CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

The C/OH Instruction (Guide explains how to comp	olete this form.	er ID	2 Total pages filed:
				112
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR	FIRST	МІ	OFFICE USE ONLY
I VE MYSE.	Mr.	William	R.	Date NELGYPTU
	NICKNAME	LAST	SUFFIX	I S TECKNI NO
	Bill	Frazer		Con Contraction Sales
4 CANDIDATE /	ADDRESS / PO BOX; AP	T / SUITE #; CITY;	ZIP CODE	Date Hand-delivered or Date Postmarked
OFFICEHOLDER MAILING ADDRESS	4130 Turnberry Circle			Receipt # Arriplint
Change of Address	Houston, TX 77025			Date Processed 2 9
				Date Imaged
5 CAMPAIGN	MS/MRS/MR	FIRST	MI	
TREASURER NAME	Mr. Dav	id	G.	
	NICKNAME	LAST	SUFFIX	
	A	acosta		
6 CAMPAIGN	STREET ADDRESS (NO P	O BOX PLEASE);	APT / SUITE #; CITY;	STATE; ZIP CODE
TREASURER ADDRESS	1703 W. 12th Street		Houston	TX 77008
(Residence or Business)	1705 W. 12ul succi		Houston	1A. 77000
7 CAMPAIGN TREASURER		ONE NUMBER EXTEN	SION	
PHONE	832 504	-9681 		
8 REPORT TYPE	January 15	30th day before election	n Runoff	15th day after campaign treasurer appointment (officeholder only)
	X July 15	8th day before election	Exceeded \$500 limit	Final Report (Attach C/OH-FR)
9 PERIOD COVERED	Month Day Year		Month Day	Year
COVERED	01/01/2015	THROUG	6H 06/30/201	5
10 ELECTION	ELECTION DATE		ELECTION TYPE	Cothor
	Month Day Year 11/03/2015		Runoff	Other
		X General	Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT	
	None		Houston City Co	ntroller
		GO TO PA	AGE 2	

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 112

13 C / OH NAME	Frazer, William		14 Filer ID					
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political expendi These expenditures may have been made withou officeholders are required to report this informati	t the candidate's or officel	nolder's knowledge or				
Additional Pages	COMMITTEE TYPE TOOMMITTEE NAME							
		COMMITTEE ADDRESS						
	SPECIFIC							
		COMMITTEE CAMPAIGN TREASURER NAME						
		COMMITTEE CAMPAIGN TREASURER ADDRI	ESS					
16 CONTRIBUTION TOTALS		AL CONTRIBUTIONS OF \$50 OR LESS (OTHEF ARANTEES OF LOANS), UNLESS ITEMIZED	THAN PLEDGES,	\$ 987.00				
	•	AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAI	IS)	\$ 129,106.97				
EXPENDITURE TOTALS	3. TOTAL POLITIC	AL EXPENDITURES OF \$100 OR LESS, UNLES	S ITEMIZED	\$ 0.00				
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 120,956.77				
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE RIOD	LAST DAY OF THE	\$ 53,973.87				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS A TING PERIOD	S OF THE LAST DAY	\$ 32,500.00				
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. Washing Continue Continue								
	Sworn to and subscribed before me, by the said							
Signature of office	Signature of officer administering Printed name of officer administering Title of officer administering oath							

SUBTOTALS - C/OH

FORM **C/OH**COVER SHEET PG 3

3 of 112

3. SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 32,500.00 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 92,054.44 6. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 6,077.33 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ 22,825.00 9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ 22,825.00 9. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS RETURNED		ER NAM			
2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ 1,009.97 3. SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 32,500.00 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 92,054.44 6. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 6,077.33 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ 22,825.00 9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ 22,825.00 10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS \$ 30.00000000000000000000000000000000000					SUBTOTAL AMOUNT
3. SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 32,500.00 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 92,054.44 6. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 6,077.33 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ 22,825.00 9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ 22,825.00 9. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 32,500.00	1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 128,097.00
4. X SCHEDULE E: LOANS \$ 32,500.00 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 92,054.44 6. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 6,077.33 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ 8. X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ 22,825.00 9. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ 10. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$	2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 1,009.97
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 92,054.44 6. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 6,077.33 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ 22,825.00 8. X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ 22,825.00 9. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ 10. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$	3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
6. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 6,077.33 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ 8. X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ 22,825.00 9. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ 10. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$	4.	X	SCHEDULE E: LOANS		\$ 32,500.00
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS 8. X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 22,825.00	5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$ 92,054.44
8. X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ 22,825.00 9. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 11. X SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED	6.	X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 6,077.33
9. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED	7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
10. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 11. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED	8.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$ 22,825.00
SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED	9.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
	10		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$
	11	X		RETURNED	\$ 100.00

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/41 Rpt: 4/112 Filer ID FILER NAME Frazer, William 4 Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 03/03/2015 Abdullah, Imad F \$250.00 6 Contributor address; City; State; Zip Code Houston, TX 77056 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: Date 06/16/2015 \$250.00 Adams, James S Contributor address; City; State; Zip Code Houston, TX 77027 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: 06/30/2015 \$1,000.00 Alexander Jr., Neil K Contributor address; City; State; Zip Code Houston, TX 77005 Employer (See Instructions) Principal occupation / Job title (See Instructions) Attorney Porter & Hedges Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) \$1,500.00 05/06/2015 Andrews & Kurth Texas PAC Contributor address; City; State; Zip Code Houston, TX 77002 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 06/30/2015 Bacuum, John \$100.00 Contributor address; City; State; Zip Code Houston, TX 77018 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/41 Rpt: 5/112 FILER NAME 3 Filer ID Frazer, William Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 02/18/2015 \$1,000.00 Bain, Lorne 6 Contributor address; City; State; Zip Code Houston, TX 77019 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/31/2015 \$500.00 Barefield, Rupert W Contributor address; City; State; Zip Code Houston, TX 77080 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$500.00 06/29/2015 Barefield, Rupert W Contributor address; City; State; Zip Code Houston, TX 77080 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 02/18/2015 \$250.00 Bedell, Leonard A Contributor address; City; State; Zip Code Houston, TX 77255 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/19/2015 Bentley, Barton \$250.00 Contributor address; City; State; Zip Code Houston, TX 77019 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 3/41 Rpt: 6/112 FILER NAME Filer ID Frazer, William Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 06/24/2015 \$100.00 Bentley, Barton 6 Contributor address; City; State; Zip Code Houston, TX 77019 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 04/14/2015 \$100.00 Bernstein, Matthew Contributor address; City; State; Zip Code Houston, TX 77027 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/16/2015 Bobbitt, George \$500.00 Contributor address; City; State; Zip Code Houston, TX 77096 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date \$250.00 05/31/2015 Bobbitt, Robin S Contributor address; City; State; Zip Code Bellaire, TX 77401 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: \$500.00 06/30/2015 Borochoff, Bob Contributor address; City; State; Zip Code Houston, TX 77008 Principal occupation / Job title (See Instructions) Employer (See Instructions) President and CEO Caf Adobe

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 4/41 Rpt: 7/112 FILER NAME Filer ID Frazer, William 4 Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 05/28/2015 \$500.00 Boss, Anne 6 Contributor address; City; State; Zip Code Houston, TX 77056 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Boss Group** private equity Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 02/18/2015 \$100.00 Braniff, Thomas M Contributor address; City; State; Zip Code Houston, TX 77054 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/28/2015 Braniff, Thomas M \$100.00 Contributor address; City; State; Zip Code Houston, TX 77054 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/30/2015 Braniff, Wendall C \$100.00 Contributor address; City; State; Zip Code Houston, TX 77025 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/23/2015 Brock III, John B \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired

SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 5/41 Rpt: 8/112 FILER NAME 3 Filer ID Frazer, William Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 06/22/2015 Brock III, John B \$1,000.00 6 Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 05/15/2015 Brown, William P \$500.00 Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/04/2015 \$200.00 Bryant, Virgie C Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor X out-of-state PAC (ID#: C00506733 Amount of Contribution (\$) Date 04/16/2015 \$3,000.00 Cadence Bank NA PAC Contributor address; City; State; Zip Code Birmingham, AL 35203 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 04/24/2015 Callahan, Tom \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77030 Principal occupation / Job title (See Instructions) Employer (See Instructions) Financial Advisor Callahan Advisors

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 6/41 Rpt: 9/112 FILER NAME Filer ID Frazer, William 5 Full name of contributor Date Amount of Contribution (\$) out-of-state PAC (ID#: 03/06/2015 Callender, Larry \$250.00 6 Contributor address; City; State; Zip Code Houston, TX 77057 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 06/30/2015 \$100.00 Cha, John Contributor address; City; State; Zip Code Spring, TX 77381 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/29/2015 Chovanetz, Frank \$200.00 Contributor address; City; State; Zip Code Hallettsville, TX 77964 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 06/30/2015 Collier, Michael \$500.00 Contributor address; City; State; Zip Code Kingwood, TX 77345 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Energy M&A Consultant** Self-employed Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: Crosby, Linda 02/17/2015 \$250.00 Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

	MONET	ARY POLITICAL CONTRIBUT		SCHEDUI	E A1	
	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 7/41 Rpt: 10/112	
2	FILER NAME Frazer, Willian	m		3	Filer ID	
4	Date 06/16/2015	 Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00
_		Houston, TX 77040	In Earland (Contraction			
8	Managing Pa		9 Employer (See Instructions NewQuest/Croswell	s)		
	Date 03/04/2015	Full name of contributor out-of-state PAC (IE Curtis, Patricia L Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Houston, TX 77027 pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Attorney		GEMSA Loan Services			
	Date 05/27/2015	Full name of contributor out-of-state PAC (IED arden, Ronnie Contributor address; City; State; Zip Code / Houston, TX 77068	O#:)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/01/2015	Full name of contributor out-of-state PAC (IEDeGeorgio, Tom Contributor address; City; State; Zip Code The Woodlands, TX 77389			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/30/2015	Full name of contributor out-of-state PAC (IEDick, Eric Contributor address; City; State; Zip Code Houston, TX 77092	D#:)	•	Amount of Contribution (\$)	\$500.00
		pation / Job title (See Instructions)	Employer (See Instructions	s)		····
	Attorney		Dick Law Firm			

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 8/41 Rpt: 11/112 FILER NAME 3 Filer ID Frazer, William Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 06/04/2015 Dillahunty, Cyd \$500.00 6 Contributor address; City; State; Zip Code Houston, TX 77055 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Retired Full name of contributor Date out-of-state PAC (ID#: Amount of Contribution (\$) 06/04/2015 Donovan, John W. \$200.00 Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 02/26/2015 Duckworth, Bart \$500.00 Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) Employer (See Instructions) Real Estate Development The Ainbinder Company Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/28/2015 Duckworth, Bart \$500.00 Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) Employer (See Instructions) Real Estate Development The Ainbinder Company Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 04/13/2015 Duncan, Robert D \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77027 Principal occupation / Job title (See Instructions) Employer (See Instructions) Real Estate Services Transwestern

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 9/41 Rpt: 12/112 FILER NAME 3 Filer ID Frazer, William Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 04/12/2015 \$500.00 Dunlap, Joan 6 Contributor address; City; State; Zip Code Houston, TX 77057 Principal occupation / Job title (See Instructions) Employer (See Instructions) Self-employed **CPA** Full name of contributor Date out-of-state PAC (ID#: Amount of Contribution (\$) 06/30/2015 Dunlop, Fred \$500.00 Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/24/2015 Durham, David \$100.00 Contributor address; City; State; Zip Code Houston, TX 77080 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/04/2015 \$100.00 Durham, David Contributor address; City; State; Zip Code Houston, TX 77080 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 04/23/2015 Dvorachek, Christopher J \$100.00 Contributor address; City; State; Zip Code Houston, TX 77095 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 10/41 Rpt: 13/112 3 Filer ID FILER NAME Frazer, William 5 Full name of contributor Date 7 Amount of Contribution (\$) out-of-state PAC (ID#: 06/22/2015 Edwards, Lynn \$250.00 6 Contributor address; City; State; Zip Code Houston, TX 77079 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 03/07/2015 \$100.00 Elder, Ramsay Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/22/2015 Ellwood, Daniel \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Daniel L. Ellwood PC Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#:_ 06/02/2015 \$1,000.00 Erwin, Greg Contributor address; City; State; Zip Code Houston, TX 77030 Principal occupation / Job title (See Instructions) Employer (See Instructions) Winstead PC lawyer Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 04/14/2015 \$500.00 Erwin, James F Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Executive VP** Chicago Title

	MONEI	ARY POLITICAL C	ONTRIBUTIO)NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 11/41 Rpt: 14/112	
2	FILER NAME Frazer, Willia	m			3	Filer ID	***************************************
4	Date 04/13/2015	Named 1		7	Amount of Contribution (\$)	\$100.00	
8	Principal occu	Houston, TX 77018 pation / Job title (See Instructions	s)	9 Employer (See Instructions))	and the second s	
	Date 03/10/2015	Full name of contributor Flickinger, Fred Contributor address; City; St	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions	<u>;</u>)	Employer (See Instructions	L	**************************************	
2200	Date 05/28/2015	Full name of contributor Foster, John E Contributor address; City; Si	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$100.00
<i>-</i>	Principal occu	Belaire, TX 77401 pation / Job title (See Instructions	s)	Employer (See Instructions	j)		***************************************
	Date 03/31/2015	Full name of contributor Frazier, Melissa Contributor address; City; Si Houston, TX 77006	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$250.00
	Principal occu Financial ma	pation / Job title (See Instructions	5)	Employer (See Instructions Comfort Systems USA	L		
	Date 04/09/2015	Full name of contributor Frazier, Melissa Contributor address; City; S Houston, TX 77006	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$250.00
	Principal occu Financial ma	rpation / Job title (See Instructions anagement	s)	Employer (See Instructions Comfort Systems USA	5)		

SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 12/41 Rpt: 15/112 FILER NAME Filer ID Frazer, William Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 06/24/2015 Frazier, Melissa \$250.00 6 Contributor address; City; State; Zip Code Houston, TX 77006 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Comfort Systems USA Financial management Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/15/2015 \$500.00 Freels, Brad Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Employer (See Instructions) Investments Midway Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/11/2015 Frierson, Raymond \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) Employer (See Instructions) **CPA** Frierson Sol Simonton & Kutac PLLC Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: Date 06/09/2015 Gaas, Christopher \$1,000.00 Contributor address; City; State; Zip Code Richmond, TX 77406 Principal occupation / Job title (See Instructions) Employer (See Instructions) **CBRE** Mortgage Banker Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/04/2015 Galloway, Scott \$500.00 Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Employer (See Instructions) Commercial Real Estate Broker Holliday Fenoglio Fowler HFF L.P.

MONETARY POLITICAL CONTRIBUTIONS

	MONET	ARY POLITICAL CONT	RIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to con	nplete this fo	rm.	1	Total pages Schedule A1: Sch: 13/41 Rpt: 16/112	
2	FILER NAME Frazer, Willian	n			3	Filer ID	
4	Date 03/06/2015	Gamble, William)	7	Amount of Contribution (\$)	\$1,000.00
		Houston, TX 77096			<u> </u>		
8	Principal occur Tax Consulta	pation / Job title (See Instructions) unt	1	Employer (See Instructions SIGACO LLC	s)		
	Date 06/30/2015	Geis, Sally Contributor address; City; State; Zip C	-state PAC (ID#:			Amount of Contribution (\$)	\$200.00
	Principal occu	Austin, TX 78746 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
		(,			-,		
	Date 05/21/2015	George, Karen	-state PAC (ID#:			Amount of Contribution (\$)	\$250.00
		Houston, TX 77005					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	S)		
	Date 03/04/2015	Full name of contributor out-of Gibson, Malcolm D Contributor address; City; State; Zip C	f-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions MD Gibson & Associate			
	Date 04/02/2015	Goldsberry, Edward N				Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
			•				

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 14/41 Rpt: 17/112 FILER NAME Filer ID Frazer, William Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 02/18/2015 Goodman, Steven \$1,000.00 6 Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) Employer (See Instructions) Goodman Financial Corporation Money Manager Full name of contributor Date out-of-state PAC (ID#: Amount of Contribution (\$) 06/26/2015 \$500.00 Goodwin, Weir Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Employer (See Instructions) Commercial Real Estate Kaplan Acquisitions LLC Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/28/2015 \$500.00 Graham, Geren Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 04/21/2015 Green, Ira \$250.00 Contributor address; City; State; Zip Code Houston, TX 77057 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Amount of Contribution (\$) Full name of contributor Date out-of-state PAC (ID#: 04/28/2015 Greenwood, Tod M \$500.00 Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Executive Managing Director** NewQuest Crosswell.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 15/41 Rpt: 18/112 FILER NAME 3 Filer ID Frazer, William 5 Full name of contributor Date 7 Amount of Contribution (\$) out-of-state PAC (ID#: 03/04/2015 Griffin, Michael \$250.00 6 Contributor address; City; State; Zip Code Katy, TX 77450 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 05/31/2015 Gryska, Mary C \$300.00 Contributor address; City; State; Zip Code Houston, TX 77096 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 04/17/2015 \$250.00 Hambrick, Thomas Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 05/21/2015 Harris, Jeff D \$500.00 Contributor address; City; State; Zip Code Spring, TX 77381 Principal occupation / Job title (See Instructions) Employer (See Instructions) CPA Retired Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 04/14/2015 Harris, Jeffrey \$100.00 Contributor address; City; State; Zip Code Houston, TX 77055 Principal occupation / Job title (See Instructions) Employer (See Instructions) Commercial Real Estate **CBRE**

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 16/41 Rpt: 19/112 FILER NAME Filer ID Frazer, William Date 5 Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/21/2015 \$250.00 Harris, Steven Contributor address; City; State; Zip Code Houston, TX 77055 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 04/08/2015 \$100.00 Harrison, Robin Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: \$500.00 02/18/2015 Harvin, Andrew Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) Employer (See Instructions) Doyle Restrepo Harvin & Robbins LLP Attorney Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 06/10/2015 \$2,500.00 Heaney, J. David Contributor address; City; State; Zip Code Houston, TX 77019 Principal occupation / Job title (See Instructions) Employer (See Instructions) Heaney Rosenthal, Inc. Investments Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date \$2,000.00 05/08/2015 Hibbert, Bonnie E Contributor address; City; State; Zip Code Houston, TX 77057 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 17/41 Rpt: 20/112 FILER NAME 3 Filer ID Frazer, William Date 5 Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/07/2015 Hibbert, James \$500.00 6 Contributor address; City; State; Zip Code Houston, TX 77057 Principal occupation / Job title (See Instructions) Employer (See Instructions) Banker **JPMorgan** Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 03/16/2015 Hodges, Mark \$250.00 Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 03/10/2015 Holm, Chuck \$250.00 Contributor address; City; State; Zip Code Houston, TX 77057 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/30/2015 Holmes, Adam \$100.00 Contributor address; City; State; Zip Code Houston, TX 77095 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/04/2015 Holmes, Ned S \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77007 Principal occupation / Job title (See Instructions) Employer (See Instructions) Investments Ned S. Holmes Investments

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 18/41 Rpt: 21/112 FILER NAME 3 Filer ID Frazer, William Date 5 Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/26/2015 Hoover Slovacek LLP \$500.00 6 Contributor address; City; State; Zip Code Houston, TX 77210 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#: Amount of Contribution (\$) 06/30/2015 House, Paul \$250.00 Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 05/06/2015 Huggins III, Joe O \$800.00 Contributor address; City; State; Zip Code Houston, TX 77066 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Houston Distributing** President Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 06/20/2015 \$100.00 Hunt, Stacy G Contributor address; City; State; Zip Code Houston, TX 77079 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/17/2015 IEC Texas Gulf Coast PAC \$2,500.00 Contributor address; City; State; Zip Code Houston, TX 77007 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 19/41 Rpt: 22/112 FILER NAME Filer ID Frazer, William Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 06/22/2015 \$100.00 Isensee, Harry W 6 Contributor address; City; State; Zip Code Houston, TX 77096 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/31/2015 Janak, Joyce M \$750.00 Contributor address; City; State; Zip Code Houston, TX 77074 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 05/31/2015 Jenkins, Forrest W \$100.00 Contributor address; City; State; Zip Code Bellaire, TX 77401 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/10/2015 Johnson, David \$250.00 Contributor address; City; State; Zip Code Houston, TX 77019 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#: Amount of Contribution (\$) 06/23/2015 Johnson, Mark \$500.00 Contributor address; City; State; Zip Code Sugar Land, TX 77498 Principal occupation / Job title (See Instructions) Employer (See Instructions) **CPA** Fitts Roberts & Co PC

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 20/41 Rpt: 23/112 FILER NAME Filer ID Frazer, William Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 06/25/2015 \$250.00 Jones, Charlotte 6 Contributor address; City; State; Zip Code Houston, TX 77006 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 03/03/2015 Joyce Jr., Joseph A \$500.00 Contributor address; City; State; Zip Code Houston, TX 77069 Principal occupation / Job title (See Instructions) Employer (See Instructions) Financial Planning & Analysis Kinder Morgan Midstream Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: \$250.00 04/14/2015 Jungman, Robert F Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/30/2015 Kapiloff, David P \$2,000.00 Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Employer (See Instructions) Insurance Advisor Insgroup Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 02/25/2015 Keller, Albert P \$250.00 Contributor address; City; State; Zip Code Houston, TX 77057 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 21/41 Rpt: 24/112 FILER NAME Filer ID Frazer, William 5 Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 05/27/2015 King, Stephen \$500.00 6 Contributor address; City; State; Zip Code Houston, TX 77339 Principal occupation / Job title (See Instructions) Employer (See Instructions) **CEO** GrowthForce LLC Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 02/01/2015 \$100.00 Knox, Mike Contributor address; City; State; Zip Code Houston, TX 77055 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/24/2015 \$3,000.00 Krueger, Steve Contributor address; City; State; Zip Code Houston, TX 77057 Principal occupation / Job title (See Instructions) Employer (See Instructions) Iberia Bank Banker Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/09/2015 Krueger, Steve \$500.00 Contributor address; City; State; Zip Code Houston, TX 77057 Principal occupation / Job title (See Instructions) Employer (See Instructions) Iberia Bank Banker Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 06/12/2015 Krueger, Wendy \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77057 Principal occupation / Job title (See Instructions) Employer (See Instructions) Consultant CyFairs ISD

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 22/41 Rpt: 25/112 FILER NAME Filer ID Frazer, William Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 06/26/2015 Kuruvilla, Mohan \$250.00 6 Contributor address; City; State; Zip Code Houston, TX 77074 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/06/2015 Kyle, William \$100.00 Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 05/05/2015 \$500.00 LaFollette, Craig Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 06/04/2015 Landen, Paul \$250.00 Contributor address; City; State; Zip Code Houston, TX 77002 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/05/2015 Lawhon, Susan L \$5,000.00 Contributor address; City; State; Zip Code Houston, TX 77057 Principal occupation / Job title (See Instructions) Employer (See Instructions) Community Volunteer N/A

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 23/41 Rpt: 26/112 FILER NAME 3 Filer ID Frazer, William Date 5 Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/09/2015 \$250.00 Lee, Mark 6 Contributor address; City; State; Zip Code Houston, TX 77096 Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney AIG Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 06/15/2015 Lee, Mark \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77096 Principal occupation / Job title (See Instructions) Employer (See Instructions) AIG Attorney Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 06/03/2015 Lemer, Robert S \$5,000.00 Contributor address; City; State; Zip Code Houston, TX 77079 Principal occupation / Job title (See Instructions) Employer (See Instructions) **CPA** Retired Full name of contributor Date out-of-state PAC (ID#: Amount of Contribution (\$) 03/06/2015 \$200.00 Lent, William Contributor address; City; State; Zip Code Houston, TX 77004 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 06/29/2015 \$200.00 Linkous, Nancy Contributor address; City; State; Zip Code Houston, TX 77006 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 24/41 Rpt: 27/112 FILER NAME 3 Filer ID Frazer, William Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 05/29/2015 Long, Lucky \$100.00 6 Contributor address; City; State; Zip Code Richmond, TX 77469 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#: Amount of Contribution (\$) 05/12/2015 Majewski, Jeff \$1,500.00 Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Employer (See Instructions) Commercial Real Estate **CBRE** Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/31/2015 \$250.00 Marcoux, Cecile Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 06/29/2015 \$500.00 Margolis, Barry Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) Employer (See Instructions) **CPA** McGladrey LLP Amount of Contribution (\$) out-of-state PAC (ID#: Date Full name of contributor 05/22/2015 Mathews, Nancy \$500.00 Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) Employer (See Instructions) **CPA** InterDyn BMI

	MONET	ARY POLITICAL CONTR	RIBUTIONS		SCHEDUI	_E A1
	The Instru	ction Guide explains how to comp	olete this form.	1	Total pages Schedule A1: Sch: 25/41 Rpt: 28/112	
2	FILER NAME Frazer, Willia	n		3	Filer ID	
4	Date 02/25/2015	 Full name of contributor out-of-st McAfee, Lawrence W Contributor address; City; State; Zip Cod 	date PAC (ID#:)	7	Amount of Contribution (\$)	\$500.00
		Houston, TX 77024				
8	Principal occu CFO	pation / Job title (See Instructions)	9 Employer (See Instructions U.S. Physical Therapy	s) 		
	Date 02/16/2015	Full name of contributor	tate PAC (ID#:) de		Amount of Contribution (\$)	\$2,500.00
		Houston, TX 77057				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/30/2015	Full name of contributor out-of-st McMahan, John T Contributor address; City; State; Zip Cot	tate PAC (ID#:)		Amount of Contribution (\$)	\$500.00
		Houston, TX 77056				
	Principal occu Manager	pation / Job title (See Instructions)	Employer (See Instructions Higman Marine	s)		
	Date 04/21/2015	Full name of contributor out-of-si Melody, Lawrence J Contributor address; City; State; Zip Contributor address; City; City; State; Zip Contributor address; City; Cit	tate PAC (ID#:) de		Amount of Contribution (\$)	\$1,000.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 04/16/2015	Melody, Michael J	tate PAC (ID#:) de		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		·
	Executive M	anaging Director / Co-Head	JLL	·	**************************************	

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 26/41 Rpt: 29/112 FILER NAME 3 Filer ID Frazer, William Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 04/20/2015 Melody, Thomas \$1,000.00 6 Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) Employer (See Instructions) Executive Managing Director / Co-Head JLL Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 06/10/2015 \$100.00 Menard, Lynn Contributor address; City; State; Zip Code Houston, TX 77040 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 05/27/2015 Monroe, Douglas \$250.00 Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/09/2015 Moody, John \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77019 Principal occupation / Job title (See Instructions) Employer (See Instructions) Real Estate Parkside Capital Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 02/23/2015 Moore Jr., Preston \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired

	MUNEI	ARY POLITICAL CON				SCHEDUL	E A1
	The Instru	ction Guide explains how to co	omplete this fo	orm.	1	Total pages Schedule A1: Sch: 27/41 Rpt: 30/112	
2	FILER NAME Frazer, William	n			3	Filer ID	
4	Date 06/24/2015	 5 Full name of contributor our Moren, Myra 6 Contributor address; City; State; Zij 	t-of-state PAC (ID#:_ p Code		7	Amount of Contribution (\$)	\$250.00
		Houston, TX 77079					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	s)		
	Date 03/31/2015	Full name of contributor ou Nelson III, Richard R Contributor address; City; State; Zip Houston, TX 77057	t-of-state PAC (ID#:_ p Code			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 04/09/2015	Full name of contributor ou Neuhaus, Ed Contributor address; City; State; Zi	t-of-state PAC (ID#:_ p Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Houston, TX 77024 pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 06/29/2015	Full name of contributor ou Neuhaus, Ed Contributor address; City; State; Zi	t-of-state PAC (ID#:_ p Code)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		5. *** ********************************
	Date 04/23/2015	Full name of contributor ou O'Connell, Charles J Contributor address; City; State; Zi Houston, TX 77024	t-of-state PAC (ID#:_ p Code			Amount of Contribution (\$)	\$500.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	s)		

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 28/41 Rpt: 31/112 FILER NAME 3 Filer ID Frazer, William 5 Full name of contributor Date 7 Amount of Contribution (\$) out-of-state PAC (ID#: 03/05/2015 \$250.00 O'Connor, Lois 6 Contributor address; City; State; Zip Code Houston, TX 77096 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: Date 04/28/2015 Oelfke, David \$100.00 Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/28/2015 Ogle, Robert \$100.00 Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date \$100.00 06/29/2015 Owen, Robert R Contributor address; City; State; Zip Code DeSoto, TX 75115 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$100.00 02/17/2015 Parks, Gary Contributor address; City; State; Zip Code Houston, TX 77057 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 29/41 Rpt: 32/112 FILER NAME 3 Filer ID Frazer, William 5 Full name of contributor Date Amount of Contribution (\$) out-of-state PAC (ID#: 06/08/2015 Parsley, John \$100.00 6 Contributor address; City; State; Zip Code Houston, TX 77042 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#: Amount of Contribution (\$) 06/21/2015 \$100.00 Peacock, Julie C Contributor address; City; State; Zip Code Houston, TX 77055 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/25/2015 \$250.00 Penland Jr., William E Contributor address; City; State; Zip Code Houston, TX 77057 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 04/16/2015 Penland Jr., William E \$100.00 Contributor address; City; State; Zip Code Houston, TX 77057 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 06/02/2015 Pichon, David \$100.00 Contributor address; City; State; Zip Code SugarLand, TX 77498 Principal occupation / Job title (See Instructions) Employer (See Instructions)

	MONE	ART POLITICAL CO	INTRIBUTIO	CVI	SCHEDU	E A1
	The Instru	ction Guide explains how to	complete this fo	rm.	1 Total pages Schedule A1: Sch: 30/41 Rpt: 33/112	
2	FILER NAME Frazer, Willia	m		1999 (1994)	3 Filer ID	
4	Date 06/23/2015	5 Full name of contributorPost, S. Lynn6 Contributor address; City; State;	out-of-state PAC (ID#:		7 Amount of Contribution (\$)	\$250.00
		Houston, TX 77005				
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 06/27/2015	Rapp, Steven Contributor address; City; State;	out-of-state PAC (ID#:		Amount of Contribution (\$)	\$1,500.00
	Principal occu	Houston, TX 77042 pation / Job title (See Instructions)		Employer (See Instructions)		
	commercial			CBRE		
	Date 06/27/2015	Full name of contributor Rapp, Steven Contributor address; City; State;	out-of-state PAC (ID#:		Amount of Contribution (\$)	\$1,500.00
		Houston, TX 77042				
	Principal occu commercial	pation / Job title (See Instructions) real estate		Employer (See Instructions) CBRE		
	Date 05/02/2015	Full name of contributor Ray Jr., John Contributor address; City; State; Houston, TX 77242	out-of-state PAC (ID#:		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		***************************************
	Date 06/15/2015	Full name of contributor Reid, Wallace P Contributor address; City; State; Houston, TX 77077	out-of-state PAC (ID#: ; Zip Code		Amount of Contribution (\$)	\$500.00
		upation / Job title (See Instructions)		Employer (See Instructions)		
	Senior Mana	aging Director		Holliday Fenoglio Fowler	r HFF L.P.	

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 31/41 Rpt: 34/112 FILER NAME 3 Filer ID Frazer, William Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 06/16/2015 Reiser, Camille \$5,000.00 6 Contributor address; City; State; Zip Code Houston, TX 77007 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Upstream Brokers** Finance Mgr Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 06/16/2015 Reiser, Thomas \$5,000.00 Contributor address; City; State; Zip Code Houston, TX 77007 Principal occupation / Job title (See Instructions) Employer (See Instructions) CEO **Upstream Brokers** Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 06/30/2015 Reynolds, Ben L \$500.00 Contributor address; City; State; Zip Code Houston, TX 77077 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/05/2015 \$200.00 Roberts, Rick Contributor address; City; State; Zip Code Houston, TX 77055 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 06/22/2015 Robertson, Fred S \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77019 Principal occupation / Job title (See Instructions) Employer (See Instructions) Investments FR Resources

	MONEI	ARY POLITICAL CONTRIBUTIO	DNS 	-	SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 32/41 Rpt: 35/112	
2	FILER NAME Frazer, William	m		3	Filer ID	
4	Date 06/03/2015	 Full name of contributor out-of-state PAC (ID#:_Rodriguez, Tonja Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$100.00
		Houston, TX 77056				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 04/19/2015	Full name of contributor out-of-state PAC (ID#:_ Rosenfield M.D., David B Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	Houston, TX 77019 pation / Job title (See Instructions)	Employer (See Instructions	<u>;)</u>		
	Physician		Houston Methodist	-,		
	Date 06/23/2015	Full name of contributor			Amount of Contribution (\$)	\$100.00
	Principal occu	Houston, TX 77005 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 02/23/2015	Full name of contributor out-of-state PAC (ID#:_ Rotan, Matthew Contributor address; City; State; Zip Code Houston, TX 77024			Amount of Contribution (\$)	\$500.00
	Principal occu Principal	pation / Job title (See Instructions)	Employer (See Instructions ARA	s)		
	Date 06/02/2015	Full name of contributor out-of-state PAC (ID#:_ Roth, Ed Contributor address; City; State; Zip Code Houston, TX 77095			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		

M	IONET	ARY POLITICAL CONTRIBUTIONS		SCHEDUI	LE A1
Th	ne Instru	ction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 33/41 Rpt: 36/112	
	ER NAME azer, Willia		3	Filer ID	
4 Da 04	te /02/2015	5 Full name of contributor out-of-state PAC (ID#:) Rothfelder, Richard 6 Contributor address; City; State; Zip Code	7	Amount of Contribution (\$)	\$60.00
		Houston, TX 77002	1		
8 Pri	ncipal occu	pation / Job title (See Instructions) 9 Employer (See Instruction	ıs)		
Da 06	te /03/2015	Full name of contributor out-of-state PAC (ID#:) Rothfelder & Falick LLP Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$100.00
		Houston, TX 77002			
Pri	ncipal occu	pation / Job title (See Instructions) Employer (See Instruction	ıs)		
Da 05	te //14/2015	Full name of contributor out-of-state PAC (ID#:) Roundtree, Claude E Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$1,000.00
	incipal occu	Houston, TX 77022 upation / Job title (See Instructions) Employer (See Instruction	ns)		
Da 04	ite /17/2015	Full name of contributor out-of-state PAC (ID#:) Rowan, Josh Contributor address; City; State; Zip Code Houston, TX 77055		Amount of Contribution (\$)	\$100.00
Pri	ncipal occu	upation / Job title (See Instructions) Employer (See Instruction	ıs)		
Da 05	ite 5/29/2015	Full name of contributor out-of-state PAC (ID#:) Rutledge, Richard Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$1,000.00
Pri	ncipal occu	Houston, TX 77025 upation / Job title (See Instructions) Employer (See Instruction	<u> </u> 1S)		
Re	etired	Retired			
		by Toyon Ethion Commission			

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 34/41 Rpt: 37/112 FILER NAME Filer ID Frazer, William 4 Date 5 Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/02/2015 Schultz, Phil \$500.00 6 Contributor address; City; State; Zip Code Bellaire, TX 77401 Principal occupation / Job title (See Instructions) Employer (See Instructions) Geophysicist Chevron Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#:_ 04/07/2015 Scott, Nancy J \$100.00 Contributor address; City; State; Zip Code Houston, TX 77077 Employer (See Instructions) Principal occupation / Job title (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 06/16/2015 Sears, Jay \$500.00 Contributor address; City; State; Zip Code Houston, TX 77079 Principal occupation / Job title (See Instructions) Employer (See Instructions) Managing Partner **NewQuest Properties** Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/16/2015 \$500.00 Sellingsloh, Robert D Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) Employer (See Instructions) Wulfe & Co. President Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 05/14/2015 \$1,000.00 Seyar, Farrukh Contributor address; City; State; Zip Code Houston, TX 77074 Principal occupation / Job title (See Instructions) Employer (See Instructions) CPA **HRSS**

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 35/41 Rpt: 38/112 FILER NAME Filer ID Frazer, William 5 Full name of contributor Amount of Contribution (\$) 4 Date out-of-state PAC (ID#: 06/04/2015 Shiloh, Andrea R \$100.00 6 Contributor address; City; State; Zip Code Houston, TX 77018 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) Date 05/29/2015 \$100.00 Singh, JC Contributor address; City; State; Zip Code Houston, TX 77064 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/30/2015 \$500.00 Sprague Sr., David B Contributor address; City; State; Zip Code Houston, TX 77096 Principal occupation / Job title (See Instructions) Employer (See Instructions) McGladrey **CPA** Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/19/2015 Stedman, Culver G \$500.00 Contributor address; City; State; Zip Code Houston, TX 77057 Principal occupation / Job title (See Instructions) Employer (See Instructions) Principal **Edge Realty Partners** Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 06/03/2015 Stinson, James B \$500.00 Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Employer (See Instructions) **CPA** Retired

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 36/41 Rpt: 39/112 FILER NAME Filer ID Frazer, William 7 Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: 04/17/2015 Stoffers, Brian \$500.00 6 Contributor address; City; State; Zip Code Sugar Land, TX 77479 Principal occupation / Job title (See Instructions) Employer (See Instructions) **CBRE Capital Markets** Real Estate Finance Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date \$250.00 02/18/2015 Strake III, George Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 05/06/2015 \$250.00 Stutts, David Y Contributor address; City; State; Zip Code Houston, TX 77096 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/17/2015 Sweeney, Robert \$500.00 Contributor address; City; State; Zip Code Houston, TX 77077 Principal occupation / Job title (See Instructions) Employer (See Instructions) **CPA** Self-employed Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 05/27/2015 The Cook Law Firm \$250.00 Contributor address; City; State; Zip Code Houston, TX 77057 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 37/41 Rpt: 40/112 FILER NAME Filer ID Frazer, William Date 5 Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/20/2015 Thorsell, William M (Dr.) \$250.00 6 Contributor address; City; State; Zip Code Houston, TX 77056 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#: Amount of Contribution (\$) 02/23/2015 Trier, Clayton \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Full name of contributor Date Amount of Contribution (\$) out-of-state PAC (ID#: 06/18/2015 Uptown Houston PAC \$2,500.00 Contributor address; City; State; Zip Code Houston, TX 77007 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 03/16/2015 Van Arsdel, Chris B \$250.00 Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/25/2015 Van Arsdel, Chris B \$100.00 Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 38/41 Rpt: 41/112 FILER NAME Filer ID Frazer, William Date 5 Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/15/2015 Vandiver, Frank \$100.00 6 Contributor address; City; State; Zip Code houston, TX 77057 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 04/16/2015 Vestewig, Robert P \$250.00 Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/28/2015 Vincent, Richard \$500.00 Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Full name of contributor Date out-of-state PAC (ID#: Amount of Contribution (\$) 06/30/2015 \$100.00 Walker, Linda L Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/25/2015 Wall, Kathaleen \$5,000.00 Contributor address; City; State; Zip Code Houston, TX 77001 Principal occupation / Job title (See Instructions) Employer (See Instructions) Community Volunteer N/A

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 39/41 Rpt: 42/112 FILER NAME Filer ID Frazer, William Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 03/17/2015 Walne III, Walter H \$500.00 6 Contributor address; City; State; Zip Code Houston, TX 77063 Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Walne Law Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/31/2015 \$500.00 Walters Sr., James M Contributor address; City; State; Zip Code Houston, TX 77096 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/03/2015 Weekley, Richard \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77055 Principal occupation / Job title (See Instructions) Employer (See Instructions) Weekley Properties Rel Estate Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/16/2015 Wells, Jana \$200.00 Contributor address; City; State; Zip Code Houston, TX 77057 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 05/22/2015 Westerman, Richard \$100.00 Contributor address; City; State; Zip Code Houston, TX 77096 Principal occupation / Job title (See Instructions) Employer (See Instructions)

	MONET	ARY POLITICAL C	CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 40/41 Rpt: 43/112	
2	FILER NAME Frazer, Willia	m		***************************************	3	Filer ID	
4	Date 06/01/2015	5 Full name of contributor Wilken, Barry6 Contributor address; City; St	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$500.00
8	Principal occu	Houston, TX 77081 pation / Job title (See Instructions) [9 Employer (See Instructions))		
	Controller	,		International Cellulose C	-	poration	
	Date 02/02/2015	Full name of contributor Will, Aron Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$2,500.00
		Houston, TX 77019					
	Principal occu Executive Vi	Employer (See Instructions CBRE Capital Markets	()				
_		CBRE Capital Markets					
	Date Full name of contributor out-of-state PAC (ID#: 02/18/2015 Will, Edward Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$100.00	
		Houston, TX 77024					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 03/16/2015	Full name of contributor Windham, James M Contributor address; City; St Houston, TX 77079	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions		Employer (See Instructions	5)		
	Date 06/03/2015	Full name of contributor Wood, Reed Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
_	Dain die et et	Kingwood, TX 77345	,	Employee (Co. a. tradewati	ř		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions Conklin Hruzek & Co.	i)		****

	MONETARY POLITICAL CONTRIBUTIONS		SCHEDUL	E A1
	The Instruction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 41/41 Rpt: 44/112	
2	FILER NAME Frazer, William	3	Filer ID	
4	Date 04/23/2015 S Full name of contributor out-of-state PAC (ID#:) Wright, Thomas 6 Contributor address; City; State; Zip Code	7	Amount of Contribution (\$)	\$1,000.00
8	Houston, TX 77056 Principal occupation / Job title (See Instructions) Partner 9 Employer (See Instructions) McGladrey LLP	s)		
	Date Full name of contributor out-of-state PAC (ID#:) O6/03/2015 Yoe, Stephen M Contributor address; City; State; Zip Code Houston, TX 77083		Amount of Contribution (\$)	\$150.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	s)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A2: Sch: 1/1 Rpt: 45/112
2	FILER NAME Frazer, Willia			3 Filer ID
4	TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIBU	UTIONS	\$
5	Date 03/04/2015	6 Full name of contributor out-of-state PAC (ID#: Gibson, Malcolm D 7 Contributor address; City; State; Zip Code)	8 Amount of contribution (\$) In-kind contribution (\$) description \$329.29 Refreshments for Meet & Greet
10	Principal occu	Houston, TX 77027 upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T. -JUDICIAL) (See instructions)
	Attorney	apailotty dob like (1 dtt their doblette) (1 dt their doblette)	MD Gibson & Asso	
12	Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
14	Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)
16	If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
	Date 04/23/2015	Full name of contributor out-of-state PAC (ID#: Krueger, Steve Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$310.68 Refreshments for Meet & Greet
		Houston, TX 77057		Check if travel outside of Texas. Complete Schedule T.
	Principal occi Banker	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON Iberia Bank	
	Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
	Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
	If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
	Date 02/25/2015	Full name of contributor out-of-state PAC (ID#:		Amount of In-kind contribution contribution (\$) description \$370.00 Refreshments for Meet & Greet
	Principal occi Attorney	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON Law Office of Milto	I-JUDICIAL) (See instructions)
	Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
	Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
	If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

LOANS					SCHEDULE E
The Instruction	on Guide explains how to o	complete this f	form.		ages Schedule E: 2 Rpt: 46/112
2 FILER NAME Frazer, William				3 Filer ID	
TOTAL OF U	NITEMIZED LOANS				\$
5 Date of loan 02/04/2015	7 Name of lender Frazer, William	out-of-state PA	AC (ID#:)	9 Loan Amount (\$) \$500.00
6 Is lender a financial institution?	8 Lender address; City; 4130 Turnberry Circle	State;	Zip Code	**************************************	10 Interest Rate
No	Houston, TX 77025				11 Maturity Date
12 Principal occupati	ion / Job title (See Instructions)		13 Employer (See Instruc	ctions)	
14 Description of Col X None	llateral		15 Check if personal fund	ds were deposited	l into political account (See Instructions)
16 GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guaranteed (\$)
X not applicable	18 Guarantor address; City;	State;	Zip Code		
20 Principal occupati	on		21 Employer (See Instruc	ctions)	
Date of loan 02/11/2015	Name of lender Frazer, William	out-of-state PA	C (ID#:		Loan Amount (\$) \$12,000.00
Is lender a financial institution?	Lender address; City; 4130 Turnberry Circle	State;	Zip Code		Interest Rate
No	Houston, TX 77025				Maturity Date
Principal occupation	on / Job title (See Instructions)		Employer (See Instruc	ctions)	
Description of Col	lateral		Check if personal fund	ls were deposited	into political account (See Instructions)
GUARANTOR INFORMATION	Name of guarantor				Amount Guaranteed (\$)
X not applicable	Guarantor address; City;	State;	Zip Code		
Principal occupation	on		Employer (See Instruc	tions)	
		•			

	LOANS					SCHEDULE E
	The Instruction	on Guide explains how to o	complete this f	orm.		ges Schedule E: 2 Rpt: 47/112
2	FILER NAME Frazer, William				3 Filer ID	
4	TOTAL OF UN	IITEMIZED LOANS				\$
5	Date of loan 03/30/2015	7 Name of lender Frazer, William	out-of-state PA	C (ID#:)	9 Loan Amount (\$) \$10,000.00
6	Is lender a financial institution?	8 Lender address; City; 4130 Turnberry Circle	State;	Zip Code		10 Interest Rate
	No	Houston, TX 77025				11 Maturity Date
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See Instructio	ns)	
14	Description of Coll X None	lateral _.		15 Check if personal funds o	were deposited	l into political account (See Instructions)
16	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guaranteed (\$)
	X not applicable	18 Guarantor address; City;	State;	Zip Code		
20	Principal occupation	on	***************************************	21 Employer (See Instructio	ns)	
	Date of loan 05/04/2015	Name of lender Frazer, William	out-of-state PA	C (ID#:)	Loan Amount (\$) \$10,000.00
	Is lender a financial institution?	Lender address; City; 4130 Turnberry Circle	State;	Zip Code	***************************************	Interest Rate
	No	Houston, TX 77025				Maturity Date
••••	Principal occupation	on / Job title (See Instructions)		Employer (See Instruction	ns)	
	Description of Coll X None	ateral		Check if personal funds v	were deposited	into political account (See Instructions)
	GUARANTOR INFORMATION	Name of guarantor			***************************************	Amount Guaranteed (\$)
	X not applicable	Guarantor address; City;	State;	Zip Code		
	Principal occupation	on		Employer (See Instruction	ns)	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Candidate/Officeholder/Politica	
1 Total pages Schedule F1:	
Sch: 1/39 Rpt: 48/112	Frazer, William
4 Date	5 Payee name
04/28/2015	Acosta, David G. (Mr.)
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 1703 W. 12th St. Houston, TX 77008-6401
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H
Date	Payee name
05/31/2015	Acosta, David G. (Mr.)
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1703 W. 12th St. Houston, TX 77008-6401
PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/30/2015	Acosta, David G. (Mr.)
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1703 W. 12th St.
	Houston, TX 77008-6401
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Candidate/Officeholder/Politica	Tall Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)	
		The Instruction Guide explains how to complete this form.	
1	. •	o i nei ib	
	Sch: 2/39 Rpt: 49/112	Frazer, William	
4		5 Payee name	
	06/27/2015	Anderson Design	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$81.18	12402 Piping Rock	
	!		
	!	Houston, TX 77077	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Printing Expense	
	!	Check if Austin, TX, officeholder living expense Printing - Invitation	
	!	i intuing - myttation	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OF		
	Date	Payee name	
	02/25/2015	Authorize.Net	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$43.50	PO Box 947	
		10 800 347	
		American Fork, UT 84003	
	PURPOSE		
	OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Credit Card Processing Fee	
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	-
_	expenditure to benefit of c.	1	
	Date	Payee name	
	02/26/2015	Authorize.Net	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1.45	PO Box 947	
		American Fork, UT 84003	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
		Credit Cord Dispersion Face	
		Credit Card Processing Fee	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held H	
			_

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica	al Cor	mmittee	Legal Services The Instruction G	Suide explains		Vages	s/Contract Labor		OTHER (enter	a category not listed a	bove)
1	Total pages Schedule F1:	12	FILER NAM						٦	Filer ID		
	Sch: 3/39 Rpt: 50/112		Frazer, Willi	iam					_			
4	Date	5	Payee name	3								
_	02/26/2015		Authorize.N									
6	Amount (\$)	7	Payee addre	ess; City;	State;	; Zip Co	de					
	\$181.28		PO Box 94									
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				Fork, UT 84003								
8	PURPOSE OF			See Categories listed at	the top of this schr	edule)	(b)	Description				
	EXPENDITURE		Accounting	/Banking				- Contract of the Contract of		de of Texas. Con officeholder livin	mplete Schedule T.	
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	Date		Payee name)								
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		┿		Fork, UT 84003						-		
	PURPOSE OF			See Categories listed at t	the top of this sche	edule)	(b)	Description	-			
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	Complete ONLY if direct expenditure to benefit C/OF	<u>Г</u> Н	Candidate/Off	iceholder name	0	Office sou	ght			Office h	eld	
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			American F	ork, UT 84003								
-	PURPOSE	(a)	Category (S	ee Categories listed at t	the top of this sche	edule)	(b)	Description				
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		1						Credit Card Pr	roc	essing Fee	<u>}</u>	
	= 1: C18 X	<u></u>										
	Complete ONLY if direct expenditure to benefit C/OH		andidate/Oni	iceholder name	Ot	Office soug	ght			Office he	eld	
			***									· <u>-</u>

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Candidate/Officeholder/Politica		Legal Services The Instruction Guide expla		Vages/	/Contract Labor	Travel Out of Dis OTHER (enter a	strict category not listed above)
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1	Total pages Schedule F1:	li .				3	Filer ID	
L_	Sch: 4/39 Rpt: 51/112	Frazer, Willi						
4	Date	5 Payee name	:					
	03/03/2015	Authorize.N	let					
6	Amount (\$)	7 Payee addre	ess; City; St	tate; Zip Co	de			
	\$7.95	PO Box 947						
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_	!	 	Fork, UT 84003					
8	PURPOSE OF	(a) Category (S	See Categories listed at the top of this	s schedule)	(b)	Description		
	EXPENDITURE	Accounting/		İ		<u> </u>	tside of Texas. Comp	
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9	Complete ONLY if direct expenditure to benefit C/OH		iceholder name	Office sou	ght		Office he	eld
L	expenditure to benefit Groi	1						
	Date	Payee name						
	03/05/2015	Authorize.N	let					
	Amount (\$)	Payee addres	ess; City; Sta	tate; Zip Co	de.			
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<u> </u>		American F	Fork, UT 84003					
	PURPOSE	(a) Category (S	see Categories listed at the top of this	s schedule)	(b)	Description		
	OF EXPENDITURE	Accounting/		[famound	tside of Texas. Comp	·
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	expenditure to benefit C/OF	1						
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		American F	Fork, UT 84003					
	PURPOSE	(a) Category (S	ee Categories listed at the top of this	c schedule)	(b)	Description		
1	OF	Accounting/		, Stricture,	`		side of Texas. Comp	olete Schedule T.
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		i				Credit Card Pro	cessing Fee	
		ı						
	Complete ONLY if direct		iceholder name	Office soug	aht		Office he	eld
	expenditure to benefit C/OH			-	,			
								

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica	3	vices Salarie truction Guide explains how to		s/Contract Labor ete this form.	OTHER (enter a category not listed above)
1	Total pages Schedule F1: Sch: 5/39 Rpt: 52/112	2 FILER NAME Frazer, William			3	Filer ID
4	03/10/2015	5 Payee name Authorize.Net				
6	Amount (\$) \$2.90	7 Payee address; C PO Box 947 American Fork, UT	City; State; Zip (Code		
8	OF EXPENDITURE	(a) Category (See Categoria Accounting/Banking	ries listed at the top of this schedule) ${f g}$	(b)		ide of Texas. Complete Schedule T. , officeholder living expense Cessing Fee
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder H	r name Office so	ought		Office held
	Date 03/10/2015	Payee name Authorize.Net				
	Amount (\$) \$36.25	Payee address; C PO Box 947 American Fork, UT	City; State; Zip C	Code		
	PURPOSE OF EXPENDITURE	(a) Category (See Categorie Accounting/Banking	ies listed at the top of this schedule)	(b)		de of Texas. Complete Schedule T. officeholder living expense Cessing Fee
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder	r name Office so	ought		Office held
	Date 03/12/2015	Payee name Authorize.Net				
	Amount (\$) \$7.25	Payee address; C PO Box 947 American Fork, UT	City; State; Zip C	Code		
	PURPOSE		ies listed at the top of this schedule)	(b)	Description	
	EXPENDITURE	Accounting/Banking		-	Check if travel outsic	de of Texas. Complete Schedule T. officeholder living expense cessing Fee
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder	name Office so	ought		Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Printing Expense Salaries/Wages/Contract Labor Travel Out of District
OTHER (enter a category not listed above) Candidate/Officeholder/Political Committee The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Frazer, William Sch: 6/39 Rpt: 53/112 Date Payee name 03/13/2015 Authorize.Net 6 Amount (\$) Payee address; City; State; Zip Code \$2.90 PO Box 947 American Fork, UT 84003 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense Credit Card Processing Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/19/2015 Authorize.Net Amount (\$) Payee address; State; Zip Code City; \$7.25 PO Box 947 American Fork, UT 84003 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense Credit Card Processing Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/26/2015 Authorize.Net Amount (\$) Payee address; City; State; Zip Code \$2.90 PO Box 947 American Fork, UT 84003 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Accounting/Banking Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Credit Card Processing Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
┪	Total pages Schedule F1:	
	Sch: 7/39 Rpt: 54/112	Frazer, William
4	Date	5 Payee name
	04/02/2015	Authorize.Net
6	Amount (\$)	7 Payee address; City; State; Zip Code
ĺ	\$7.25	PO Box 947
		American Fork, UT 84003
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
l	I	Check if Austin, TX, officeholder living expense
ĺ		Credit Card Processing Fee
9	Olete ONII V if direct	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	04/02/2015	Authorize.Net
H	Amount (\$)	Payee address; City; State; Zip Code
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		American Fork, UT 84003
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
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		Credit Card Processing Fee
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
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	Date	Payee name
	04/06/2015	Authorize.Net
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.74	PO Box 947
		American Fork, UT 84003
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	MAF MINDER OFF	Check if Austin, TX, officeholder living expense
		Credit Card Processing Fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	1

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica		Gift/Awards/Memorials Expe Legal Services	nse Pri	inting Expensionalized		Travel in District Travel Out of District OTHER (enter a category not listed above)	ve)
L			The Instruction Guide	explains how	to compl	ete this form.		
1	Total pages Schedule F1:	2 FILER NAM					3 Filer ID	***
	Sch: 8/39 Rpt: 55/112	Frazer, Will	iam					
4	Date	5 Payee name						
	04/07/2015	Authorize.	let					
6	Amount (\$)	7 Payee addre	ess; City;	State; Zi	ip Code			
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		American F	ork, UT 84003					
8	PURPOSE	(a) Category (s	ee Categories listed at the top	of this schedule	₂₎ (b)	Description		
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						Credit Card I	Processing Fee	
9	Complete ONLY if direct		iceholder name	Offic	e sought		Office held	
	expenditure to benefit C/OI	H						
	Date	Payee name						
	04/08/2015	Authorize.N	let					
	Amount (\$)	Payee addre	ss; City;	State; Zi	in Code			
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		American F	od. UT 04000					
L			ork, UT 84003					
	PURPOSE OF		ee Categories listed at the top	of this schedule	;) (b)	Description		
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	expenditure to benefit C/OI		isotroide. Harrie	Onio	c sought		Office field	
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	Date	Payee name						
	04/10/2015	Authorize.N	let					
	Amount (\$)	Payee addre	ss; City;	State; Zi	p Code			
	\$2.90	PO Box 94	7					
		American F	ork, UT 84003					
	PURPOSE	(a) Category (S	ee Categories listed at the top	of this schedule	(b)	Description	:	
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	Complete ONLY if direct expenditure to benefit C/OH		ceholder name	Office	e sought		Office held	
	,							

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Leg	Awards/Memorials Expense al Services	Salaries/M	Vages/C	Contract Labor	Travel Out of District OTHER (enter a category not listed above)
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1	Total pages Schedule F1:	I .				3	Filer ID
	Sch: 9/39 Rpt: 56/112	Frazer, William					
4	Date	5 Payee name				****	
	04/13/2015	Authorize.Net					
6	Amount (\$)	7 Payee address;	City;	State; Zip Co	de		
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	·	American Fork	, UT 84003			<u>-</u>	
8	PURPOSE	(a) Category (See Ca	ategories listed at the top of	this schedule)	(b) [Description	
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L	·						
9	Complete ONLY if direct	Candidate/Officeh	older name	Office sou	ght		Office held
	expenditure to benefit C/OF	1					
	Date	Payee name					
	04/14/2015	Authorize.Net					
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	Amount (\$)	Payee address;	City;	State; Zip Co	de	*	
	\$1.45	PO Box 947					
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	1	American Fork	, UT 84003				
	PURPOSE	(a) Category (See Ci	ategories listed at the top of t	thic echadula)	(b) [Description	
	OF	Accounting/Bai		Alls schedule)	`΄΄ Γ		ide of Texas. Complete Schedule T.
	EXPENDITURE				Ī		, officeholder living expense
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	expenditure to benefit C/OF	-1		-	,		<u> </u>
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	Date	Payee name					
	04/14/2015	Authorize.Net					
	Amount (\$)	Payee address;	City;	State; Zip Co	de		
	\$1.45	PO Box 947					
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		American Fork,	LIT 84003				
	PURPOSE						
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	EXPENDITURE	Accounting/Bar	ıking		Ļ		de of Texas. Complete Schedule T.
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	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeho	older name	Office soug	j ht		Office held
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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica	Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	- · · · · · · ·
	Sch: 10/39 Rpt:	Frazer, William
4	Date	5 Payee name
_	04/14/2015	Authorize.Net
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$8.70	PO Box 947
		American Fork, UT 84003
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card Processing Fee
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/15/2015	Authorize.Net
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.35	PO Box 947
		American Fork, UT 84003
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Credit Card Processing Fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	1
	Date	Payee name
	04/16/2015	Authorize.Net
:	Amount (\$)	Payee address; City; State; Zip Code
	Ţ	· · · · · · · · · · · · · · · · · · ·
	\$5.80	PO Box 947
	\$5.80	PO Box 947
	\$5.80	PO Box 947 American Fork, UT 84003
***************************************	PURPOSE	American Fork, UT 84003
		American Fork, UT 84003 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T.
	PURPOSE OF	American Fork, UT 84003 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	PURPOSE OF	American Fork, UT 84003 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T.
	PURPOSE OF EXPENDITURE	American Fork, UT 84003 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee
	PURPOSE OF	American Fork, UT 84003 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee Candidate/Officeholder name Office sought Office held
	PURPOSE OF EXPENDITURE Complete ONLY if direct	American Fork, UT 84003 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Git/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica	•	es Salaries/ uction Guide explains how to c		Contract Labor e this form.	OTHER (enter a category not listed above)
	Total pages Schedule F1: Sch: 11/39 Rpt:	2 FILER NAME Frazer, William			3	Filer ID
	Date 04/17/2015	5 Payee name Authorize.Net				
6	Amount (\$) \$0.87	7 Payee address; City PO Box 947 American Fork, UT 8	·	ode		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories Accounting/Banking				de of Texas. Complete Schedule T. officeholder living expense cessing Fee
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder na H	name Office sou	ught		Office held
	Date 04/21/2015	Payee name Authorize.Net				_
	Amount (\$) \$2.90	Payee address; City PO Box 947 American Fork, UT 84	•	ode		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories Accounting/Banking	listed at the top of this schedule)			de of Texas. Complete Schedule T. officeholder living expense cessing Fee
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder na I	name Office sou	ught		Office held
	Date 04/22/2015	Payee name Authorize.Net				
	Amount (\$) \$29.00	Payee address; City PO Box 947 American Fork, UT 84		ode		
***********	PURPOSE			[/b] L	Description	
	OF EXPENDITURE	(a) Category (See Categories I Accounting/Banking	listed at the top of this schedule)		Check if travel outsid	de of Texas. Complete Schedule T. officeholder living expense cessing Fee
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder na ł	ame Office sou	ıght		Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Sundiduct Sinceriorden Since	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 12/39 Rpt:	Frazer, William
4	Date	5 Payee name
	04/23/2015	Authorize.Net
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$36.25	PO Box 947
!	!	
		American Fork, UT 84003
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
ļ	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	!	Check if Austin, TX, officeholder living expense Credit Card Processing Fee
	1	Great Gard Frocessing ree
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held H
-	Date	Payee name
	04/27/2015	Authorize.Net
	Amount (\$)	Payee address; City; State; Zip Code
	\$29.00	PO Box 947
	!	
		American Fork, UT 84003
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Credit Card Processing Fee
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	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	
	Date	Payee name
	04/30/2015	Authorize.Net
	Amount (\$)	
	\$2.90	Payee address; City; State; Zip Code PO Box 947
	Ψ2.30	PO Box 947
		American Fork, UT 84003
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORS	Check if Austin, TX, officeholder living expense
		Credit Card Processing Fee
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experience to seriou o.c	· · · · · · · · · · · · · · · · · · ·

SCHEDULE F1

Advertising Expense Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Com

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

i	The Instruction Guide explains how to o	complete this form.
1 Total pages Schedule F1:		3 Filer ID
Sch: 13/39 Rpt:	Frazer, William	
4 Date	5 Payee name	
05/04/2015	Authorize.Net	
6 Amount (\$)	7 Payee address; City; State; Zip C	Code
\$43.25	PO Box 947	
	American Fork, UT 84003	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
		Credit Card Processing Fee
9 Complete ONLY if direct	Candidate/Officeholder name Office so	ought Office held
expenditure to benefit C/O	H	
Date	Payee name	
05/14/2015	Authorize.Net	
Amount (\$)	Payee address; City; State; Zip C	Code
\$43.50	PO Box 947	
	American Fork, UT 84003	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	
OF		(b) Description
	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
OF		
OF		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
OF EXPENDITURE Complete ONLY if direct	Accounting/Banking Candidate/Officeholder name Office so	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee
OF EXPENDITURE	Accounting/Banking Candidate/Officeholder name Office so	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O	Accounting/Banking Candidate/Officeholder name Office so	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee
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OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date 05/18/2015 Amount (\$) \$29.00	Accounting/Banking Candidate/Officeholder name Office so H Payee name Authorize.Net Payee address; City; State; Zip C PO Box 947 American Fork, UT 84003	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee ought Office held Code
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OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date 05/18/2015 Amount (\$) \$29.00 PURPOSE OF	Accounting/Banking Candidate/Officeholder name Office so H Payee name Authorize.Net Payee address; City; State; Zip C PO Box 947 American Fork, UT 84003 (a) Category (See Categories listed at the top of this schedule)	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee ought Office held Code (b) Description
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OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date 05/18/2015 Amount (\$) \$29.00 PURPOSE OF EXPENDITURE Complete ONLY if direct	Accounting/Banking Candidate/Officeholder name Office so H Payee name Authorize.Net Payee address; City; State; Zip C PO Box 947 American Fork, UT 84003 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking Candidate/Officeholder name Office so	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee Ought Office held Code (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

		The Instruction Guide explains how to complete this form.
	Total pages Schedule F1: Sch: 14/39 Rpt:	
4	Date 05/26/2015	5 Payee name Authorize.Net
6	Amount (\$) \$7.25	7 Payee address; City; State; Zip Code PO Box 947 American Fork, UT 84003
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
****	Date 05/27/2015	Payee name Authorize.Net
	Amount (\$) \$17.40	Payee address; City; State; Zip Code PO Box 947 American Fork, UT 84003
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
	Date 05/28/2015	Payee name Authorize.Net
	Amount (\$) \$1.45	Payee address; City; State; Zip Code PO Box 947
		American Fork, UT 84003
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) ACCOUNTING/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica	al Committee	Legal Services The Instruction Guid	Salaries/\	Wage:	es/Contract Labor		OTHER (enter a category not listed above)
1	Total pages Schedule F1: Sch: 15/39 Rpt:	2 FILER NAI Frazer, Wi					3	Filer ID
	Date 05/29/2015	5 Payee nan Authorize	e.Net					
6	Amount (\$) \$14.50	7 Payee add PO Box 9 American	- '	State; Zip Co	ode			
8	OF EXPENDITURE		(See Categories listed at the t ng/Banking	top of this schedule)	(b)	-	TX,	ide of Texas. Complete Schedule T. officeholder living expense Cessing Fee
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Officeholder name	Office sou	ight			Office held
	Date 06/01/2015	Payee nam Authorize	:.Net					
	Amount (\$) \$14.50	Payee add PO Box 9 American		State; Zip Co	ode 			
	PURPOSE OF EXPENDITURE		(See Categories listed at the tong/Banking	op of this schedule)	(b)		TX, e	de of Texas. Complete Schedule T. officeholder living expense Cessing Fee
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		Officeholder name	Office sou	ıght			Office held
	Date 06/02/2015	Payee nam Authorize.	.Net					
	Amount (\$) \$46.40	Payee addi PO Box 9 American	•	State; Zip Co	ode			
	PURPOSE OF EXPENDITURE	(a) Category	(See Categories listed at the to	op of this schedule)	(b)		TX, c	de of Texas. Complete Schedule T. officeholder living expense cessing Fee
	Complete ONLY if direct expenditure to benefit C/OF		Officeholder name	Office sou	ight			Office held

SCHEDULE F1

Advertising Expense Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica	il Co	mmittee	Legal Services The Instruction Guid	Salari	-	es/Contract Labor			THER (enter a category not listed abov	e)
1	Total pages Schedule F1:	2						3	Fil	ler ID	
<u> </u>	Sch: 16/39 Rpt:	_	Frazer, Will	iam							
4	Date	5	Payee name		***************************************						
	06/02/2015		Authorize.N	Net							
6	Amount (\$)	7	Payee addre		State; Zip	Code					
	\$37.95		PO Box 94	∤7							
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L		$oldsymbol{\perp}$		Fork, UT 84003			<u>-</u>				· —————
8	PURPOSE OF	(a)		See Categories listed at the	e top of this schedule)	(b	Description				
	EXPENDITURE		Accounting	_J /Banking			-			of Texas. Complete Schedule T. ceholder living expense	
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	!	L									
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Off	fficeholder name	Office s	sough	t			Office held	
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	Date		Payee name						_		
_	06/04/2015	igspace	Authorize.N								
	Amount (\$)		Payee addre		State; Zip	Code					
	\$20.30		PO Box 94	.7							
	1		American I	CL UT 04000							
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	PURPOSE OF		Category _{(S}) Accounting	See Categories listed at the	top of this schedule)	(0)	Description Check if travel or	nistr	o ahi	of Texas. Complete Schedule T.	
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							Credit Card P	'roc	ces	sing Fee	
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	Complete ONLY if direct expenditure to benefit C/OF		Jandidate/Off	ficeholder name	Office s	sought	ţ			Office held	
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	Date 06/05/2015	1	Payee name								
	Amount (\$)	 	Authorize.N		Ctata. 7in						
	\$14.50	1	Payee addre		State; Zip	Coae					
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			American F	Fork, UT 84003							
	PURPOSE	(a)	Category (S	See Categories listed at the	top of this schedule)	(b)) Description				
	OF EXPENDITURE	1	Accounting	/Banking			<u></u>			f Texas. Complete Schedule T.	
		1					Credit Card Pr			ceholder living expense S ina Fee	
		l								Sing i co	
	Complete ONLY if direct		Candidate/Off	ficeholder name	Office s	ought	-			Office held	
	expenditure to benefit C/OF	1									
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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica		nmittee	Gift/Awards/Memorials Legal Services	•		Wages	/Contract Labor		Travel Out of District OTHER (enter a category not listed ab	ove)
Ļ		·		The Instruction G	uide explains I	now to co	omple	ete this form.			
1	Total pages Schedule F1:							·	3	Filer ID	
	Sch: 17/39 Rpt:		Frazer, Willia	m							
4	Date	5	Payee name								
	06/08/2015		Authorize.Ne	et							
6	Amount (\$)	7	Payee addres	s; City;	State;	Zip Co	ode	****			
	\$14.50		PO Box 947	-		•					
			American Ec	ork, UT 84003							
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8	PURPOSE OF			e Categories listed at t	he top of this sche	edule)	(b)	Description			
	EXPENDITURE		Accounting/l	Banking				hammad 		e of Texas. Complete Schedule T. officeholder living expense	
								Credit Card P		- ·	
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9	Complete ONLY if direct	C	andidate/Offic	eholder name	0	office sou	ınht	·		Office held	
	expenditure to benefit C/OI		arialada o mo	cholder hame	J	11100 300	ıgııı			Office field	
-	Data										
	Date 06/09/2015	ı	Payee name								
			Authorize.Ne)							
	Amount (\$)	ı	Payee addres	s; City;	State;	Zip Co	ode				
	\$1.45		PO Box 947								
			American Fo	ork, UT 84003							
	PURPOSE OF	(a)	Category (See	e Categories listed at t	ne top of this sche	edule)	(b)	Description			
	EXPENDITURE		Accounting/E	Banking				the same		e of Texas. Complete Schedule T.	
								-		officeholder living expense	
								Credit Card P	100	essing ree	
	Complete ONLY if direct	<u> </u>	andidate/Offic	-11-l		·r	<u> </u>				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		andidate/Offic	enolder name	O	ffice sou	ight			Office held	
	Date	ı	Payee name								
	06/09/2015	۱ ،	Authorize.Ne	et							
	Amount (\$)		Payee addres	s; City;	State;	Zip Co	ode				
	\$14.50		PO Box 947								
		,	American Fo	rk, UT 84003							
	PURPOSE	(a)	Category (See	Categories listed at the	ne top of this sche	dule)	(b)	Description			
	OF EXPENDITURE		Accounting/E			,		•	outside	e of Texas. Complete Schedule T.	
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								Credit Card P	roce	essing Fee	
	Complete ONLY if direct		andidate/Offic	eholder name	O	ffice sou	ght			Office held	
_	expenditure to benefit C/OF	7									
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SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Fees
Food/Beverage Expense
Gitt/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

		The Instruction Guide explains how to	compl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID
	Sch: 18/39 Rpt:	Frazer, William		
4	Date	5 Payee name		
	06/11/2015	Authorize.Net		
6	Amount (\$)	7 Payee address; City; State; Zip	Code	
	\$31.90	PO Box 947		
		American Fork, UT 84003		
8	PURPOSE		T _(b)	D
Ĭ	OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(4)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Accounting/Danking		Check if Austin, TX, officeholder living expense
				Credit Card Processing Fee
9	Complete ONLY if direct	Candidate/Officeholder name Office s	ought	Office held
	expenditure to benefit C/OF	4		
	Date	Payee name		
	06/12/2015	Authorize.Net		
	Amount (\$)	Payee address; City; State; Zip	Code	
	\$2.90	PO Box 947	Code	
ĺ		, 0 B3, 3 1.		
		American Fark LIT 04003		
		American Fork, UT 84003		
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	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
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	OF		(b)	Check if travel outside of Texas. Complete Schedule T.
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	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFD Date 06/16/2015 Amount (\$)	Accounting/Banking Candidate/Officeholder name Office s Payee name Authorize.Net Payee address; City; State; Zip	ought	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee
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	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFD Date 06/16/2015 Amount (\$) \$29.00	Accounting/Banking Candidate/Officeholder name Payee name Authorize.Net Payee address; City; State; Zip PO Box 947	cought	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee
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	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 06/16/2015 Amount (\$) \$29.00 PURPOSE OF	Accounting/Banking Candidate/Officeholder name Office s Payee name Authorize.Net Payee address; City; State; Zip PO Box 947 American Fork, UT 84003 (a) Category (See Categories listed at the top of this schedule)	cought	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
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	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 06/16/2015 Amount (\$) \$29.00 PURPOSE OF EXPENDITURE Complete ONLY if direct	Candidate/Officeholder name Office s Payee name Authorize.Net Payee address; City; State; Zip PO Box 947 American Fork, UT 84003 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking Candidate/Officeholder name Office s	Code	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
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	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 06/16/2015 Amount (\$) \$29.00 PURPOSE OF EXPENDITURE Complete ONLY if direct	Candidate/Officeholder name Office s Payee name Authorize.Net Payee address; City; State; Zip PO Box 947 American Fork, UT 84003 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking Candidate/Officeholder name Office s	Code	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

		The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:		
	Sch: 19/39 Rpt:	Frazer, William	
4	Date	5 Payee name	
	06/18/2015	Authorize.Net	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$7.25	PO Box 947	
I		American Fork, UT 84003	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
		Credit Card Processing Fee	
ı		Stock out at 100000mg 1 00	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OF	H	
-	Date	Payee name	
	06/19/2015	Authorize.Net	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$14.50	PO Box 947	
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		- American Ferri, et a 1888	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T.	
······	OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T.	·
	OF EXPENDITURE Complete ONLY if direct	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee Candidate/Officeholder name Office sought Office held	
	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee Candidate/Officeholder name Office sought Office held	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee Candidate/Officeholder name Office sought Office held	
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	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate 06/24/2015 Amount (\$)	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee Candidate/Officeholder name Office sought Payee name Authorize.Net Payee address; City; State; Zip Code	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 06/24/2015	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee Candidate/Officeholder name Office sought Payee name Authorize.Net	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate 06/24/2015 Amount (\$)	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee Candidate/Officeholder name Office sought Payee name Authorize.Net Payee address; City; State; Zip Code PO Box 947	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate 06/24/2015 Amount (\$)	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee Candidate/Officeholder name Office sought Payee name Authorize.Net Payee address; City; State; Zip Code	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 06/24/2015 Amount (\$) \$29.00	(a) Category (See Categories listed at the top of this schedule) ACCOUNTING/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee Candidate/Officeholder name Office sought Payee name Authorize.Net Payee address; City; State; Zip Code PO Box 947 American Fork, UT 84003 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 06/24/2015 Amount (\$) \$29.00	(a) Category (see Categories listed at the top of this schedule) ACCOUNTING/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee Candidate/Officeholder name Office sought Office held Payee name Authorize.Net Payee address; City; State; Zip Code PO Box 947 American Fork, UT 84003 (a) Category (see Categories listed at the top of this schedule) ACCOUNTING/Banking (b) Description Check if travel outside of Texas. Complete Schedule T.	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 06/24/2015 Amount (\$) \$29.00 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking Candidate/Officeholder name Office sought Candidate/Officeholder name Office sought Payee name Authorize.Net Payee address; City; State; Zip Code PO Box 947 American Fork, UT 84003 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if varient outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 06/24/2015 Amount (\$) \$29.00 PURPOSE OF	(a) Category (see Categories listed at the top of this schedule) ACCOUNTING/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee Candidate/Officeholder name Office sought Office held Payee name Authorize.Net Payee address; City; State; Zip Code PO Box 947 American Fork, UT 84003 (a) Category (see Categories listed at the top of this schedule) ACCOUNTING/Banking (b) Description Check if travel outside of Texas. Complete Schedule T.	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 06/24/2015 Amount (\$) \$29.00 PURPOSE OF	(a) Category (see Categories listed at the top of this schedule) Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee Candidate/Officeholder name Office sought Office held Payee name Authorize.Net Payee address; City; State; Zip Code PO Box 947 American Fork, UT 84003 (a) Category (see Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 06/24/2015 Amount (\$) \$29.00 PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee Candidate/Officeholder name Office sought Office held Payee name Authorize.Net Payee address; City; State; Zip Code PO Box 947 American Fork, UT 84003 (a) Category (see Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee Candidate/Officeholder name Office sought Office held	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 06/24/2015 Amount (\$) \$29.00 PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (see Categories listed at the top of this schedule) Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee Candidate/Officeholder name Office sought Office held Payee name Authorize.Net Payee address; City; State; Zip Code PO Box 947 American Fork, UT 84003 (a) Category (see Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee Candidate/Officeholder name Office sought Office held	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Carlottata Cinaprotati in Cinata	The Instruction Guide explains how to comp	lete this form.
1	Total pages Schedule F1:		3 Filer ID
	Sch: 20/39 Rpt:	Frazer, William	C TICLIE
4	Date	5 Payee name	
	06/25/2015	Authorize.Net	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$14.50	PO Box 947	
ŀ			
		American Fork, UT 84003	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
			Credit Card Processing Fee
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	experiorare to benefit C/Or	1	
	Date	Payee name	
	06/26/2015	Authorize.Net	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$14.50	PO Box 947	
		American Fork, UT 84003	
	PURPOSE		
	OF		Description
	EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Credit Card Processing Fee
			3
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OH	1	5.1135 Hold
	Date	Payee name	
	06/29/2015	Authorize.Net	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$21.00	PO Box 947	
		American Fork, UT 84003	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense
			Credit Card Processing Fee
	0		
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	,		

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Com

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense
Gitt/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Onicerioldes/F onite	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1: Sch: 21/39 Rpt:	Frazer, William
4 Date 06/30/2015	5 Payee name Authorize.Net
6 Amount (\$) \$14.50	7 Payee address; City; State; Zip Code PO Box 947 American Fork, UT 84003
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fee
9 Complete <u>QNLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date 03/28/2015	Payee name Bear Hands Media Group
Amount (\$) \$2,370.68	Payee address; City; State; Zip Code PO Box 70033 Houston, TX 77270
PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Video production
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date 02/14/2015	Payee name Beavers Media & Communications
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 8925 Briar Forest Dr.
PURPOSE	Houston, TX 77024
OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Candidate/Officeholder/Politica	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
	Total pages Schedule F1: Sch: 22/39 Rpt:	Frazer, William
	Date 03/08/2015	Payee name Beavers Media & Communications
6	Amount (\$) \$3,875.00	7 Payee address; City; State; Zip Code 8925 Briar Forest Dr. Houston, TX 77024
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held H
	Date 04/08/2015	Payee name Beavers Media & Communications
	Amount (\$) \$2,550.00	Payee address; City; State; Zip Code 8925 Briar Forest Dr. Houston, TX 77024
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held H
	Date 05/04/2015	Payee name Beavers Media & Communications
	Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 8925 Briar Forest Dr.
	VALUE - March	Houston, TX 77024
	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Consulting Expense Check if Austin, TX, officeholder living expense Consulting
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held H

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Contributions/ Donations Made By Candidate/Officeholder/Political		mmittee	Gift/Awards/Memorials Ex Legal Services	xpense		xpens Nages	se s/Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed abo	ve)
Ļ		-		The Instruction Guid	le explains i	how to co	mple	ete this form.			
1	Total pages Schedule F1:	2							3	Filer ID	
<u> </u>	Sch: 23/39 Rpt:	L	Frazer, Willia								
4	Date	5	Payee name								
	06/01/2015		Beavers Me	edia & Communica	ations						
6	Amount (\$)	7	Payee addres	ss; City;	State;	; Zip Co					
l	\$1,500.00		8925 Briar F	· · ·		1 -,					
			Houston, TX	X 77024							
8	PURPOSE	(a)	Category (Si	ee Categories listed at the	ton of this sch	redule)	(b)	Description			
ĺ	OF EXPENDITURE		Consulting E		top 2	,	1	Check if travel		de of Texas. Complete Schedule T.	
ĺ	M/M molthers w			•			1		, TX,	officeholder living expense	
ĺ	I							Consulting			
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9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder name	0	Office sou	ght			Office held	
Ĺ	expenditure to benefit oron	h	-	-·· -							
	Date	T	Payee name								
	02/26/2015		Boyter, Holly	y R. (Ms.)							
	Amount (\$)	-	Payee addres		State:	: Zip Co	-dp				
	\$425.00	1	7814 Caden		 ,	,)h	uc				
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			United Th	777040							
		┿	Houston, TX			····					
	PURPOSE OF			ee Categories listed at the t		edule)	(b)	Description			
	EXPENDITURE		Salaries/Wa	ages/Contract Lab	or					de of Texas. Complete Schedule T.	
								Check if Austin, Staff Salaries		officeholder living expense	
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	Complete ONLY if direct	<u>Ļ</u>	`andidate/Offi	ceholder name						2.00	
	expenditure to benefit C/OF		anuluateronic	cenoider name	U	Office sou	ght			Office held	
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	Date	•	Payee name								
	03/07/2015		Boyter, Holly	y R. (Ms.)							
	Amount (\$)	T	Payee addres	ss; City;	State;	Zip Co	de				
	\$1,075.00		7814 Caden			-					
			Houston, TX	/ 770 <u>4</u> 0							
	PURPOSE						\				
	OF			e Categories listed at the to		edule)	(b)	Description	- 34		
	EXPENDITURE		Salaries/vva	iges/Contract Labo	or			Lance of the land		de of Texas. Complete Schedule T. officeholder living expense	
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	Complete ONLY if direct	L_{C}	andidate/Offic	sahaldar name		, ee -	L., j.				
	expenditure to benefit C/OF		diluiuaicionio	enoluer name	O,	Office sou(jhι			Office held	
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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 24/39 Rpt:	2 FILER NAME Frazer, William 3 Filer ID
	Date 03/08/2015	5 Payee name Boyter, Holly R. (Ms.)
6	Amount (\$) \$37.10	7 Payee address; City; State; Zip Code 7814 Cadenza Court Houston, TX 77040
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Guitar Center - Reimbursement see Schedule G
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held H
	Date 03/28/2015	Payee name Boyter, Holly R. (Ms.)
	Amount (\$) \$196.40	Payee address; City; State; Zip Code 7814 Cadenza Court Houston, TX 77040
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Speedy Printing - Reimbursement see Schedule G
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held H
	Date 04/08/2015	Рауее пате Boyter, Holly R. (Ms.)
	Amount (\$) \$2,012.50	Payee address; City; State; Zip Code 7814 Cadenza Court Houston, TX 77040
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff Salaries
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

		The Instruction Guide explains how to complete this form.
1		2 FILER NAME 3 Filer ID
L	Sch: 25/39 Rpt:	Frazer, William
4	Date	5 Payee name
	05/05/2015	Boyter, Holly R. (Ms.)
6	Amount (\$) \$16.24	7 Payee address; City; State; Zip Code 7814 Cadenza Court Houston, TX 77040
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Houston Locksmith - Reimbursement see Schedule G
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	05/05/2015	Boyter, Holly R. (Ms.)
	Amount (\$) \$63.83	Payee address; City; State; Zip Code 7814 Cadenza Court
	1	Houston TV 77040
	DUDDOCE	Houston, TX 77040
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Lowe's - Reimbursement see Schedule G
	OF	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Lowe's - Reimbursement see Schedule G Candidate/Officeholder name Office sought Office held
	OF EXPENDITURE Complete ONLY if direct	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Lowe's - Reimbursement see Schedule G Candidate/Officeholder name Office sought Office held
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Lowe's - Reimbursement see Schedule G Candidate/Officeholder name Office sought Office held
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Lowe's - Reimbursement see Schedule G Candidate/Officeholder name Office sought Payee name
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 05/05/2015 Amount (\$) \$125.16	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Lowe's - Reimbursement see Schedule G Candidate/Officeholder name Office sought Office held Payee name Boyter, Holly R. (Ms.) Payee address; City; State; Zip Code
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 05/05/2015 Amount (\$) \$125.16	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Lowe's - Reimbursement see Schedule G Candidate/Officeholder name Office sought Payee name Boyter, Holly R. (Ms.) Payee address; City; State; Zip Code 7814 Cadenza Court
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 05/05/2015 Amount (\$) \$125.16 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement Candidate/Officeholder name Office sought Office held Payee name Boyter, Holly R. (Ms.) Payee address; City; State; Zip Code 7814 Cadenza Court Houston, TX 77040 (a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement (b) Description Check if Austin, TX, officeholder living expense Lowe's - Reimbursement see Schedule G Office held (b) Description Check if Austin, TX, officeholder living expense Walmart - Reimbursement see Schedule G

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
L	Sch: 26/39 Rpt:	Frazer, William
4		5 Payee name
_	05/05/2015	Boyter, Holly R. (Ms.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$32.44	7814 Cadenza Court
		Houston, TX 77040
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T.
ĺ	,	Check if Austin, TX, officeholder living expense Home Depot - Reimbursement see Schedule G
	· ·	The soper Training and the sound and the sou
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H
	Date	Payee name
	05/05/2015	Boyter, Holly R. (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$24.89	7814 Cadenza Court
		Houston, TX 77040
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Office Depot - Reimbursement see Schedule G
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	1
	Date	Payee name
	05/05/2015	Boyter, Holly R. (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$323.45	7814 Cadenza Court
		Houston, TX 77040
-	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Thomas Printworks - Reimbursement see Schedule
		G G
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica	3	Salaries/ on Guide explains how to co	Wages/Contract Lai		OTHER (enter a category not listed above)
1	Total pages Schedule F1: Sch: 27/39 Rpt:	2 FILER NAME Frazer, William			3	Filer ID
	Date 05/05/2015	5 Payee name Boyter, Holly R. (Ms.)				
6	Amount (\$) \$2,000.00	7 Payee address; City; 7814 Cadenza Court Houston, TX 77040	State; Zip Co	ode		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories liste Salaries/Wages/Contrac			if travel outside if Austin, TX, c	e of Texas. Complete Schedule T. officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder nam H	ne Office sou	ught		Office held
	Date 06/05/2015	Payee name Boyter, Holly R. (Ms.)				
	Amount (\$) \$67.01	Payee address; City; 7814 Cadenza Court Houston, TX 77040	State; Zip Co	ode		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories liste Loan Repayment/Reimb		Check if	if travel outside if Austin, TX, o	e of Texas. Complete Schedule T. officeholder living expense Dursement see Schedule G
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder nam H	ne Office sou	ught		Office held
	Date 06/05/2015	Payee name Boyter, Holly R. (Ms.)				
	Amount (\$) \$2,050.00	Payee address; City; 7814 Cadenza Court Houston, TX 77040	State; Zip Co	ode		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories liste Salaries/Wages/Contract			f travel outside	e of Texas. Complete Schedule T. Ifficeholder living expense
		<u> </u>		Staff Sal		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder nam I	ne Office sou	ught		Office held
I						

SCHEDULE F1

Advertising Expense Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	Candidate/Officeholder/Politica	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
	Sch: 28/39 Rpt:	Frazer, William
	Date 06/19/2015	5 Payee name Boyter, Holly R. (Ms.)
6	Amount (\$) \$54.11	7 Payee address; City; State; Zip Code 7814 Cadenza Court Houston, TX 77040
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Kroger - Reimbursement see Schedule G
9	Complete ONLY if direct expenditure to benefit C/O	
	Date 04/27/2015	Payee name Cadence Insurance
	Amount (\$) \$1,083.72	Payee address; City; State; Zip Code 10575 Katy Freeway Suite 150 Houston, TX 77024
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office Insurance
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
	Date 04/15/2015	Payee name Daniel L. Ellwood, PC
	Amount (\$) \$137.50	Payee address; City; State; Zip Code 1155 Dairy Ashford Suite 111 Houston, TX 77079
	EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Review of Office Lease
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense
Salaries/Wages/Contract Labor

		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	1
	Sch: 29/39 Rpt:	Frazer, William
4		5 Payee name
	04/03/2015	Hi Hat Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,000.00	6990 Portwest
	!	Suite 100
	DUDDOOF	Houston, TX 77055
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
	,	Office Rent
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date 05/01/2015	Payee name
		Hi Hat Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	6990 Portwest
		Suite 100
	P. 1550 25	Houston, TX 77055
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	1	Office Rent
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/01/2015	Hi Hat Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	6990 Portwest
		Suite 100
		Houston, TX 77055
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Office Rent
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	1

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica		nmittee	Gift/Awards/Memorials Ex Legal Services		Printing E. Salaries/V		se s/Contract Labor	Travel Out of D	District a category not listed above)	
				The Instruction Guid			-			a suregery nor instead above;	
1	Total pages Schedule F1:	2	FILER NAME						3 Filer ID		
	Sch: 30/39 Rpt:		Frazer, Willia	am							
4	Date	5	Payee name	·····							
	02/14/2015		Mammoth N	Marketing Group							
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	de				
	\$6,500.00		4708 Eigel	Street							
			Houston, TX	K 77007							
8	PURPOSE	(a)	Category (Se	ee Categories listed at the t	top of this sched	ule)	(b)	Description			
	OF EXPENDITURE		Consulting I					<u></u>	outside of Texas. Co	•	
								Personal	, TX, officeholder livi	ng expense	
								Consulting			
9	Complete ONLY if direct	Ц	Candidate/Offi	ceholder name	Off	ice sou	aht		Office I	held	
	expenditure to benefit C/O		Janaidate, Om	octionact marrie	Oil	ice sou	giit		Office	neiu	
	Date	_	Payee name								
	03/08/2015		•	Marketing Group							
	Amount (\$)		Payee addres		State;	Zin Co	de				
	\$6,500.00		4708 Eigel :	•	Giaic,	zip Co	uc				
	10,000										
			Houston, TX	< 77007							
	PURPOSE	(2)					(h)	Danasia di La			
	OF	(4)	Consulting I	ee Categories listed at the t	top of this sched	ule)	(U)	Description Check if travel of	outside of Texas. Co	implete Schedule T.	
	EXPENDITURE		Consuming .	Aportoc					, TX, officeholder livi		
								Consulting			
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offi	ceholder name	Off	ice sou	ght		Office I	held	
	'										
	Date		Payee name								
	03/08/2015			Marketing Group					***************************************		
	Amount (\$)		Payee addres	-	State;	Zip Co	de				
	\$3,464.00		4708 Eigel 9	Street							
			Houston, T	< 77007 							
	PURPOSE OF	(a)		ee Categories listed at the t		ule)	(b)	Description			
	EXPENDITURE		Office Overl	nead/Rental Expe	nse				outside of Texas. Co TX, officeholder livir	•	
								Website Deve		ng expense	
									p		
	Complete ONLY if direct		andidate/Offic	ceholder name	Offi	ice sou	ght		Office h	neld	
	expenditure to benefit C/OF						J .				

SCHEDULE F1

Advertising Expense Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	·
	Sch: 31/39 Rpt:	Frazer, William
4	Date	5 Payee name
	03/08/2015	Mammoth Marketing Group
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$980.05	4708 Eigel Street
L	-	Houston, TX 77007
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	I	Fundraising
	1	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H
<u> </u>	Date	
	Date 04/15/2015	Payee name Mammoth Marketing Group
<u> </u>		
	Amount (\$) \$6,500.00	Payee address; City; State; Zip Code
	φυ _τ ουνίου _γ	4708 Eigel Street
		Houston, TX 77007
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	ļ	Check if Austin, TX, officeholder living expense Consulting
		Sometimes of the state of the s
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	
	Date	Payee name
	04/15/2015	Mammoth Marketing Group
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,722.45	4708 Eigel Street
		Houston, TX 77007
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
i r		Design & printing
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Co

Event Expense Fees Food/Beverage Expense
Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense
Polling Expense
Printing Expense

		The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 32/39 Rpt:	2 FILER NAME Frazer, William 3 Filer ID	
L			
4	Date 05/04/2015	5 Payee name Mammoth Marketing Group	
٣	Amount (\$)		
٠		·	
	\$522.50	4708 Eigel Street	
		Houston, TX 77007	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Solicitation/Fundraising Expense	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	İ
	1	Fundraising	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OF	1	
=	Date	Payee name	_
	05/19/2015	Mammoth Marketing Group	
<u> </u>			
	Amount (\$)	Payee address; City; State; Zip Code	1
	\$726.56	4708 Eigel Street	
		Houston, TX 77007	
Γ	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
		Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	OF	Office Overhead/Rental Expense	
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website maintenance Candidate/Officeholder name Office sought Office held	•
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website maintenance Candidate/Officeholder name Office sought Office held	
	OF EXPENDITURE Complete ONLY if direct	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website maintenance Candidate/Officeholder name Office sought Office held	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website maintenance Candidate/Officeholder name Office sought Office held Payee name	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OPDate 05/19/2015	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website maintenance Candidate/Officeholder name Office sought Payee name Mammoth Marketing Group	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate 05/19/2015 Amount (\$)	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website maintenance Candidate/Officeholder name Office sought Payee name Mammoth Marketing Group Payee address; City; State; Zip Code	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OPDate 05/19/2015	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website maintenance Candidate/Officeholder name Office sought Payee name Mammoth Marketing Group	***************************************
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate 05/19/2015 Amount (\$)	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website maintenance Candidate/Officeholder name Office sought Payee name Mammoth Marketing Group Payee address; City; State; Zip Code	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate 05/19/2015 Amount (\$)	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website maintenance Candidate/Officeholder name Office sought Payee name Mammoth Marketing Group Payee address; City; State; Zip Code	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 05/19/2015 Amount (\$) \$735.62	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website maintenance Candidate/Officeholder name Office sought Office held Payee name Mammoth Marketing Group Payee address; City; State; Zip Code 4708 Eigel Street Houston, TX 77007	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 05/19/2015 Amount (\$) \$735.62	Office Overhead/Rental Expense Candidate/Officeholder name Office sought Candidate/Officeholder name Office sought Payee name Mammoth Marketing Group Payee address; City; State; Zip Code 4708 Eigel Street Houston, TX 77007 (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder Iving expense Website maintenance Office held Office held Office held Office held Office held Description	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 05/19/2015 Amount (\$) \$735.62	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website maintenance Candidate/Officeholder name Office sought Office held Payee name Mammoth Marketing Group Payee address; City; State; Zip Code 4708 Eigel Street Houston, TX 77007 (a) Category (See Categories listed at the top of this schedule) Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 05/19/2015 Amount (\$) \$735.62	Office Overhead/Rental Expense Candidate/Officeholder name Office sought Office held Payee name Mammoth Marketing Group Payee address; City; State; Zip Code 4708 Eigel Street Houston, TX 77007 (a) Category (See Categories listed at the top of this schedule) Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 05/19/2015 Amount (\$) \$735.62	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website maintenance Candidate/Officeholder name Office sought Office held Payee name Mammoth Marketing Group Payee address; City; State; Zip Code 4708 Eigel Street Houston, TX 77007 (a) Category (See Categories listed at the top of this schedule) Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 05/19/2015 Amount (\$) \$735.62 PURPOSE OF EXPENDITURE Complete ONLY if direct	Office Overhead/Rental Expense Candidate/Officeholder name Candidate/Officeholder name Office sought Office held Payee name Mammoth Marketing Group Payee address; City; State; Zip Code 4708 Eigel Street Houston, TX 77007 (a) Category (see Categories listed at the top of this schedule) Printing Expense Candidate/Officeholder name Office sought Office held Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing Candidate/Officeholder name Office sought Office held	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFD Date 05/19/2015 Amount (\$) \$735.62 PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense Candidate/Officeholder name Candidate/Officeholder name Office sought Office held Payee name Mammoth Marketing Group Payee address; City; State; Zip Code 4708 Eigel Street Houston, TX 77007 (a) Category (see Categories listed at the top of this schedule) Printing Expense Candidate/Officeholder name Office sought Office held Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing Candidate/Officeholder name Office sought Office held	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 05/19/2015 Amount (\$) \$735.62 PURPOSE OF EXPENDITURE Complete ONLY if direct	Office Overhead/Rental Expense Candidate/Officeholder name Candidate/Officeholder name Office sought Office held Payee name Mammoth Marketing Group Payee address; City; State; Zip Code 4708 Eigel Street Houston, TX 77007 (a) Category (see Categories listed at the top of this schedule) Printing Expense Candidate/Officeholder name Office sought Office held Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing Candidate/Officeholder name Office sought Office held	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 05/19/2015 Amount (\$) \$735.62 PURPOSE OF EXPENDITURE Complete ONLY if direct	Office Overhead/Rental Expense Candidate/Officeholder name Candidate/Officeholder name Office sought Office held Payee name Mammoth Marketing Group Payee address; City; State; Zip Code 4708 Eigel Street Houston, TX 77007 (a) Category (see Categories listed at the top of this schedule) Printing Expense Candidate/Officeholder name Office sought Office held Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing Candidate/Officeholder name Office sought Office held	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense
Polling Expense
Printing Expense

Cardidate/Officeriolide//Pol	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F Sch: 33/39 Rpt:	L: 2 FILER NAME Frazer, William 3 Filer ID
,	
4 Date 05/20/2015	5 Payee name Mammoth Marketing Group
6 Amount (\$) \$6,500.0	7 Payee address; City; State; Zip Code 4708 Eigel Street Houston, TX 77007
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C.	
Date	Payee name
05/20/2015	Mammoth Marketing Group
Amount (\$) \$450.0	Payee address; City; State; Zip Code 4708 Eigel Street
	Houston, TX 77007
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website maintenance
Complete <u>ONLY</u> if direct expenditure to benefit C	Candidate/Officeholder name Office sought Office held OH
Date	Payee name
05/20/2015	Mammoth Marketing Group
Amount (\$) \$938.50	Payee address; City; State; Zip Code 4708 Eigel Street
	Houston, TX 77007
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fundraising
Complete <u>ONLY</u> if direct expenditure to benefit C/	Candidate/Officeholder name Office sought Office held DH

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense
Polling Expense
Printing Expense

	Candidate/Officeholder/Politica	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
	Total pages Schedule F1: Sch: 34/39 Rpt:	Frazer, William
	Date 06/01/2015	5 Payee name Mammoth Marketing Group
6	Amount (\$) \$6,500.00	7 Payee address; City; State; Zip Code 4708 Eigel Street Houston, TX 77007
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H
	Date 06/19/2015	Payee name Mammoth Marketing Group
	Amount (\$) \$767.50	Payee address; City; State; Zip Code 4708 Eigel Street Houston, TX 77007
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fundraising
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date 03/08/2015	Payee name Owens, Philip G. (Mr.)
	Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 10231 Glenfield Park Lane
		Houston, TX 77070
	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense
Polling Expense
Printing Expense

Candidate/Officeholder/Politic	Al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1: Sch: 35/39 Rpt:	2 FILER NAME Frazer, William 3 Filer ID
4 Date 04/08/2015	5 Payee name Owens, Philip G. (Mr.)
6 Amount (\$) \$3,000.00	7 Payee address; City; State; Zip Code 10231 Glenfield Park Lane Houston, TX 77070
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date 05/01/2015	Payee name Owens, Philip G. (Mr.)
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 10231 Glenfield Park Lane Houston, TX 77070
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 06/01/2015	Payee name Owens, Philip G. (Mr.)
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 10231 Glenfield Park Lane
	Houston, TX 77070
PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica		Gift/Awards/Memorials Expense mittee Legal Services	Printing Ex Salaries/M			Travel Out of District OTHER (enter a category not listed	above)
			The Instruction Guide explains		-			
1	Total pages Schedule F1:	1				3 [Filer ID	
	Sch: 36/39 Rpt:	<u> </u>	Frazer, William					
4	Date	5 [Payee name					
	03/28/2015	<u> </u>	Spring Branch Republicans					
6	Amount (\$)	7 F	Payee address; City; State	e; Zip Co	de			
	\$2,500.00	2	2315 Rosefield Dr					
	,							
		ŀ	Houston, TX 77080					
8	PURPOSE	(a) (Category (See Categories listed at the top of this sc	chedule)	(b)	Description		
	OF EXPENDITURE		Event Expense			Check if travel outside	e of Texas. Complete Schedule T.	
						lI	officeholder living expense	
	!					Sam Houston Tal	ble - San Jacinto Day D	inner
9	Complete ONLY if direct expenditure to benefit C/OH		andidate/Officeholder name	Office sou	ght		Office held	
	expenditure to benefit C/Or	П						
	Date	F	Payee name					
	06/19/2015	7	Гехаs Asian Republican Club					
	Amount (\$)	F	Payee address; City; State	e; Zip Co	de			
	\$177.00	F	PO Box 770846	•				
	!							
	1	Ι.	TV 7704E					
		 	Houston, TX 77215					
	PURPOSE OF	(a) (Category (See Categories listed at the top of this sci	chedule)	(b)	Description		
	EXPENDITURE	E	Event Expense	ļ		haman and a second	e of Texas. Complete Schedule T.	
				[officeholder living expense	
	ļ					6/12/15 MEET AN	ND GREET	
	- 1: 5:000	<u> </u>		1				
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ght		Office held	
	experiance to bonone o. c.							
	Date	F	Payee name		-			
	04/10/2015	T	Texas Workforce Commission					
•••••	Amount (\$)	F	Payee address; City; State	e; Zip Coo				
	\$7.05] 1	L01 E. 15th St	•				
		,	Austin, TX 78778					
	- CIDDOOF			T	\			
	PURPOSE OF		Category (See Categories listed at the top of this sol	chedule)	(b)	Description		
	EXPENDITURE	١	Salaries/Wages/Contract Labor				e of Texas. Complete Schedule T.	
						1st Qtr unemployr	officeholder living expense	
				- 1		TSt Qtr unemploy	meni tax	
	Complete ONLY if direct	<u> </u>	andidate/Officeholder name	Office cour			orr Lati	
	expenditure to benefit C/OF	H H	indidate/Onicerolder name	Office soug	Jπι		Office held	
	·							
_								

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica	Al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
	Total pages Schedule F1: Sch: 37/39 Rpt:	Frazer, William
	Date 03/11/2015	5 Payee name US Treasury
6	Amount (\$) \$65.02	7 Payee address; City; State; Zip Code Internal Revenue Service Ogden, UT 84201
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 941 Q1 deposit payroll taxes
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date 04/10/2015	Payee name US Treasury
	Amount (\$) \$164.48	Payee address; City; State; Zip Code Internal Revenue Service Ogden, UT 84201
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 941 Q1 deposit payroll taxes
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held H
	Date 05/13/2015	Payee name US Treasury
	Amount (\$) \$370.84	Payee address; City; State; Zip Code Internal Revenue Service Ogden, UT 84201
	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 941 Q2 deposit payroll taxes
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica		mmittee	Gift/Awards/Memorials Legal Services		Printing E Salaries/	Expens		Travel Out of District OTHER (enter a category	not listed above)
				The Instruction Gu	uide explains	how to co	omple	ete this form.		:
1	Total pages Schedule F1:	2	FILER NAME	=			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		3 Filer ID	
	Sch: 38/39 Rpt:	_	Frazer, Willi							
4		5	Payee name							
	06/09/2015		US Treasur	у						
6	Amount (\$)	7	Payee addre	ess; City;	State	e; Zip Co	ode	<u></u>		
	\$367.67		Internal Re	venue Service						
	!									
			Ogden, UT	84201						
8	PURPOSE	(a)	Category (S	Gee Categories listed at t	the top of this sch	hedule)	(b)	Description		
ı	OF EXPENDITURE			ages/Contract La				- Lungard	outside of Texas. Complete Sch	
	!								, TX, officeholder living expense	:
ı	!							941 Qz aepo	sit payroll taxes	
		L_			***************************************		<u></u>			
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offi	iceholder name	(Office sou	ught		Office held	
								4		
	Date		Payee name							
	04/10/2015		VRW PAC							
	Amount (\$)		Payee addre	ess; City;	State	e; Zip Co	ode			
	\$200.00		c/o Pam Go	oodson						
			13703 Pert	hshire Road						
	!		Houston, TX	X 77079						
	PURPOSE	1(2)					1/b)			
	OF	الما	Category _{(Si} Advertising	ee Categories listed at t	he top of this sch	nedule)	(0)	Description Check if travel	outside of Texas. Complete Sch	adula T
	EXPENDITURE		Auvernanny	Exhausa					, TX, officeholder living expense	
	!							Full Page Ad		
								-		
	Complete ONLY if direct		Candidate/Off	iceholder name	(Office sou	ught		Office held	
	expenditure to benefit C/O	Н					•			
	Date	〒	Davido name							
	05/19/2015		Payee name	: 1 & Associates						
		╀								
	Amount (\$)		Payee addres		State	e; Zip Co	ode			
	\$195.00		4801 Wood	-						
			Suite 170E							
	!		Houston, TX	x 77056						
	PURPOSE	(a)	Category (S	ee Categories listed at t	the top of this sch	nedule)	(b)	Description		
	OF EXPENDITURE			head/Rental Exp				Check if travel	outside of Texas. Complete Sch	
	LA CHOHORE							N	, TX, officeholder living expense	
	!							Computer Fir	rewall Installation	
		<u></u>								
	Complete ONLY if direct		Candidate/Offi	iceholder name		Office sou	ught		Office held	
	expenditure to benefit C/OF	П								

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee			Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services		Polling Expension Printing Expension Salaries/Wages	se s/Contract Labor		Transportation Equipm Travel in District Travel Out of District OTHER (enter a categ	ory not listed above)
<u> </u>				The Instruction Guid	e explains h	low to comple	ete this form.			
1	Total pages Schedule F1: Sch: 39/39 Rpt:	2	FILER NAME Frazer, Willi					3	Filer ID	
4	Date	5	Payee name	<u> </u>				L		***************************************
	06/27/2015		YK Creative							
6	Amount (\$)	7	Payee addre	ess; City;	State;	Zip Code				
	\$450.00		20507 Sprin	ng Mission						
8	DUDDOCT		Spring, TX			T				
8	PURPOSE OF	(a)	Category (S	ee Categories listed at the t	op of this sche	_{dule)} (b)	Description		1. d= 0. 1. a	–
	EXPENDITURE		Office Over	head/Rental Expe	rise		A		de of Texas. Complete S officeholder living expe	
							Website main			
L		L								
9	Complete ONLY if direct expenditure to benefit C/O	- (-	Candidate/Offi	iceholder name	O	ffice sought			Office held	***************************************
										:

UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Office Overhead/Rental Expense Consulting Expense Food/Beverage Expense Polling Expense Printing Expense Travel in District Travel Out of District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F2: 2 FILER NAME 3 Filer ID Sch: 1/4 Rpt: 87/112 Frazer, William TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS \$ 5 Date Payee name 06/30/2015 Anderson Design Amount (\$) Payee address; State; Zip Code \$405.93 12402 Piping Rock Houston, TX 77077 TYPE OF 9 X Political Non-Political **EXPENDITURE** 10 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Printing Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Printing - Invitation 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/29/2015 Authorize.Net Amount (\$) Payee address; State; Zip Code City; \$17.40 PO Box 947 American Fork, UT 84003 TYPE OF X Political Non-Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense Credit Card Processing Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Accounting/Banking Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Contributions/ Donations Made By -Gift/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F2: 2 FILER NAME 3 Filer ID Frazer, William Sch: 2/4 Rpt: 88/112 \$ TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS 5 Date 6 Payee name 06/30/2015 Authorize.Net Amount (\$) Payee address; City; State; Zip Code \$23.93 PO Box 947 American Fork, UT 84003 9 TYPE OF Political Non-Political |x| **EXPENDITURE** 10 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense Credit Card Processing Fee 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/30/2015 Boyter, Holly R. (Ms.) Amount (\$) Payee address; State; Zip Code \$2,025.00 7814 Cadenza Court Houston, TX 77040 TYPE OF Political Non-Political X **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Staff Salaries Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Solicitation/Fundraising Expense Transportation Equipment & Related Expense Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Contributions/ Donations Made By -Gift/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Candidate/Officeholder/Political Committee Legal Services The Instruction Guide explains how to complete this form. Total pages Schedule F2: 2 FILER NAME 3 Filer ID Frazer, William Sch: 3/4 Rpt: 89/112 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS \$ 5 Date 6 Payee name 06/30/2015 Mammoth Marketing Group Amount (\$) Payee address; City; State; Zip Code \$3,196.25 4708 Eigel Street Houston, TX 77007 9 TYPE OF Political Non-Political |X| **EXPENDITURE** 10 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Solicitation/Fundraising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense **Fundraising** 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/30/2015 **Texas Workforce Commission** Amount (\$) Payee address; City; State; Zip Code \$28.49 101 E. 15th St Austin, TX 78778 TYPE OF Political Non-Political X **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense 2nd Qtr unemployment tax Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Fees Consulting Expense Food/Beverage Expense Polling Expense Travel Out of District OTHER (enter a category not listed above) Contributions/ Donations Made By -Gift/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor Candidate/Officeholder/Political Committee Legal Services The Instruction Guide explains how to complete this form. Total pages Schedule F2: 2 FILER NAME Filer ID Sch: 4/4 Rpt: 90/112 Frazer, William TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS \$ 5 Date Payee name 06/30/2015 **US Treasury** Amount (\$) Payee address; City; State; Zip Code \$380.33 Internal Revenue Service Ogden, UT 84201 TYPE OF 9 Political Non-Political Х **EXPENDITURE** 10 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense 941 Q2 deposit payroll taxes 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

	Candidate/Officeholder/Politica	l Con	nmittee	Legal Services	Suide explains		Vages/Contract Labor		OTHER (enter a category not listed above)
1	Total pages Schedule G: Sch: 1/21 Rpt: 91/112	1	FILER NAMI Frazer, Willi					3	Filer ID
4	Date 05/26/2015		Payee name Amazon.co	m					
6	Amount (\$) \$181.91 Reimbursement from political contributions		-	Avenue North	State;	Zip Co	de		
8	PURPOSE OF	(a)		ee Categories listed at		edule)	(b) Description		neck if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Office Over	head/Rental Ex	pense		L Printer Supplies		eck if Austin, TX, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Can	didate/Office	holder name			Office sought		Office held
	Date 03/06/2015		Payee name Asian Char	nber Of Comme	erce				
	Amount (\$) \$1,000.00	1	Payee addre 6833 W. Sa	ss; City; am Houston Pai	•	Zip Co)7	de		
	Reimbursement from political contributions intended		Houston, T	X 77072					
	PURPOSE OF EXPENDITURE		Category (s Event Expe	ee Categories listed at	the top of this sche	edule)	Description [[Reserved Table	Ch	neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Can	didate/Office	holder name			Office sought		Office held
	Date 01/05/2015		Payee name Beavers Me	edia & Commur	ications				
	Amount (\$) \$1,500.00		Payee addre 8925 Briar	•	State;	Zip Co	de		
	Reimbursement from political contributions intended		Houston, T.	X 77024					
	PURPOSE OF EXPENDITURE		Category (s Consulting	ee Categories listed at Expense	the top of this sche	edule)	Description [[Consulting	<u></u>	neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Can	didate/Office	holder name			Office sought		Office held

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	Fee Foo - Gift Committee Leg	od/Beverage Expense //Awards/Memorials Expense pal Services	Office Ov Polling Ex Printing E Salaries/A	xpense Nages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
			e Instruction Guide explains	now to co	ompiete triis form.						
1	Total pages Schedule G: Sch: 2/21 Rpt: 92/112	2 FILER NAME Frazer, William				3 Filer ID					
4	Date	5 Payee name		****							
	06/22/2015	Braeburn Cou	ntry Club								
6	Amount (\$)	7 Payee address;	City; State;	Zip Co	ode						
	\$1,274.44	8101 Bissonne	8101 Bissonnet								
	Reimbursement from political contributions intended	Houston, TX 7	Houston, TX 77074								
	DUDDOCE				Ta v =						
8	PURPOSE OF		ategories listed at the top of this scho	edule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.					
	EXPENDITURE	Solicitation/Fu	ndraising Expense	L	Check if Austin, TX, officeholder living expense						
					Fundraising						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholo	der name		Office sought	Office held					
	Date	Payee name									
	02/18/2015	Cafe Adobe									
	Amount (\$)	Payee address;	City; State;	Zin Co	nda .						
Amount (\$) Payee address; City; State; Zip Code \$820.45 7620 Katy Freeway #355											
	Φ020.45	1020 Kaly Fre	eway #355								
	X Reimbursement from political contributions intended	Houston, TX 7	7024								
	PURPOSE	Category (See C	ategories listed at the top of this sch	edule)	Description	Check if travel outside of Texas. Complete Schedule T.					
	OF EXPENDITURE	Food/Beverage	e Expense			Check if Austin, TX, officeholder living expense					
					Announcement E	Event					
	Complete ONLY if direct	Candidate/Officeholo	ler name		Office sought	Office held					
	expenditure to benefit C/OH				Ü						
	Date	Payee name									
	04/09/2015	Cafe Adobe									
	Amount (\$)	Payee address;	City; State;	Zip Co	ode						
	\$540.18	7620 Katy Fre	•	, =:=							
	Reimbursement from	· · · · · · · · · · · · · · · · · · ·	-								
	x political contributions intended	Houston, TX 7	7024								
	PURPOSE	Category (See C	ategories listed at the top of this sche	edule)	Description	Check if travel outside of Texas. Complete Schedule T.					
	OF EXPENDITURE	Food/Beverage	e Expense			Check if Austin, TX, officeholder living expense					
	_,,, _,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				Precinct Chairs						
	Complete ONLY if dies	Sandidate/Office L	·		0.62						
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholo	ier name		Office sought	Office held					

SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made B Candidate/Officeholder/Politica		Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G: Sch: 3/21 Rpt: 93/112		3 Filer ID
4	Date 02/03/2015	5 Payee name City of Houston	
6	Amount (\$) \$130.04	7 Payee address; City; State; Zip Code PO Box 1562	
	X Reimbursement from political contributions intended	Houston, TX 77251	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees City park permit fe	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
	Date 02/03/2015	Payee name City of Houston	
	Amount (\$) \$100.00	Payee address; City; State; Zip Code PO Box 1562	
	X Reimbursement from political contributions intended	Houston, TX 77251	
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees City refundable de	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense POSIT
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
	Date 05/08/2015	Payee name Comcast	
	Amount (\$) \$348.72	Payee address; City; State; Zip Code 9602 S 300 W. Suite B	
	X Reimbursement from political contributions intended	Sandy, UT 84070	
	PURPOSE OF EXPENDITURE	•	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule G:	2 FILER NAME		3 Filer ID							
	Sch: 4/21 Rpt: 94/112	Frazer, William									
4	Date	5 Payee name									
	06/02/2015	Comcast									
6	Amount (\$)	7 Payee address; City; State; Zip C	Code								
	\$131.88	9602 S 300 W. Suite B									
	Reimbursement from political contributions										
	intended	Sandy, UT 84070									
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.							
	OF EXPENDITURE	Office Overhead/Rental Expense		Check if Austin, TX, officeholder living expense							
			WiFi								
Ļ											
9	Complete <u>ONLY</u> if direct expenditure to benefit	Candidate/Officeholder name	Office sought	Office held							
	C/OH										
	Date	Payee name									
	04/21/2015	Costco Wholesale Corporation									
	Amount (\$)	Payee address; City; State; Zip C	Code								
	\$238.14	999 Lake Dr.									
	Reimbursement from										
l	X political contributions intended Issaquah, WA 98027										
	interided	issaquan, vva 98027									
\vdash	PURPOSE	Category (See Categories listed at the top of this schedule)	Description [Check if travel outside of Texas. Complete Schedule T.							
	PURPOSE OF		Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description [·							
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Brother Printer	·							
	PURPOSE OF EXPENDITURE Complete ONLY if direct	Category (See Categories listed at the top of this schedule)	Ī	·							
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Brother Printer	Check if Austin, TX, officeholder living expense							
	PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Candidate/Officeholder name	Brother Printer	Check if Austin, TX, officeholder living expense							
	PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Brother Printer	Check if Austin, TX, officeholder living expense							
	PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Candidate/Officeholder name Payee name	Brother Printer Office sought	Check if Austin, TX, officeholder living expense							
	PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 04/10/2015	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Candidate/Officeholder name Payee name Cottonwood	Brother Printer Office sought	Check if Austin, TX, officeholder living expense							
	PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 04/10/2015 Amount (\$) \$252.57	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Candidate/Officeholder name Payee name Cottonwood Payee address; City; State; Zip C	Brother Printer Office sought	Check if Austin, TX, officeholder living expense							
	PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 04/10/2015 Amount (\$)	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Candidate/Officeholder name Payee name Cottonwood Payee address; City; State; Zip C	Brother Printer Office sought	Check if Austin, TX, officeholder living expense							
	PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 04/10/2015 Amount (\$) \$252.57	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Candidate/Officeholder name Payee name Cottonwood Payee address; City; State; Zip C 3422 N. Shepherd Dr. Houston, TX 77018	Brother Printer Office sought	Check if Austin, TX, officeholder living expense							
	PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 04/10/2015 Amount (\$) \$252.57 Reimbursement from political contributions intended PURPOSE OF	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Candidate/Officeholder name Payee name Cottonwood Payee address; City; State; Zip C 3422 N. Shepherd Dr.	Brother Printer Office sought	Check if Austin, TX, officeholder living expense Office held							
	PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 04/10/2015 Amount (\$) \$252.57 Reimbursement from political contributions intended PURPOSE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Candidate/Officeholder name Payee name Cottonwood Payee address; City; State; Zip C 3422 N. Shepherd Dr. Houston, TX 77018 Category (See Categories listed at the top of this schedule)	Brother Printer Office sought	Check if Austin, TX, officeholder living expense Office held Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
	PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 04/10/2015 Amount (\$) \$252.57 Reimbursement from political contributions intended PURPOSE OF	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Candidate/Officeholder name Payee name Cottonwood Payee address; City; State; Zip C 3422 N. Shepherd Dr. Houston, TX 77018 Category (See Categories listed at the top of this schedule)	Brother Printer Office sought	Check if Austin, TX, officeholder living expense Office held Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
	PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 04/10/2015 Amount (\$) \$252.57 X Reimbursement from political contributions intended PURPOSE OF EXPENDITURE Complete ONLY if direct	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Candidate/Officeholder name Payee name Cottonwood Payee address; City; State; Zip C 3422 N. Shepherd Dr. Houston, TX 77018 Category (See Categories listed at the top of this schedule)	Brother Printer Office sought	Check if Austin, TX, officeholder living expense Office held Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
	PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 04/10/2015 Amount (\$) \$252.57 X Reimbursement from political contributions intended PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Candidate/Officeholder name Payee name Cottonwood Payee address; City; State; Zip C 3422 N. Shepherd Dr. Houston, TX 77018 Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Brother Printer Office sought ode Description [Houston Young	Check if Austin, TX, officeholder living expense Office held Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Republicans							
	PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 04/10/2015 Amount (\$) \$252.57 X Reimbursement from political contributions intended PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Candidate/Officeholder name Payee name Cottonwood Payee address; City; State; Zip C 3422 N. Shepherd Dr. Houston, TX 77018 Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Brother Printer Office sought ode Description [Houston Young	Check if Austin, TX, officeholder living expense Office held Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Republicans							
	PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 04/10/2015 Amount (\$) \$252.57 X Reimbursement from political contributions intended PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Candidate/Officeholder name Payee name Cottonwood Payee address; City; State; Zip C 3422 N. Shepherd Dr. Houston, TX 77018 Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Brother Printer Office sought ode Description [Houston Young	Check if Austin, TX, officeholder living expense Office held Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Republicans							

SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule G:	2 FILER NAME		3 Filer ID						
	Sch: 5/21 Rpt: 95/112	Frazer, William								
4	Date	5 Payee name								
	04/16/2015	Dantons Restaurant								
6	Amount (\$)	7 Payee address; City; State; Zip C	ode							
	\$48.97	4611 Montrose A-100								
	Reimbursement from political contributions									
	intended	Houston, TX 77006								
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.						
	EXPENDITURE	Solicitation/Fundraising Expense	L	Check if Austin, TX, officeholder living expense						
			Fundraising							
9	Complete ONLY if direct	Condidate /Office hadden	<u> </u>							
9	Complete ONLY if direct expenditure to benefit	Candidate/Officeholder name	Office sought	Office held						
	C/OH									
	Date	Payee name								
	03/05/2015	FedEx Office								
	Amount (\$)	Payee address; City; State; Zip Co	ode							
	\$40.23	4834B Beechnut								
	Reimbursement from									
	X political contributions intended	Houston, TX 77096								
	PURPOSE OF	Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.						
	EXPENDITURE	Printing Expense		Check if Austin, TX, officeholder living expense						
			Copies							
	Complete ONLY if direct	OElIOF - L-II								
	Complete <u>ONLY</u> if direct expenditure to benefit	Candidate/Officeholder name	Office sought	Office held						
	C/OH									
	Date	Payee name								
	06/17/2015	Fleming's								
	Amount (\$)	Payee address; City; State; Zip Co	ode							
	\$495.38	2405 West Alabama								
	Reimbursement from									
	X political contributions intended	Houston, TX 77098								
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.						
	OF EXPENDITURE	Solicitation/Fundraising Expense		Check if Austin, TX, officeholder living expense						
			Fundraising							
	Complete ONLY if direct expenditure to benefit	Candidate/Officeholder name	Office sought	Office held						
	C/OH									

SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Ex

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica		mmittee Legal Services Salarie	s/Wages/Contract Labor		OTHER (enter a category not listed above)	
			The Instruction Guide explains how to	complete this form.			
1	Total pages Schedule G:	2	FILER NAME		3	Filer ID	
	Sch: 6/21 Rpt: 96/112		Frazer, William				
4	Date	5	Payee name		k		
	03/08/2015		Guitar Center				
6	Amount (\$)	7	Payee address; City; State; Zip	Code			
	\$37.10		8390 Westheimer Rd				
	Reimbursement from						
	X political contributions intended		Houston, TX 77063				
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b) Description	٦.	heck if travel outside of Texas. Complete Schedule T.	
ľ	OF	(")	Office Overhead/Rental Expense	(b) Description		heck if duver obtaine of rexas. Complete Schedule 1.	
	EXPENDITURE		Office Overhead/Nerital Expense	Microphone Star		•	
				Wherepriorie Star	ıu		
9	Complete ONLY if direct	Car	ndidate/Officeholder name	Office sought		Office held	
	expenditure to benefit			Omoc sought		Office field	
	C/OH						
	Date		Payee name				
	05/05/2015		Home Depot				
	Amount (\$)		Payee address; City; State; Zip	Code			
\$32.44 14085 Northwest Freeway							
	Reimbursement from						
	X political contributions intended		Houston, TX 77040				
	PURPOSE		Category (See Categories listed at the top of this schedule)	Description [] c	heck if travel outside of Texas. Complete Schedule T.	
	OF EXPENDITURE		Office Overhead/Rental Expense] c	heck if Austin, TX, officeholder living expense	
				Lights Office			
	Complete <u>ONLY</u> if direct expenditure to benefit	Car	ndidate/Officeholder name	Office sought		Office held	
	C/OH						
_							
	Date		Payee name				
	02/09/2015		Houston Area Urban League Young Professi	onals			
	Amount (\$)		Payee address; City; State; Zip	Code			
	\$106.49		1301 Texas Avenue				
	Reimbursement from political contributions						
	intended		Houston, TX 77002				
	PURPOSE		Category (See Categories listed at the top of this schedule)	Description [] c	heck if travel outside of Texas. Complete Schedule T.	
	OF EXPENDITURE		Event Expense		☐ c	heck if Austin, TX, officeholder living expense	
				State of Black H	ous	ton Event	
		Car	ndidate/Officeholder name	Office sought		Office held	
	expenditure to benefit C/OH						

SCHEDULE G

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

EXPENDITURE CATEGORIES FOR BOX 8(a) Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

		The Instruction Guide explains how to c	complete this form.	OTHER (enter a category not listed above)
1	Total pages Schedule G:	2 FILER NAME		3 Filer ID
	Sch: 7/21 Rpt: 97/112	Frazer, William		
4	Date	5 Payee name	· · · · · · · · · · · · · · · · · · ·	
	02/10/2015	Houston Area Urban League Young Professio	onals	
6	Amount (\$)	7 Payee address; City; State; Zip C	ode	
	\$106.49	1301 Texas Avenue		
	Reimbursement from political contributions intended	Houston, TX 77002		
8	PURPOSE		Tax s	
O	OF	(a) Category (see Categories listed at the top of this schedule) Event Expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	EXPENDITURE	Even Expense	State of Black H	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date	Payee name		
	05/05/2015	Houston Locksmith		
	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$16.24	10210 Westheimer Rd		
	Reimbursement from political contributions intended	Houston, TX 77077		
	PURPOSE OF	Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense		Check if Austin, TX, officeholder living expense
			Keys for office	
	Committee CNUV & Book	0 - 11 - 10 () - 11		
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date	Payee name		
	05/28/2015	Hughes Hangar		
	Amount (\$)	Payee address; City; State; Zip Co	ode	
	\$1,000.00	2811 Washington Ave		
	Reimbursement from political contributions intended	Houston, TX 77007		
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description [Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Solicitation/Fundraising Expense		Check if Austin, TX, officeholder living expense
	EXPERIENCE		Deposit	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica	ıl Co	mmittee Legal Services Si The Instruction Guide explains how		OTHER (enter a category not listed above)		
1	Total pages Schedule G:	2	FILER NAME	***************************************		3	Filer ID
	Sch: 8/21 Rpt: 98/112		Frazer, William				
4	Date	5	Payee name				
L	06/04/2015		Hughes Hangar				
6	Amount (\$)	7	Payee address; City; State; Z	Zip Co	de		
	\$1,468.30		2811 Washington Ave				
	Reimbursement from						
	x political contributions intended		Houston, TX 77007				
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedul	ile)	(b) Description	CI	neck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Solicitation/Fundraising Expense			CI	neck if Austin, TX, officeholder living expense
					Balance due		
9		Car	ndidate/Officeholder name		Office sought		Office held
	expenditure to benefit C/OH						
	C/OII						
	Date		Рауее пате				
	05/07/2015		Hunan's Restaurant				
	Amount (\$)		Payee address; City; State; Z	Zip Co	de		
	\$216.29		3835 Bellaire Blvd	•			
	Reimbursement from						
	x political contributions intended		Houston, TX 77025				
	PURPOSE		Category (See Categories listed at the top of this schedul	le)	Description	Cr	eck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Food/Beverage Expense			j cr	eck if Austin, TX, officeholder living expense
	EXPENDITURE				Precinct Chairs	_	
	Complete ONLY if direct	Car	ndidate/Officeholder name		Office sought		Office held
	expenditure to benefit				g		omee had
	C/OH	******					
	Date		Payee name				
	06/25/2015		InstantConference				
	Amount (\$)		Payee address; City; State; Z	in Co	40		
	\$6.04		PO Box 10067	-ip Co	uc		
			1 O Box 10007				
	X Reimbursement from political contributions						
	intended		Glendale, CA 91209				
	PURPOSE		Category (See Categories listed at the top of this schedule	le)	Description] Ch	eck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Office Overhead/Rental Expense			Ch	eck if Austin, TX, officeholder living expense
					Conference Call		
		Car	ndidate/Officeholder name	I	Office sought		Office held
	expenditure to benefit C/OH				Ū		
	COLL	******					
						_	

SCHEDULE G

				EXPENDITURE CAT	EGORIES FO	R BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Loan Re Office C Polling I Printing	payment/Reimbursement verhead/Rental Expense		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
				The Instruction Guide exp	lains how to d	omplete this form.				
1	Total pages Schedule G: Sch: 9/21 Rpt: 99/112		ILER NAME razer, Willia				3	Filer ID		
4	Date 02/18/2015	i	ayee name ntuit Inc.				L			
6	Amount (\$) \$39.44 Reimbursement from political contributions intended	C 28	Payee address; City; State; Zip Code Customer Communications 2800 E. Commerce Center Place Tucson, AZ 85706							
8	PURPOSE	(a) C	atenny (se	e Categories listed at the top of the	nie nebodule)	(h) Description F	7.0	book if translanding of Taylor Care late Call 1.1. T		
	OF EXPENDITURE			nead/Rental Expense	iis scriedule)	(b) Description [Payroll Processin] c	heck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candi	date/Officeh	older name		Office sought		Office held		
***********	Date	Pa	ayee name			·				
	03/17/2015		ituit Inc.							
	Amount (\$) \$39.44 X Reimbursement from political contributions intended	C:		ommunications nmerce Center Place	State; Zip C	ode				
					· · · · · · · · · · · · · · · · · · ·					
	PURPOSE OF EXPENDITURE			e Categories listed at the top of the lead/Rental Expense	iis schedu le)	Description Payroll Processir	C	heck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candio	date/Officeh	older name		Office sought		Office held		
	Date	Pa	ayee name							
	04/15/2015	In	tuit Inc.							
	Amount (\$)	Pa	ayee addres	s; City; S	State; Zip C	ode				
	\$39.44			ommunications						
	Reimbursement from	28	300 E. Con	nmerce Center Place						
	X political contributions intended		ucson, AZ							
	PURPOSE			Categories listed at the top of the	ic schodulo)	Description	7.0	heck if travel outside of Texas. Complete Schedule T.		
	OF			ead/Rental Expense	is scriedule)	Description	=	heck if Austin, TX, officeholder living expense		
	EXPENDITURE	0.	moo ovem	oudinternal Expense		Payroll Processir		,		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candio	date/Officeh	older name		Office sought		Office held		
	-									

SCHEDULE G

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica							
1	Total pages Schedule G: Sch: 10/21 Rpt:	2 FILER NAME Frazer, William			3 Filer ID			
4	Date ^ _ ^ ^	5 Payee name Intuit Inc.	·					
6	Amount (\$) 7 Payee address; City; State; Zip Code \$39.44 Customer Communications Reimbursement from political contributions intended Tucson, AZ 85706 Tucson, AZ 85706							
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Composition Check if Austin, TX, officeholder living of Payroll Processing						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought		Office held		
	Date 06/16/2015	Payee name Intuit Inc.						
	Amount (\$) \$39.44 Reimbursement from political contributions intended	Payee address; City; State; Customer Communications 2800 E. Commerce Center Place Tucson, AZ 85706	Zip Cod	e				
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedu Office Overhead/Rental Expense		Description	Check if Aus	el outside of Texas. Complete Schedule T. ttin, TX, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought		Office held		
	Date 06/24/2015	Payee name Jason's Deli						
	Amount (\$) \$96.96	Payee address; City; State; 5215 W. 34th St.	Zip Cod	e				
	Reimbursement from political contributions intended	Houston, TX 77092						
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedu Food/Beverage Expense		Description	Check if Aus	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought		Office held		
	10.411000000000000000000000000000000000							

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement Advertising Expense Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Contributions/ Donations Made By Travel in District Polling Expense Printing Expense Travel Out of District Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule G: 2 FILER NAME 3 Filer ID Frazer, William Sch: 11/21 Rpt: Date Payee name 06/19/2015 Kroger Amount (\$) Payee address; City; State; Zip Code 9325 Katy Freeway \$54.11 Reimbursement from political contributions intended Houston, TX 77024 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Solicitation/Fundraising Expense **EXPENDITURE** Flowers for event hosts Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/12/2015 Log Cabin Republicans Payee address; State; Zip Code City; Amount (\$) PO Box 131104 \$500.00 Reimbursement from political contributions intended X Houston, TX 77219 **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense **Event Expense EXPENDITURE Event Sponsorship** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/18/2015 Long Plan Printing & 3rd I Payee address; State; Zip Code Amount (\$) City; \$821.08 3029 Crossview Reimbursement from political contributions intended Houston, TX 77063 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Printing Expense **EXPENDITURE** Invitations Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH

SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Political		mmittee Leg	Awards/Memorials Expense al Services	Salaries/	Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
ļ				e Instruction Guide exp	Jams HUW (O C	ompiete tiils luffii.	
1	, , ,	2	FILER NAME				3 Filer ID
	Sch: 12/21 Rpt:		Frazer, William				
4	Date	5	Payee name				
	06/19/2015		Long Plan Prin	ting & 3rd I			
6	Amount (\$)	7	Payee address;	City;	State; Zip C	ode	
	\$365.00		3029 Crossvie	N			
	Reimbursement from						
	X political contributions intended		Houston, TX 7	7063			
8	PURPOSE	(a)	Category (See C	ategories listed at the top of	this schedule)	(b) Description [Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Printing Expen	se		ן נ	Check if Austin, TX, officeholder living expense
	LAF LINDH UKE	•				Invitations	
	į						
9		Car	ndidate/Officehold	er name		Office sought	Office held
	expenditure to benefit C/OH					-	
_	U/U/I						
	Date		Payee name				
	06/24/2015		Long Plan Prin	ting & 3rd I			
Г	Amount (\$)	T	Payee address;	City;	State; Zip C	ode	
	\$370.62		3029 Crossvie	- ·			
	Reimbursement from						
	X political contributions intended		Houston, TX 7	7063			
	PURPOSE	<u> </u>	Category (See C	ategories listed at the top of	this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Printing Exper	se		[Check if Austin, TX, officeholder living expense
						Invitations	
				<u> </u>	-		
		Cai	ndidate/Officeholo	ler name		Office sought	Office held
	expenditure to benefit C/OH						
_							
	Date		Payee name				
L	06/27/2015	L	Long Plan Prir	ting & 3rd I			
	Amount (\$)	Γ	Payee address;	City;	State; Zip C	ode	
	\$73.07		3029 Crossvie	w			
	Reimbursement from						
	X political contributions intended		Houston, TX 7	7063			
-	PURPOSE	T	Category (See C	ategories listed at the top of	this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF		Printing Exper	-	•		Check if Austin, TX, officeholder living expense
	EXPENDITURE		J 17-31			Invitations	
-	Complete ONLY if direct	Cai	ndidate/Officehol	ler name		Office sought	Office held
	expenditure to benefit		21.31			· · · · ਹ ਾ••	
	C/OH			****			
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SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Solicitation/Fundraising Expense Transportation Equipment & Related Expense Advertising Expense Event Expense Loan Repayment/Reimbursement Accounting/Banking Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Contributions/ Donations Made By Polling Expense Travel in District Printing Expense Travel Out of District Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule G: 2 FILER NAME 3 Filer ID Frazer, William Sch: 13/21 Rpt: Date Payee name 06/27/2015 Long Plan Printing & 3rd I Amount (\$) Payee address; City; State; Zip Code 3029 Crossview \$173.20 Reimbursement from political contributions intended Houston, TX 77063 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense **Printing Expense EXPENDITURE** Invitations Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/05/2015 Lowe's Home Centers LLC Amount (\$) Payee address; State; Zip Code City; 15555 FM 529 \$63.83 Reimbursement from political contributions intended Х Houston, TX 77095 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense **EXPENDITURE** Door Handle with Lock for Office Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/12/2015 Microsoft Corporation Payee address; Amount (\$) State; Zip Code City; \$204.67 One Microsoft Way Reimbursement from political contributions intended Redmond, WA 98052 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense **EXPENDITURE** Campaign email service Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- Git	od/Beverage Expense ft/Awards/Memorials Expense gal Services	Polling Ex Printing E Salaries		Travel in District Travel Out of District OTHER (enter a category not listed above)
		TI	he Instruction Guide explains l	now to co	omplete this form.	
1	Total pages Schedule G:	2 FILER NAME				3 Filer ID
	Sch: 14/21 Rpt:	Frazer, William	1			
4	Date	5 Payee name				
	06/30/2015	Mo's A Place	for Steaks			
6	Amount (\$)	7 Payee address;	City; State;	Zip Co	ode	
	\$1,716.38	1801 Post Oa	k Blvd			
	X Reimbursement from political contributions intended	Houston, TX 7	77056			
8	PURPOSE	(a) Category (See (Categories listed at the top of this sche	edule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Solicitation/Fu	ındraising Expense			Check if Austin, TX, officeholder living expense
					Fundraising	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officehol	der name		Office sought	Office held
	Date	Payee name				
	02/17/2015	NBD Graphics	s Inc			
	Amount (\$)	Payee address;	City; State;	Zip Co	ode	
	\$385.37	5502 1st Stree	et			
	Reimbursement from political contributions intended	Katy, TX 7749	93			
	PURPOSE	Category (See (Categories listed at the top of this sche	edule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Printing Exper	nse			Check if Austin, TX, officeholder living expense
					Banners & Signs	:
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officehol	der name		Office sought	Office held
	Date	Payee name	WHILE THE RESERVE TO THE RESERVE THE RESER			
	05/17/2015	Nation Builder	'S			
	Amount (\$)	Payee address;	City; State;	Zip Co	ode	
	\$49.00	520 S. Grand	Ave			
	Reimbursement from	2nd Floor				
	X political contributions intended	Los Angeles,	CA 90071			
	PURPOSE	Category (See 0	Categories listed at the top of this sche	edule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		ad/Rental Expense	:		Check if Austin, TX, officeholder living expense
	LAFENDITUKE		•		Website	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officehol	der name		Office sought	Office held
	rms provided by Toyon Fr	1.:	unus othico o			

SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	andidate/Officeholder/Politica			Gilt/Awaros/Memorial Legal Services The Instruction G	•		ages/Contract Labor		OTHER (enter a	trict category not listed a	bove)
1	pages Schedule G: 15/21 Rpt:		FILER NAME Frazer, Willia					3	Filer ID		
	7/2015		Payee name Nation Build								
Х	\$49.00 Reimbursement from political contributions intended	7	Payee address 520 S. Gran 2nd Floor Los Angeles	d Ave	State;	Zip Co	de				
8 P	URPOSE OF PENDITURE	(a)	Category (Se	e Categories listed at nead/Rental Ex	•	dule)	(b) Description Website			de of Texas. Comple officeholder living ex	
	nditure to benefit	Car	ididate/Officeh	older name			Office sought		O ⁻	ffice held	
Date 02/1	7/2015		Payee name Nation Build	ers							
[X]	unt (\$) \$58.00 Reimbursement from political contributions intended		Payee addres 520 S. Gran 2nd Floor Los Angeles	d Ave	State;	Zip Co	de				
	URPOSE OF PENDITURE			e Categories listed at nead/Rental Ex		edule)	Description Website			de of Texas. Comple	
	nditure to benefit	Car	ndidate/Officeh	older name			Office sought		O	ffice held	
Date 03/1	7/2015		Payee name Nation Build	ers							
[X]	\$49.00 \$49.00 Reimbursement from political contributions ntended		Payee address 520 S. Gran 2nd Floor Los Angeles	d Ave	State;	Zip Co	de				
	URPOSE OF PENDITURE			e Categories listed at nead/Rental Ex		edule)	Description Website			de of Texas. Comple officeholder living ex	
	nditure to benefit	Car	ididate/Officeh	older name			Office sought		O	ffice held	

SCHEDULE G

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explair		Expense Wages/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G:	2 FILER NAM	E			3 Filer ID
	Sch: 16/21 Rpt:	Frazer, Will				
4	Date	5 Payee name	9			
	04/17/2015	Nation Bui	lders			
6	Amount (\$)	7 Payee addre	ess; City; Sta	te; Zip C	ode	
	\$49.00	520 S. Gra	and Ave			
	Reimbursement from	2nd Floor				
	X political contributions intended	Los Angele	es, CA 90071			
8	PURPOSE	(a) Category (See Categories listed at the top of this s	chedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Office Ove	rhead/Rental Expense			Check if Austin, TX, officeholder living expense
					Website	
Ļ						
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Office	eholder name		Office sought	Office held
	Date	Payee name				
	04/26/2015	Office Dep				
	Amount (\$)	Payee addre	ess; City; Stat	te; Zip C	ode	
	\$173.09	1401 North	Loop West			
	Reimbursement from political contributions intended	Houston, T	X 77008			
	PURPOSE	Category (s	See Categories listed at the top of this s	chedule)	Description [Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Office Ove	rhead/Rental Expense			Check if Austin, TX, officeholder living expense
					Computer equip	ment
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Office	eholder name		Office sought	Office held
	Date	Payee name	}			
	06/29/2015	Office Dep	ot			
	Amount (\$)	Payee addre	ess; City; Stat	e; Zip C	ode	
	\$65.99	10217 Katy	/ Freeway			
	Reimbursement from					
	X political contributions intended	Houston, T	X 77024			
	PURPOSE OF	Category (s	See Categories listed at the top of this s	chedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Ove	rhead/Rental Expense			Check if Austin, TX, officeholder living expense
					Name Tags	
	Complete ONLY if direct	Landidate/Office	holder name		Office sought	Office held
	expenditure to benefit C/OH		Mediasi Mame		Office Sought	Office Held
-						

SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica		mmittee	Legal Services The Instruction Guide	Salarie	g Expense s/Wages/Contract Labor complete this form	OTHER (enter a category not listed above)
l_	T. (1				- CAPIGINO NON 10		
1	Total pages Schedule G:	2	FILER NAME				3 Filer ID
	Sch: 17/21 Rpt:		Frazer, Willi	am			
4	Date	5	Payee name				
	05/05/2015		Office Depo	ot			
6	Amount (\$)	7	Payee addre	ss; City;	State; Zip	Code	
	\$24.89		7018 Highw	=			
	Reimbursement from		J				
	X political contributions intended		Copperfield	, TX 77095			
8	PURPOSE	(a)	Category (s	ee Categories listed at the to	p of this schedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.
	OF		Printing Exp	pense			Check if Austin, TX, officeholder living expense
	EXPENDITURE		J ,			Office Depot - n	nametags
							_
9	Complete ONLY if direct	L Car	ndidate/Office	holder name		Office sought	Office held
	expenditure to benefit					o moo boogin	Ollido Hold
	C/OH						
	Date		Payee name				
	01/05/2015		Owens, Phi				
-			Payee addre		State: 7in	Codo	
	Amount (\$)		•		State; Zip	Code	
	\$1,500.00		TOSST GIEL	field Park Lane			
	X Reimbursement from political contributions						
	intended		Houston, T	X 77070			
	PURPOSE		Category (s	ee Categories listed at the to	p of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Consulting	Expense			Check if Austin, TX, officeholder living expense
	EXITERATIONE					Consulting	
	Complete ONLY if direct	Car	ndidate/Office	holder name		Office sought	Office held
İ	expenditure to benefit					-	
	C/OH						
	Date		Payee name				
	02/03/2015		Owens, Phi	lip G. (Mr.)			
┢	Amount (\$)		Payee addre		State; Zip	Code	
	\$3,000.00		•	field Park Lane	Oldio, Lip	0000	
			10201 0101	mora i din Laire			
	Reimbursement from political contributions						
	Intended		Houston, T	X 77070			
	PURPOSE OF		Category (s	ee Categories listed at the to	p of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Consulting	Expense			Check if Austin, TX, officeholder living expense
						Consulting	
		Car	ndidate/Office	holder name		Office sought	Office held
	expenditure to benefit C/OH					-	
	UUT						
<u> </u>							

SCHEDULE G

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee			Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains		Expense Wages/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not	t listed above)
_	7.1 01.11.0		-		ompiete tina torin,	I	
1	Total pages Schedule G: Sch: 18/21 Rpt:	2 FILER NAM Frazer, Will				3 Filer ID	
4	Date	5 Payee name	Э	······································			
	04/09/2015	Pizzitolas					
6	Amount (\$)	7 Payee addr	ess; City; State	; Zip Co	ode		
	\$73.67	1703 Sher	herd Dr.				
	Reimbursement from political contributions intended	Houston, 1	TX 77007				
8	PURPOSE	(a) Category (See Categories listed at the top of this sch	nedule)	(b) Description	Check if travel outside of Texas.	Complete Schedule T.
	OF EXPENDITURE	Food/Beve	erage Expense			Check if Austin, TX, officeholder	living expense
					Supporter Lunch		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Office	eholder name		Office sought	Office held	
	Date	Payee name	9				
	06/29/2015	Randy Gla	sbergen Cartoons				
┢	Amount (\$)	Payee addr	ess; City; State	; Zip Cı	ode		
	\$85.00	4 Chapel S	St				
	Reimbursement from						
	X political contributions intended	Sherburne	, NY 13460				
	PURPOSE	Category (See Categories listed at the top of this sch	nedule)	Description	Check if travel outside of Texas.	Complete Schedule T.
	OF EXPENDITURE	Printing Ex	rpense			Check if Austin, TX, officeholder	living expense
	harte builter 1 College				Publishing Right	s	
		Candidate/Office	eholder name		Office sought	Office held	
	expenditure to benefit C/OH						
	Data	I _					
	Date 04/15/2015	Payee name					
		<u></u>	ersity Athletics				
	Amount (\$)	Payee addr	· · · · · · · · · · · · · · · · · · ·	; Zip C	ode		
	\$1,320.00	PO Box 18	392				
	Reimbursement from political contributions	MS-548					
	intended	Houston, 1	X 77251				
	PURPOSE OF	Category (See Categories listed at the top of this sch	nedule)	Description [Check if travel outside of Texas.	•
	EXPENDITURE	Solicitation	/Fundraising Expense		L	Check if Austin, TX, officeholder	living expense
					Fundraising		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Office	eholder name		Office sought	Office held	

SCHEDULE G

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica		Gift/Awards/Memorials Expense Printing I mmittee Legal Services Salaries/	Expense Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
			The Instruction Guide explains how to c	omplete this form.	,
1	Total pages Schedule G:	2	FILER NAME		3 Filer ID
	Sch: 19/21 Rpt:		Frazer, William		
4	Date	5	Payee name	***************************************	
	06/05/2015		Skeeter's		
6	Amount (\$)	17	Payee address; City; State; Zip C	nde	
	\$67.01		4121 W. Lake Houston Pkwy	ouc	
	Reimbursement from				
	x political contributions intended		Kingwood, TX 77339		
8	PURPOSE	(2)		Tay Barrier F	
ľ	OF	(a	Category (See Categories listed at the top of this schedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	EXPENDITURE		Food/Beverage Expense	Kingwood Precin	
				Tungwood Freem	of Grian Event
9	Complete ONLY if direct	Car	ndidate/Officeholder name	Office sought	Office held
	expenditure to benefit			Omoc sought	Office field
	C/OH				
	Date	Π	Payee name		
	01/24/2015		Speedy Printing		
	Amount (\$)	T	Payee address; City; State; Zip C	ode	
	\$108.25		3433 W Alabama		
	Reimbursement from		Suite C		
	X political contributions intended		Houston, TX 77027		
_	PURPOSE	┢	Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.
ĺ	OF EXPENDITURE		Printing Expense		Check if Austin, TX, officeholder living expense
	EXPENDITURE		- '	Business Cards	
		Ca	ndidate/Officeholder name	Office sought	Office held
	expenditure to benefit C/OH				
\vdash					
	Date		Payee name		
	03/28/2015		Speedy Printing		
	Amount (\$)		Payee address; City; State; Zip C	ode	
	\$196.40		3433 W Alabama		
	Reimbursement from political contributions		Suite C		
	intended		Houston, TX 77027		
	PURPOSE	Π	Category (See Categories listed at the top of this schedule)	Description [Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Printing Expense		Check if Austin, TX, officeholder living expense
				Business Cards	
		Cai	ndidate/Officeholder name	Office sought	Office held
	expenditure to benefit C/OH				

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
TTHER (order a set of the property of the property)

	Candidate/Officeholder/Politica	al Committee Legal Services Salaries\(\text{A}\) The Instruction Guide explains how to compare the compared of the compared o	Wages/Contract Labor OTHER (enter a category not listed above) Omplete this form.
1	Total pages Schedule G: Sch: 20/21 Rpt:	2 FILER NAME Frazer, William	3 Filer ID
4	Date		
	04/21/2015	5 Payee name Theo's Restaurant	
-	Amount (\$)	7 Payee address; City; State; Zip Co	nda
ľ	\$358.58	812 Westheimer Rd	ouc.
	Reimbursement from political contributions intended	Houston, TX 77006	
8	PURPOSE		(h) Description Total (to de vide (to de v
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	EXPENDITURE	1 dourbeverage Experise	Precinct Chair Meeting
			j
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
F	Date	Payee name	
	06/12/2015	Thomas Printworks	
H	Amount (\$)	Payee address; City; State; Zip Co	ode
	\$35.72	4235 Richmond Ave	
	Reimbursement from political contributions intended	Houston, TX 77027	
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Printing Expense	Check if Austin, TX, officeholder living expense
			District Maps
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
	Date	Payee name	
	05/05/2015	Thomas Printworks	
-	Amount (\$)	Payee address; City; State; Zip Co	ode
	\$323.45	4235 Richmond Ave	
	Reimbursement from political contributions intended	Houston, TX 77027	
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Printing Expense	Check if Austin, TX, officeholder living expense
			District Maps
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Fees Office Overhead/Rental Expense Polling Expense Consulting Expense Contributions/ Donations Made By -Food/Beverage Expense Gitt/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor Travel Out of District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule G: 2 FILER NAME 3 Filer ID Frazer, William Sch: 21/21 Rpt: 4 Date Payee name 05/05/2015 Walmart Amount (\$) Payee address; City; State; Zip Code \$125.16 7075 FM 1960 Rd W Reimbursement from political contributions intended Houston, TX 77069 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense **EXPENDITURE** Office Supplies Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 112/112 2 FILER NAME 3 Filer ID Frazer, William Date 5 Name of person from whom amount is received 8 Amount (\$) 03/28/2015 City of Houston \$100.00 6 Address of person from whom amount is received; City; State; Zip Code PO Box 1562 Houston, TX 77251 Purpose for which amount is received ☐ Check if political contribution returned to filer Refund of Deposit