 Full name of contributor	out of state	PAC(ID#)		
	Howard Holsenbeck			7 Amount of contributions (\$)	
	6 Contributor address;	City;	State; Zip Code		
11/30/2015		Houston	TX 77074	150.00	
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)	
4 Date	5 Full name of contributor	out of state	PAC(ID#)		
	Hoover Slovacek LLP			7 Amount of contributions (\$)	
	6 Contributor address;	City;	State; Zip Code		
11/30/2015		Houston	TX 77210	500.00	
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)	

M	ONETAR	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A1
Th	e Instruction G	Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:
2 F	FILER NAME V	William R Frazer			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Doug Kelting	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code	25.00
	11/00/2010		11000.011	77 17010	26.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor Donald McFall	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	250.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor Jim Potter	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77008	250.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor Tom Tellepsen	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 occu	upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor	X out of state	PAC(ID# C00506733)	

	RY POLITICAL CONT			
The Instruction	n Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:
2 FILER NAM	E William R Frazer			3 Filer ID (Ethics Commission filers)
	Cadence Bank, NA PAC			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
12/1/2015		Birmingham	AL 35203	2,000.00
8 Principal o	occupation / Job title (See Instructions)		9 Employer (See Instruc	
4 Date	5 Full name of contributor	out of state I	PAC(ID#)	
	Linda Crosby			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
12/2/2015		Houston	TX 77098	100.00
8 Principal o	occupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor	out of state i	PAC(ID#)	
	David Douglas	_		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
12/2/2015		Houston	TX 77008	1,000.00
8 Principal of	occupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
CEO			KBK Industries LLC	
4 Date	5 Full name of contributor	out of state I	PAC(ID#)	
	Dan Ellwood			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
12/2/2015		Houston	TX 77024	250.00
8 Principal o	occupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
4 Date	5 Full name of contributor	out of state I	PAC(ID#)	
	Greg Greene	ш		7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	RIBUTION	S	SCHEDULE A1		
Th	e Instruction (Guide explains how to complete		1 Total Pages Schedule A1:			
2 F	ILER NAME	William R Frazer			3 Filer ID (Ethics Commission filers)		
		6 Contributor address;	City; State; Zip Code				
	12/2/2015		Dallas	TX 75248	100.00		
8	Principal occ	Cupation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)		
4	Date	5 Full name of contributor	out of state	PAC(ID#)			
		Jeff Harris	П		7 Amount of contributions (\$)		
		6 Contributor address;	City;	State; Zip Code			
	12/2/2015		The Woodlands	TX 77381	250.00		
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)		
4	Date	5 Full name of contributor	out of state	PAC(ID#)			
		Lee Hogan			7 Amount of contributions (\$)		
		6 Contributor address;	City;	State; Zip Code	•		
	12/2/2015		Houston	TX 77056	500.00		
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)		
	Retired			Retired			
4	Date	5 Full name of contributor	out of state	PAC(ID#)			
		Lee Hunnell			7 Amount of contributions (\$)		
		6 Contributor address;	City;	State; Zip Code			
	12/2/2015		Houston	TX 77024	100.00		
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)		
4	Date	5 Full name of contributor	out of state	PAC(ID#)			
		F Leach	_		7 Amount of contributions (\$)		

M	ONETARY	Y POLITICAL CONTR	RIBUTIONS	3	SCHEDULE A1
The	e Instruction G	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 F	ILER NAME V	Villiam R Frazer			3 Filer ID (Ethics Commission filers)
	12/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77009	150.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4	Date	5 Full name of contributor Bob Parkey	out of state F	PAC(ID#)	7 Amount of contributions (\$)
	12/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	250.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4	Date	5 Full name of contributor Thomas Rourick	out of state F	PAC(ID#)	7 Amount of contributions (\$)
	12/2/2015	6 Contributor address;	City; Missouri City	State; Zip Code TX 77459	150.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	I etions)
4	Date	5 Full name of contributor Richard Stark	out of state F	I AC(ID#)	7 Amount of contributions (\$)
	12/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77018	25.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	Letions)

M(ONETARY	Y POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1
The	e Instruction G	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME V	William R Frazer			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Anne Torrence	out of state I	PAC(ID#)	7 Amount of contributions (\$)
	12/2/2015	6 Contributor address;	City; Houston	State; Zip Code	50.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Truman Touchstone	out of state I	PAC(ID#)	7 Amount of contributions (\$)
	12/2/2015	6 Contributor address;	City; Dimmit	State; Zip Code TX 79027	100.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	L tions)
4	Date	5 Full name of contributor Frederick Wagner	out of state I	I PAC(ID#)	7 Amount of contributions (\$)
	12/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77080	25.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	L tions)
4	Date	5 Full name of contributor Richard Weekley	out of state I	I PAC(ID#)	7 Amount of contributions (\$)
	12/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77055	5,000.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Weekley Investments	I tions)
4	Date	5 Full name of contributor	out of state I	PAC(ID#)	

MONETAR	RY POLITICAL CON		SCHEDULE A			
The Instruction	n Guide explains how to comp	lete this form.			1	Total Pages Schedule A1:
2 FILER NAME	E William R Frazer				3 Fi	ler ID (Ethics Commission filers)
	Denis Wood				7	Amount of contributions (\$)
	6 Contributor address;	City;	State;	Zip Code		
12/2/2015		Houston	TX 7709	3		250.00
8 Principal or	ccupation / Job title (See Instructions	s)	9 Employ	er (See Instruc	tions	
	ATTACH ADDI					
	If contributor is out-of-state	PAC, please see in	struction gu	ide for additio	nal r	eporting requirements

	ON-MONE		SCHEDULE A2				
		Guide explains how to complete	this form.		1 Total Pages Schedule A2:		
2 F	FILER NAME V	Villiam R Frazer			3 Fi	ler ID (Ethics Commi	ssion filers)
4 7	ΓΟΤΑL OF UN	ITEMIZED IN-KIND POLITICAL	. CONTRIBU	ΓIONS	\$12	,860.73	
5	Date	6 Full name of contributor	out of state	PAC(ID#)			
5	Date	Houston Realty Business Coalition	Out of state i	70(ID#)	8	Amount of	9 In-Kind contribution
		Trouble Trouing Dubinous Common				contributions (\$)	description
		7 Contributor address;	City;	State; Zip Code			
	11/18/2015		Houston	TX 77046		792.00	Pro Rata Share of Mailer
						Check if travel outsi Schedule T	de of Texas, complete
10	Principal occu	upation / Job title (See Instructions)		11 Employer (See Instru	ction	s)	
5	Date	6 Full name of contributor	out of state	 PAC(ID#)			
		Houston Realty Business Coalition			8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code			
	11/25/2015		Houston	TX 77046		3655.00	Pro Rata Share of Mailer
						Check if travel outsi Schedule T	de of Texas, complete
10	Principal occu	upation / Job title (See Instructions)		11 Employer (See Instru	ction	s)	
5	Date	6 Full name of contributor	out of state	PAC(ID#)			
J	Date	C Club		7.0(1211)	8	Amount of	9 In-Kind contribution
		o olub				contributions (\$)	description
		7 Contributor address;	City;	State; Zip Code			
	11/20/2015		Houston	TX 77056		983.00	Pro Rata Share of Mailer
						Check if travel outsi Schedule T	ide of Texas, complete
10	Principal occu	upation / Job title (See Instructions)		11 Employer (See Instru	ction	s)	

	ON-MONE	TARY (IN-KIND) PO			SCHEDULE A2		
		Guide explains how to complete	e this form.		1 Total Pages Schedule A2:		
2 F	FILER NAME V	Villiam R Frazer	,		3 F	iler ID (Ethics Commi	ssion filers)
4 7	TOTAL OF UN	ITEMIZED IN-KIND POLITICA	AL CONTRIBU	TIONS	\$12	2,860.73	
5	Date	6 Full name of contributor	out of state	PAC(ID#)			
		C Club		,	8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code			
	12/1/2015		Houston	TX 77056		2808.00	Pro Rata Share of Mailer
						Check if travel outs	ide of Texas, complete
10	Principal occu	upation / Job title (See Instructions)		11 Employer (See Instru	uction	ns)	
5	Date	6 Full name of contributor	out of state	PAC(ID#)			
		Harris County Republican Party	П		8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code	•		1
	11/16/2015		Houston	TX 77008		2130.00	Pro Rata Share of grassroots activities
						Check if travel outsi Schedule T	ide of Texas, complete
10	Principal occu	upation / Job title (See Instructions)		11 Employer (See Instru	uction	ns)	
5	Date	6 Full name of contributor	out of state	 PAC(ID#)			
		Harris County Republican Party	Ц		8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code	-		!
	11/18/2015		Houston	TX 77008		416.78	Pro Rata Share of Mailer
						Check if travel outs Schedule T	ide of Texas, complete
10	Principal occu	upation / Job title (See Instructions)		11 Employer (See Instru	uction	ns)	

	ON-MONETARY (IN-KIND) POLITICAL ONTRIBUTIONS							SCHEDULE A2
The	e Instruction Guide explains how to complete this form.						Total Pages Scl	nedule A2:
2 F	ILER NAME	William R Frazer		,		3 F	iler ID (Ethics Commi	ssion filers)
4 T	OTAL OF U	NITEMIZED IN-KIND POLITICA	L CONTRIBL	JTIONS		\$12	2,860.73	
5	Date	6 Full name of contributor Harris County Republican Party	out of state	PAC(ID#)		8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State;	Zip Code			
	11/27/2015		Houston	TX 77008			1915.95	Pro Rata Share of Mailer
							Check if travel outsi Schedule T	de of Texas, complete
10	Principal oc	cupation / Job title (See Instructions)		11 Employe	r (See Instru	ctior	ns)	
5	Date	6 Full name of contributor	out of state	PAC(ID#)				
		Texas Asian Republican Club	Ц			8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State;	Zip Code			
	12/1/2015		Houston	TX 77215			160.00	Mailer Endorsement
							Check if travel outsi Schedule T	l de of Texas, complete
10	Principal oc	cupation / Job title (See Instructions)		11 Employe	r (See Instru	ctior	ns)	
		ATTACH ADDITIO	NAL COPIES	OF THIS S	CHEDULI	ΞA	S NEEDED	
		If contributor is out-of-state PAC	nlesse see in	struction quid	a for additio	nal ı	enorting requiremen	nte

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	² FILER NAME William R Fraz	er	3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name			
11/30/2015	A-Better Broadcasting Com	pany		
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
1,490.00	530 Lovett Boulevard			
	Houston TX 77006			
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	(b) Description Check if travel outside of Technology Check if Austin, TX, officehor Radio Advertising		
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held	
4 Date	5 Payee name			
10/26/2015	Authorize.net			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
16.12	PO Box 947 American Fork UT 84003			
8 PURPOSE OF EXPENDITURE		(b) Description		
	Accounting/Banking	Check if travel outside of Te Check if Austin, TX, officeho Credit Card Proces	older living expense	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held	
4 Date	5 Payee name			
10/27/2015	Authorize.net			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
2.93	PO Box 947			
	American Fork UT 84003			
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 William R Frazer Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Accounting/Banking 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 10/29/2015 Authorize.net 7 Payee address; 6 Amount (\$) Zip Code City; State; PO Box 947 388.50 American Fork UT 84003 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 Processing Fee 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 Total pages Schedule F1:	² FILER NAME William R Fraze	er	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/2/2015	Authorize.net		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
14.65	PO Box 947		
	American Fork UT 84003		
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
	Accounting/Banking	Credit Card Proces	sing Fee
	January G. M. G.		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought of	ffice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/3/2015	Authorize.net		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
33.19	PO Box 947		
	American Fork UT 84003		
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
	Accounting/Banking	Credit Card Proces	ssing Fee
	lg =g		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought of	ffice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/9/2015	Authorize.net		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
2.93	PO Box 947		
	American Fork UT 84003		
8 PURPOSE OF EXPENDITURE		(b) Description	
	T. Control of the con	i	

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 William R Frazer Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Accounting/Banking 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/10/2015 Authorize.net 7 Payee address; 6 Amount (\$) Zip Code City; State; PO Box 947 57.14 American Fork UT 84003 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 Processing Fee Accounting/Banking 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

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	The Instruction Guide ex	plains how to complete this form	l.
1 Total pages Schedule F1:	² FILER NAME William R Fraze	ər	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/12/2015	Authorize.net		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
38.09	PO Box 947		
	American Fork UT 84003		
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
	Accounting/Banking	Credit Card Proces	esing Fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	ffice held
experientalise to benefit 0/011			
4 Date	5 Payee name		
11/13/2015	Authorize.net		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
118.67	PO Box 947		
	American Fork UT 84003		
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
	Accounting/Banking	Credit Card Proces	ssing Fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	ffice held
experience to benefit 6/611			
4 Date	5 Payee name		
11/13/2015	Authorize.net		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
7.33	PO Box 947		
	American Fork UT 84003		
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 William R Frazer Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Accounting/Banking 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 Authorize.net 7 Payee address; 6 Amount (\$) Zip Code City; State; PO Box 947 86.44 American Fork UT 84003 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 Processing Fee Accounting/Banking 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:	2 FILER NAME William R Frazi	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name	<u></u>	,	
11/17/2015	Authorize.net			
		Chata: 7:a Cada		
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
29.30	PO Box 947			
	American Fork UT 84003			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Te.	xas, complete Schedule T	
		Check if Austin, TX, officeho	lder living expense	
	Accounting/Banking	Credit Card Proces	sing Fee	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	fice held	
[
4 Date	5 Payee name			
11/17/2015	Authorize.net			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
17.58	PO Box 947			
	American Fork UT 84003			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Te.	xas, complete Schedule T	
		Check if Austin, TX, officeho	lder living expense	
	Accounting/Banking	Credit Card Proces	sing Fee	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	fice held	
4 Date	5 Payee name			
11/17/2015	Authorize.net			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
14.65	PO Box 947			
	American Fork UT 84003			
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 William R Frazer Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Accounting/Banking 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/18/2015 Authorize.net 7 Payee address; 6 Amount (\$) Zip Code City; State; PO Box 947 95.96 American Fork UT 84003 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 Processing Fee Accounting/Banking 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

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	The Instruction Guide ex	plains how to complete this form	-
1 Total pages Schedule F1:	² FILER NAME William R Fraze	er	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/20/2015	Authorize.net		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
36.63	PO Box 947		
	American Fork UT 84003		
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
	Accounting/Banking	Credit Card Proces	sing Fee
	3 3 3		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought of	ffice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/20/2015	Authorize.net		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
29.30	PO Box 947		
	American Fork UT 84003		
8 PURPOSE OF EXPENDITURE		(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	
	Accounting/Banking	Credit Card Proces	- ,
	7.000 diffully Dariking		3
9 Complete ONLY if direct	Candidate / Officehoder name	office sought of	ffice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/23/2015	Authorize.net		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
7.33	PO Box 947	·	
	American Fork UT 84003		
8 PURPOSE OF EXPENDITURE		(b) Description	
	(-,	(-, - 555	

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 William R Frazer Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Accounting/Banking 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/24/2015 Authorize.net 7 Payee address; 6 Amount (\$) Zip Code City; State; PO Box 947 36.63 American Fork UT 84003 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 Processing Fee Accounting/Banking 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

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	The Instruction Guide ex	plains how to complete this form	l.
1 Total pages Schedule F1:	² FILER NAME William R Fraze	er e e e e e e e e e e e e e e e e e e	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/24/2015	Authorize.net		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
4.40	PO Box 947		
	American Fork UT 84003		
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
	Accounting/Banking	Credit Card Proces	esing Fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	ffice held
experientalise to benefit 0/011			
4 Date	5 Payee name		
11/25/2015	Authorize.net		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
7.33	PO Box 947		
	American Fork UT 84003		
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
	Accounting/Banking	Credit Card Proces	ssing Fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	ffice held
4 Date	5 Payee name		
11/27/2015	Authorize.net		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1.47	PO Box 947		
	American Fork UT 84003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

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 William R Frazer Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Accounting/Banking 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 Authorize.net 7 Payee address; 6 Amount (\$) Zip Code City; State; PO Box 947 859.25 American Fork UT 84003 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 Processing Fee Accounting/Banking 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:	² FILER NAME William R Fraze	er	3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name		,	
11/30/2015	Authorize.net			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
7.33	PO Box 947			
	American Fork UT 84003			
8 PURPOSE OF EXPENDITURE	(a) Category Accounting/Banking	(b) Description Check if travel outside of Te Check if Austin, TX, officehored Credit Card Proces	older living expense	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	I office sought c	ffice held	
4 Date	5 Payee name			
11/30/2015	Baptist Ministers Association	Of Houston & Vicinity		
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
1,500.00	7817 Calhoun Rd.			
	Houston TX 77033			
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, officeh GOTV Expenses		
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	ffice sought c	ffice held	
4 Date	5 Payee name			
11/16/2015	Beavers Media & Communic	ations		
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
30,000.00	8925 Briar Forest Dr. Houston TX 77024			
8 PURPOSE OF EXPENDITURE		(b) Description		
O TOKE OF EXPENDITURE	I (a) Gaicyory	I/D/ Describuon		

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 William R Frazer Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Advertising Expense Advertisement 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/24/2015 Beavers Media & Communications 7 Payee address; 6 Amount (\$) City; Zip Code State; 3,545.30 8925 Briar Forest Dr. Houston TX 77024 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Advertisement Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

	The Instruction Guide exp	plains how to complete this form	
Total pages Schedule F1:	² FILER NAME William R Fraze	r	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/24/2015	Beavers Media & Communic	ations	
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1,500.00	8925 Briar Forest Dr.		
	Houston TX 77024		
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	Consulting	
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought o	ffice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
12/1/2015	Blanton's International		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1,785.00	3011 E Richey Rd		
	Houston TX 77338		
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	Robo calls	- '
	7 tavortioning Expondo		
9 Complete ONLY if direct	Candidate / Officehoder name o	l ffice sought o	ffice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
10/29/2015	Bundrick & Sons Music Co		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
400.00	10214 Georgibelle		
	Suite 400		
	Houston TX 77043		
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 William R Frazer Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Sound System **Event Expense** 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 10/31/2015 David G Acosta 7 Payee address; 6 Amount (\$) Zip Code City; State; 1703 W. 12th St. 500.00 Houston TX 77008-6401 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 Consulting 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 William R Fraz	·	3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name			
11/30/2015	David G Acosta			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
500.00	1703 W. 12th St.			
	Houston TX 77008-6401			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Tex	as, complete Schedule T	
		Check if Austin, TX, officehol	der living expense	
	Consulting Expense	Consulting		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought off	ice held	
,				
[
4 Date	5 Payee name			
11/3/2015	Grace Hamilton			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
100.00	844 Kuhlman Rd.			
	Ht TV 77004			
8 PURPOSE OF EXPENDITURE	Houston TX 77024	(b) Description		
6 FUNFOSE OF EXPENDITURE	(a) Calegory	Check if travel outside of Tex	as complete Schedule T	
		Check if Austin, TX, officehol		
	Salaries/Wages/Contract	Photographer for ev		
	Labor	Thotographic for ev		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought off	ice held	
expendituree to benefit C/OH				
4 Date	5 Payee name			
11/1/2015	Hi Hat, Inc.			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
1,000.00	6990 Portwest			
	Suite 100			
	Houston TX 77055			
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 William R Frazer Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Office Rent Office Overhead/Rental Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 12/1/2015 Hi Hat, Inc. 7 Payee address; 6 Amount (\$) Zip Code City; State; 6990 Portwest 1,000.00 Suite 100 Houston TX 77055 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Office Rent Office Overhead/Rental Expense 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 Total pages Schedule F1:	² FILER NAME William R Fraze	er	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/3/2015	Sherwoods Gallery		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
300.00	2618 Briar ridge Dr		
	Houston TX 77057		
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
	Gifts/Awards/Memorials	Volunteer Recognit	ion
	Expense		
9 Complete ONLY if direct	Candidate / Officehoder name	l office sought of	fice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/3/2015	Walgreens		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
293.12	8942 W Sam Houston Pkwy N	J	
	Houston TX 77040		
8 PURPOSE OF EXPENDITURE		(b) Description	
		Check if travel outside of Te	xas. complete Schedule T
		Check if Austin, TX, officeho	•
	Gifts/Awards/Memorials	Volunteer Recognit	
	Expense	Volumeer Recogniti	ion .
9 Complete ONLY if direct	Candidate / Officehoder name	office sought of	fice held
expendituree to benefit C/OH		J	
4 Date	5 Payee name		
11/3/2015	REI		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
250.00		эмэ, црэг	
200.00	17717 Tomball parkway		
	Houston TV 77004		
a BURDOOF OF EVERYDIT	Houston TX 77064	(h) December to	
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 William R Frazer Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Volunteer Recognition Gifts/Awards/Memorials Expense 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 Holly R Boyter 7 Payee address; 6 Amount (\$) City; Zip Code State; 7814 Cadenza Court 2,962.50 Houston TX 77040 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Staff Salary Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

1 Total pages Schedule F1:	The Instruction Guide ex	plains how to complete this form	3 Filer ID (Ethics Commission filers)
4 Date			3 Ther ID (Ethics Commission mers)
	5 Payee name		
11/8/2015	Houston Westside PAC		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
500.00	PO Box 421487		
	Houston TX 77242-1487		
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
	Contributions/Donations	Event Host	
	Made By Candidate/Officeholder/Politi		
	cal Committee		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought c	office held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/8/2015	Jennifer Naedler		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
4,400.00	12122 Cypress Creek Lakes [Drive	
,,	,		
	Houston TX 77433		
8 PURPOSE OF EXPENDITURE		(b) Description	
	(a) canagary	Check if travel outside of Te	exas, complete Schedule T
		Check if Austin, TX, officeh	
	Consulting Function	Consulting	older living expense
	Consulting Expense	Consuling	
9 Complete ONLY if direct	Candidate / Officehoder name	office sought c	office held
expendituree to benefit C/OH	Carididate / Cinocinodor Harris	nioo oougiit	And Hold
4 Date	5 Payee name		
11/24/2015	Joe Bronikowsky		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
	rayee address, City,	State, Zip Code	
360.00			
	Houston TX 77000	т	
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 William R Frazer Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Contract Labor Salaries/Wages/Contract Labor 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 Katheryn Gentry 7 Payee address; 6 Amount (\$) City; Zip Code State; 7518 Kite Hill Dr 802.50 Houston TX 77041 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Contract Labor Salaries/Wages/Contract Labor 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:	² FILER NAME William R Fraze	er .	3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name			
11/24/2015	Kingwood TEA Party, Inc.			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
500.00	2261 Northpark Dr			
	#109			
	Kingwood TX 77339			
8 PURPOSE OF EXPENDITURE	(a) Category Donation	(b) Description Check if travel outside of Te Check if Austin, TX, officehor		
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	ffice sought o	iffice held	
4 Date	5 Payee name			
10/28/2015	Mammoth Marketing Group			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
4,800.88	4708 Eigel Street			
	Houston TX 77007			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description Check if travel outside of Te	•	
	Printing Expense	GOTV Expenses		
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	office held	
4 Date	5 Payee name			
10/28/2015	Mammoth Marketing Group			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
4,656.55	4708 Eigel Street			
	Houston TX 77007			
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 William R Frazer Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Office Overhead/Rental Postage Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/5/2015 Mammoth Marketing Group 7 Payee address; 6 Amount (\$) City; State; Zip Code 4708 Eigel Street 2,419.48 Houston TX 77007 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense **GOTV Expenses Printing Expense** 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

I IXOM I OLITIOAL	CONTINIED HONO						
	The Instruction Guide	explains how to complete this form.					
1 Total pages Schedule F1:	² FILER NAME William R Fra:	zer 3 Filer ID (Ethics Commission filers)					
4 Date	5 Payee name	5 Payee name					
11/5/2015	Mammoth Marketing Group	p					
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
1,178.73	4708 Eigel Street						
	Houston TX 77007						
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	Advertisement					
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held					
4 Date	5 Payee name						
11/5/2015	Mammoth Marketing Group						
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
388.72	4708 Eigel Street						
	Houston TX 77007						
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description					
		Check if travel outside of Texas, complete Schedule T					
		Check if Austin, TX, officeholder living expense					
	Office Overhead/Rental Expense	Postage & supplies					
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held					
expendituree to benefit C/OH	Canadato / Cinconcaor Hame	Since rolls					
4 Date	5 Payee name						
11/5/2015	Mammoth Marketing Group	D					
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
237.84	4708 Eigel Street						
	J						
	Houston TX 77007						
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 William R Frazer Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Sales Tax Office Overhead/Rental Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/13/2015 Mammoth Marketing Group 7 Payee address; 6 Amount (\$) City; State; Zip Code 4708 Eigel Street 5,225.79 Houston TX 77007 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense **GOTV Expenses Printing Expense** 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 Total pages Schedule F1:	² FILER NAME William R Fraze	er	3 Filer ID (Ethics Commission filers)			
4 Date	5 Payee name					
11/16/2015	Mammoth Marketing Group					
6 Amount (\$)	7 Payee address; City;	State; Zip Code				
2,197.00	4708 Eigel Street					
	Houston TX 77007					
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description				
		Check if travel outside of Tex	kas, complete Schedule T			
		Check if Austin, TX, officehol	lder living expense			
	Solicitaion/Fundraising	Fundraising - Octob	er			
	Expense					
9 Complete ONLY if direct	Candidate / Officehoder name	office sought off	ice held			
expendituree to benefit C/OH						
4 Date	5 Payee name					
11/5/2015	Philip G Owens					
6 Amount (\$)	7 Payee address; City;	State; Zip Code				
4,000.00	10231 Glenfield Park Lane					
	Houston TX 77070					
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description				
		Check if travel outside of Tex	xas, complete Schedule T			
		Check if Austin, TX, officehol	lder living expense			
	Consulting Expense	Consulting				
9 Complete ONLY if direct	Candidate / Officehoder name	office sought off	ice held			
expendituree to benefit C/OH						
4 Date	5 Payee name					
11/8/2015	Café Adobe					
6 Amount (\$)	7 Payee address; City;	State; Zip Code				
556.91	7620 Katy Freeway					
	Houston TX 77024					
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 William R Frazer Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Campaign Event Food/Beverage Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 12/1/2015 Philip G Owens 7 Payee address; 6 Amount (\$) City; Zip Code State; 4,000.00 10231 Glenfield Park Lane Houston TX 77070 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Consulting Consulting Expense 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:	² FILER NAME William R Fraze	er	3 Filer ID (Ethics Commission filers)				
4 Date	5 Payee name						
11/23/2015	Phillip Bryant & Associates L	LC					
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
1,000.00	PO Box 2303						
	Houston TX 77252						
8 PURPOSE OF EXPENDITURE	(a) Category Consulting Expense	(b) Description Check if travel outside of Technology Check if Austin, TX, officehology Consulting					
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	I office sought o	ffice held				
4 Date	5 Payee name						
11/30/2015	Phillip Bryant & Associates L	LC					
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
7,355.00	PO Box 2303						
	Houston TX 77252						
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	(b) Description Check if travel outside of Te Check if Austin, TX, officeho GOTV Expenses	•				
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held				
4 Date	5 Payee name						
11/24/2015	Raconteur Media Company						
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
7,250.00	101 W 6th St						
	Suite 613						
	Austin TX 78701						
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 William R Frazer Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Digital Advertising Advertising 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 Southern TV 7 Payee address; 6 Amount (\$) Zip Code City; State; 1,500.00 11122 Bellaire Blvd Houston TX 77072 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense TV Advertising Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

I KOM I OLITIOAL	<u> </u>		
	The Instruction Guide exp	plains how to complete this form	-
1 Total pages Schedule F1:	² FILER NAME William R Fraze	r	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/30/2015	Shock Designs		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
8,722.21	6110 Shadow Crest St		
	Houston TX 77074		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te.	xas, complete Schedule T
		Check if Austin, TX, officeho	
	Drinting Typenes	Signs and T-Shirts	was in ing expense
	Printing Expense	Signs and 1-Smits	
9 Complete ONLY if direct	Candidate / Officehoder name o	ffice sought of	ffice held
expendituree to benefit C/OH	ouridians, cinosileasi name	oo ooug	
4 Date	5 Payee name		
11/30/2015	Terry Franks		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
		Ciato, Zip Code	
200.00	5011 Almeda Road		
	Houston TX 77004		
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	Recording Radio Ad	ds
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought of	ffice held
4 Date	5 Payee name		
11/9/2015	US Treasury		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
554.26	Internal Revenue Service		
	Ogden UT 84201		
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 William R Frazer Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense 941 Q4 deposit Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 12/2/2015 **US Treasury** 7 Payee address; 6 Amount (\$) City; Zip Code State; 613.26 Internal Revenue Service Ogden UT 84201 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense 941 Q4 deposit Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

	The Instruction Guide ov	plains how to complete this form	
1 Total pages Schedule F1:	2 FILER NAME William R Fraze	·	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		,/
11/13/2015	VRW PAC		
		Chata: Zin Cada	
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1,000.00	PO Box 79924		
	Houston TX 77279	ı	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te.	xas, complete Schedule T
		Check if Austin, TX, officeho	lder living expense
	Contributions/Donations	Event Sponsor	
	Made By Candidate/Officeholder/Politi		
	cal Committee		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	fice held
4 Date	5 Payee name		
10/29/2015	YK Creative		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
862.50	20507 Spring Mission		
	Spring TX 77388		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te.	xas, complete Schedule T
		Check if Austin, TX, officeho	lder living expense
	Office Overhead/Rental	Web Maintenance	
	Expense		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	fice held
4 Date	5 Payee name		
12/2/2015	Mammoth Marketing Group		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
903.94	4708 Eigel Street		
	Houston TX 77007		
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 William R Frazer Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Printing **Printing Expense** 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 12/2/2015 Mammoth Marketing Group 7 Payee address; 6 Amount (\$) City; State; Zip Code 4708 Eigel Street 847.09 Houston TX 77007 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Office Overhead/Rental Postage 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 William R Fraze	er	3 Filer ID (Ethics Commission filers)			
4 Date	5 Payee name					
12/2/2015	Mammoth Marketing Group					
6 Amount (\$)	7 Payee address; City;	State; Zip Code				
1,756.68	4708 Eigel Street					
	Houston TX 77007					
8 PURPOSE OF EXPENDITURE	(a) Category Printing Expense	(b) Description Check if travel outside of Te Check if Austin, TX, officeho Event Invite -Printin	older living expense			
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	I Iffice sought of	fice held			
4 Date	5 Payee name					
12/2/2015	Mammoth Marketing Group					
6 Amount (\$)	7 Payee address; City;	State; Zip Code				
383.73	4708 Eigel Street					
	Houston TX 77007					
8 PURPOSE OF EXPENDITURE	(a) Category Office Overhead/Rental Expense	(b) Description Check if travel outside of Te. Check if Austin, TX, officeho Event Invite -Printin	older living expense			
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	fice held			
4 Date	5 Payee name					
12/2/2015	Mammoth Marketing Group					
6 Amount (\$)	7 Payee address; City;	State; Zip Code				
7,859.40	4708 Eigel Street					
o DUDDOSE OF EVERYDITUSE	Houston TX 77007	/h\ Docorintia				
8 PURPOSE OF EXPENDITURE	r(a) 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) ² FILER NAME William R Frazer Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Printing **Printing Expense** 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 12/2/2015 Mammoth Marketing Group 7 Payee address; 6 Amount (\$) City; State; Zip Code 4708 Eigel Street 11,126.39 Houston TX 77007 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Office Overhead/Rental Printing Expense 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

	The Instruction Guide ex	plains how to complete this form	1.
1 Total pages Schedule F1:	² FILER NAME William R Fraze	er	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
12/2/2015	Authorize.net		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
45.35	PO Box 947		
	American Fork UT 84003		
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
	Accounting/Banking	Credit Card Proces	ssing Fee
	g		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought o	ffice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
12/2/2015	Spec's		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
243.16	8416 Katy Freeway		
	Spring Valley TX 77024		
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
	Food/Beverage Expense	Campaign Event	
	. 304/201014gc _//poi/100	, -	
9 Complete ONLY if direct	Candidate / Officehoder name	office sought o	ffice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
12/2/2015	Office Depot		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
162.75	13802 North West Freeway		
	,		
	Houston TX 77040		
	1 1100051011 177 770-10		

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 William R Frazer Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Office Supplies Office Overhead/Rental Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 12/2/2015 Office Depot 7 Payee address; 6 Amount (\$) City; Zip Code State; 8.65 7018 Highway 6 North Copperfield TX 77095 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Office Overhead/Rental Office Supplies Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

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 William R Frazer 4 Date 5 Payee name 12/2/2015 Party City **6** Amount (\$) 7 Payee address; City; State; Zip Code 35.64 3225 Southwest Frwy Houston TX 77027 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Office Supplies Office Overhead/Rental Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

E	XPENDITURES MA	ADE	BY CREDIT CARD			SCHEDULE F4		
	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F4:	2	FILER NAME William R Fraze	r	3 Filer ID (Ethics Commission filers)			
4	TOTAL OF UNITEMIZED EXPE	NDIT	URES CHARGED TO A CREDIT CARD)	\$\$7,103.22			
5	Date	6	Payee name					
	10/30/2015		Costco					
7	Amount (\$)	8	Payee address; City;	Sta	ate; Zip Code			
	97.50		3836 Richmond Ave					
			Houston TX 77027					
9	TYPE OF EXPENDITURE	X	Political		Non-Political			
10	PURPOSE OF EXPENDITURE	(a) C	Category (See Categories listed at the top of this	(b) [Description			
			,	Г	Check if travel outside of Texas, complete Sched	ule T		
					Check if Austin, TX, officeholder living expense			
			Office Overhead/Rental Expense	L	Stamps			
			Expense					
11	Complete ONLY if direct expendituree to benefit C/OH	Can	didate / Officehoder name		office sought office	ce held		

E)	(PENDITURES MA	DE	BY CREDIT CARD				SCHEDULE	F4
			The Instruction Guide explains	ho	w 1	to complete this form.		
1	Total pages Schedule F4:	2	FILER NAME William R Fraze	r		3 Filer ID (Ethics Commission filers)		\neg
4	TOTAL OF UNITEMIZED EXPE	NDITU	IRES CHARGED TO A CREDIT CARD)		\$\$7,103.22		
5	Date	6	Payee name					
	10/30/2015		Costco					
7	Amount (\$)	8	Payee address; City;	5	Sta	ate; Zip Code		
	31.27		3836 Richmond Ave					
			Houston TX 77027					
9	TYPE OF EXPENDITURE	X	Political			Non-Political		
10	PURPOSE OF EXPENDITURE	(a) Ca	ategory (See Categories listed at the top of this le)	(b)) D	Description		
						Check if travel outside of Texas, complete Sched	lule T	
						Check if Austin, TX, officeholder living expense		
			Office Overhead/Rental Expense			Office Supplies		
			2.400.00					
11	Complete ONLY if direct	Cand	idate / Officehoder name			office sought office	ce held	\dashv
	expendituree to benefit C/OH					-		
5	Date	6	Payee name					
	11/2/2015		Comcast					
7	Amount (\$)	8	Payee address; City;	5	Sta	ate; Zip Code		
	131.88		9602 S 300 W. Suite B					
	TVDE OF EVERYDITUDE	 	Sandy UT 84070			In a second		
9	TYPE OF EXPENDITURE	(a) C:	Political	/1-		Non-Political		
10	PURPOSE OF EXPENDITURE	schedu	ategory (See Categories listed at the top of this le)	(D)) D	Description		
						Check if travel outside of Texas, complete Sched	lule T	
						Check if Austin, TX, officeholder living expense		
			Office Overhead/Rental Expense			WiFi		
			•					
11	Complete ONLY if direct	Cand	idate / Officehoder name			office sought office	ce held	-
	expendituree to benefit C/OH							
5	Date	6	Payee name					
	11/2/2015		Office Depot					

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission filers) Total pages Schedule F4: FILER NAME William R Frazer TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$\$7,103.22 Amount (\$) State; Zip Code Payee address; City; 75.18 5540 Weslayan ST Houston TX 77005 Political TYPE OF EXPENDITURE Non-Political 9 **PURPOSE OF EXPENDITURE** (a) Category (See Categories listed at the top of this (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Office Supplies Office Overhead/Rental Expense Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 5 Date 6 Payee name 11/3/2015 Café Adobe **7** Amount (\$) 8 Payee address; City: State: Zip Code 6,193.50 7620 Katy Freeway Houston TX 77024 9 TYPE OF EXPENDITURE Political Non-Political **PURPOSE OF EXPENDITURE** (a) Category (See Categories listed at the top of this (b) Description schedule) Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Campaign Event Food/Beverage Expense Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH Date 6 Payee name 11/17/2015 **Nation Builders 7** Amount (\$) City; Payee address; State; Zip Code 82.90 520 S. Grand Ave 2nd Floor

E	KPENDITURES MA	DE BY CREDIT CARD			SCHEDULE F4
		The Instruction Guide explains	how	to complete this form.	
1	Total pages Schedule F4:	2 FILER NAME William R Fraze	er	3 Filer ID (Ethics Commission filers)	
4	TOTAL OF UNITEMIZED EXPE	NDITURES CHARGED TO A CREDIT CARI	D	\$\$7,103.22	
		Los Angeles CA 90071		1	
9	TYPE OF EXPENDITURE	X Political		Non-Political	
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this	(b) [Description	
		schedule)		Check if travel outside of Texas, complete Schedu	ule T
				Check if Austin, TX, officeholder living expense	
		Office Overhead/Rental		Website	
		Expense			
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name		office sought office	e held
	Data	C Davis same			
5		6 Payee name			
7	11/21/2015 Amount (\$)	Griff's 8 Payee address; City;	St.	ate; Zip Code	
'	393.09	3416 Roseland St	Oli	ale, Zip Gode	
	393.09	34 TO NOSEIATIO SI			
		Houston TX 77006			
9	TYPE OF EXPENDITURE	X Political		Non-Political	
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this	(b) [
		schedule)		Check if travel outside of Texas, complete Schedu	ıle T
				Check if Austin, TX, officeholder living expense	
		Food/Beverage Expense		Campaign Event	
		Food/beverage Expense		Campaign Event	
11	Complete ONLY if direct	Candidate / Officehoder name		office sought office	e held
	expendituree to benefit C/OH				
5	Date	6 Payee name			
	11/25/2015	Grasshopper.com			
7	Amount (\$)	8 Payee address; City;	Sta	ate; Zip Code	
	58.46	197 1st Avenue, Suite 200			
_		Needham MA 02494		T.,	
9	TYPE OF EXPENDITURE	X Political		Non-Political	
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) [Description	

E	KPENDITURES MA	DE I	BY CREDIT CARD			SCHEDULE F4
			The Instruction Guide explains	how	to complete this form.	
1	Total pages Schedule F4:	2	FILER NAME William R Fraze	er	3 Filer ID (Ethics Commission filers)	
4	TOTAL OF UNITEMIZED EXPE	NDITUR	RES CHARGED TO A CREDIT CARE)	\$\$7,103.22	
		1	Office Overhead/Rental Expense		Check if travel outside of Texas, complete Sci Check if Austin, TX, officeholder living expens Telephone Services	
11	Complete ONLY if direct expendituree to benefit C/OH	Candida	late / Officehoder name		office sought	office held
5	Date	6 F	Payee name			
	11/19/2015		Intuit			
7	Amount (\$)	8 F	Payee address; City;	Sta	ate; Zip Code	
	39.44		Customer Communications			
		2	2800 E. Commerce Center Pl	ace		
		-	Tucson AZ 85706			
9	TYPE OF EXPENDITURE	XF	Political		Non-Political	
10	PURPOSE OF EXPENDITURE	schedule)	egory (See Categories listed at the top of this) Office Overhead/Rental Expense	(b) [Description Check if travel outside of Texas, complete Sci Check if Austin, TX, officeholder living expens Payroll Processing	
11	Complete ONLY if direct expendituree to benefit C/OH	Candid	late / Officehoder name		office sought c	office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES SCHEDULE G MADE FROM PERSONAL FUNDS The Instruction Guide explains how to complete this form. 1 Total Pages Schedule G: 3 FilerID (Ethics Commission filers) 2 FILER NAME William R Frazer 5 Payee name 4 Date 11/10/2015 **Chase Card Services** 6 Amount (\$) 7 Payee Address: State; City; Zip Code 1.086.85 Cardmember Service **Palatine** 60094-4014 X Reimbursement from PO Box 94014 political contributions intended 8 (a) Category (b) Description Credit Card Payment Payment of credit card bill for postage **PURPOSE OF EXPENDITURE** Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH 4 Date 5 Payee name 11/10/2015 **Chase Card Services** 6 Amount (\$) 7 Pavee Address: Zip Code Citv: State: 39.44 Cardmember Service **Palatine** IL 60094-4014 X Reimbursement from PO Box 94014 political contributions intended 8 (a) Category (b) Description **PURPOSE OF** Credit Card Payment Payment of credit card bill for payroll processing **EXPENDITURE** Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH 4 Date 5 Pavee name 12/2/2015 **Chase Card Services** 6 Amount (\$) 7 Payee Address; City; State; Zip Code 39.44 Cardmember Service **Palatine** IL 60094-4014 X Reimbursement from PO Box 94014 political contributions intended 8 (a) Category (b) Description

POLITICAL EXPENDITURES SCHEDULE G MADE FROM PERSONAL FUNDS The Instruction Guide explains how to complete this form. 1 Total Pages Schedule G: 3 FilerID (Ethics Commission filers) 2 FILER NAME William R Frazer **PURPOSE OF** Credit Card Payment Payment of credit card bill for payroll processing **EXPENDITURE** Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office held Office sought expenditure to benefit C/OH 4 Date 5 Payee name 11/6/2015 American Express 6 Amount (\$) 7 Payee Address; City; Zip Code State; PO Box 650448 25.00 Dallas TX 75265-0448 X Reimbursement from political contributions intended 8 (b) Description (a) Category **PURPOSE OF** Credit Card Payment Payment of credit card bill for Candidate forum **EXPENDITURE** Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH 4 Date 5 Payee name 11/6/2015 American Express 6 Amount (\$) 7 Payee Address; City; State; Zip Code 131.88 PO Box 650448 TX 75265-0448 Dallas Reimbursement from political contributions intended 8 (b) Description (a) Category **PURPOSE OF** Credit Card Payment Payment of credit card bill for office WiFi **EXPENDITURE** Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Date 5 Payee name 11/6/2015 American Express

POLITICAL EXP	ENDITURES	SCHEDULE G
MADE FROM PE	RSONAL FUNDS	
	The Instruction Guide explains	how to complete this form.
1 Total Pages Schedule G:	² FILER NAME William R Frazer	3 FilerID (Ethics Commission filers)
6 Amount (\$)	7 Payee Address;	City; State; Zip Code
68.09	PO Box 650448	Dallas TX 75265-0448
X Reimbursement from		
political contributions		
intended		
8	(a) Category	(b) Description
PURPOSE OF EXPENDITURE	Credit Card Payment	Payment of credit card bill for flowers for event host
EXI ENDITORE		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
4 Date	5 Payee name	
11/6/2015	American Express	
6 Amount (\$)	7 Payee Address;	City; State; Zip Code
68.18	PO Box 650448	Dallas TX 75265-0448
X Reimbursement from	1 0 80% 000440	Dallas 17 70200 04-40
political contributions		
intended		
8	(a) Category	(b) Description
PURPOSE OF	Credit Card Payment	Payment of credit card bill for flowers for event host
EXPENDITURE		Check if travel outside of Texas, complete Schedule T
		\sqcup
O Commission ONU V. S. Property	Condidate (Officeholder	Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

POLITICAL EXPENDITURES SCHEDULE G MADE FROM PERSONAL FUNDS The Instruction Guide explains how to complete this form. 1 Total Pages Schedule G: 3 FilerID (Ethics Commission filers) 2 FILER NAME William R Frazer 5 Payee name 4 Date 11/6/2015 American Express 6 Amount (\$) City; 7 Payee Address; State: Zip Code 500.00 PO Box 650448 Dallas TX 75265-0448 X Reimbursement from political contributions intended 8 (a) Category (b) Description **PURPOSE OF** Credit Card Payment Payment of credit card bill for event sponsorship **EXPENDITURE** Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH 4 Date 5 Payee name 11/6/2015 American Express 6 Amount (\$) 7 Payee Address; Zip Code City; State: 250.00 PO Box 650448 Dallas TX 75265-0448 X Reimbursement from political contributions intended 8 (a) Category (b) Description **PURPOSE OF** Credit Card Payment Payment of credit card bill for event sponsorship **EXPENDITURE** Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH 4 Date 5 Payee name 11/6/2015 American Express 6 Amount (\$) 7 Payee Address; City; State; Zip Code 341.60 PO Box 650448 Dallas TX 75265-0448 X Reimbursement from political contributions intended 8 (a) Category (b) Description

POLITICAL EXPENDITURES SCHEDULE G MADE FROM PERSONAL FUNDS The Instruction Guide explains how to complete this form. 1 Total Pages Schedule G: 3 FilerID (Ethics Commission filers) 2 FILER NAME William R Frazer Payment of credit card bill for food for event **PURPOSE OF** Credit Card Payment **EXPENDITURE** Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office held Office sought expenditure to benefit C/OH 4 Date 5 Payee name 11/6/2015 American Express 6 Amount (\$) 7 Payee Address; City; Zip Code State; PO Box 650448 68.18 Dallas TX 75265-0448 X Reimbursement from political contributions intended 8 (b) Description (a) Category **PURPOSE OF** Credit Card Payment Payment of credit card bill for flowers for event host **EXPENDITURE** Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH 4 Date 5 Payee name 11/6/2015 American Express 6 Amount (\$) 7 Payee Address; City; State; Zip Code 69.00 PO Box 650448 TX 75265-0448 Dallas Reimbursement from political contributions intended 8 (b) Description (a) Category **PURPOSE OF** Credit Card Payment Payment of credit card bill for website maintenance **EXPENDITURE** Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Date 5 Payee name 11/6/2015 American Express

POLITICAL EXPENDITURES		SCHEDULE G	
MADE FROM PE	ERSONAL FUNDS		
The Instruction Guide explains how to complete this form.			
1 Total Pages Schedule G:	² FILER NAME William R Frazer	3 FilerID (Ethics Commission filers)	
6 Amount (\$)	7 Payee Address;	City; State; Zip Code	
68.18	PO Box 650448	Dallas TX 75265-0448	
X Reimbursement from			
political contributions			
intended			
8	(a) Category	(b) Description	
PURPOSE OF EXPENDITURE	Credit Card Payment	Payment of credit card bill for flowers for event host	
-		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	
4 Date	5 Payee name		
10/28/2015	Mammoth Marketing Group	City Caster 7in Code	
6 Amount (\$)	7 Payee Address;	City; State; Zip Code	
7,474.21	4708 Eigel Street	Houston TX 77007	
X Reimbursement from			
political contributions			
intended			
8	(a) Category	(b) Description	
PURPOSE OF EXPENDITURE	Printing Expense	GOTV Mailout	
		Check if travel outside of Texas, complete Schedule T	
		Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	

POLITICAL EXPENDITURES		SCHEDULE G
MADE FROM P	ERSONAL FUNDS	
	The Instruction Guide explains h	now to complete this form.
1 Total Pages Schedule G:	² FILER NAME William R Frazer	3 FilerID (Ethics Commission filers)
4 Date	5 Payee name	
10/28/2015	Mammoth Marketing Group	
6 Amount (\$)	7 Payee Address;	City; State; Zip Code
9,742.63	4708 Eigel Street	Houston TX 77007
X Reimbursement from		
political contributions		
intended		
8	(a) Category	(b) Description
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	Postage for GOTV Mailout
LAI ENDITORE		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS NEEDED