CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form			1 Filer ID(Ethics Commission filers) 2 Total pages filed			
3 CANDIDATE /	MS/MRS/MR	FIRST	MI			E USE ONLY
OFFICEHOLDER	Mr.	Larry			Date Received	
NAME	NICKNAME	LAST	SUFFIX		10/5/2015	
		Green				
4 CANDIDATE /	ADDRESS / PO BOX;	APT/SUITE #; CITY	Y; STATE;	ZIP CODE		
OFFICEHOLDER	3911 Knotty Oaks					
MAILING					Date Hand-delivered	d or Date Postmarked
ADDRESS	Houston Texas 77045					
Change of address						
5 CANDIDATE /	AREA CODE	PHONE NUMBER	EXTENSIO	N		
OFFICEHOLDER						
PHONE						-
6 CAMPAIGN	MS/MRS/MR	FIRST	MI		Receipt #	Amount
TREASURER	Mr.	Kevin	Riles		Date Processed	l
NAME	NICKNAME	LAST	SUFFIX		Date Imaged	
7 CAMPAIGN	STREET ADDRESS (No PO Box Pleas	se);	APT/SUIT	E#;	CITY; STATE;	ZIP CODE
TREASURER	14090 Southwest Freew	vay				
ADDRESS		2				
(Resident or business)	Sugarland Texas 7747	'8				
8 CAMPAIGN	AREA CODE	PHONE NUMBER	EXTENSIO	NC		
TREASURER PHONE	(281) 451-8437					
	January 15 X 30th day bef	ore election	al repport (Attach	C/OH - FR)	Exceeded \$500 limit	
9 REPORT TYPE				, L	1	
	July 15 8th day befo	re election Ru	noff		15th day after campaign tr	easurer appointment(officeholder only)
10 PERIOD	Month Day	Year			Month Da	ay Year
COVERED	7/1/2015		THROUGH	-	9/24/	2015
11 ELECTION	ELECTION DATE	ELECTIO	N TYPE			
	Month Day Year			5 "		
	11/3/2015	Primary		Runoff	χ General	Special
12 OFFICE	OFFICE HELD (if any)		13	OFFICE SOUG	iHT (if known)	
	City Council - District K			City Coun	ncil - District K	

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM	C/OH
 <u> </u>	

14 FILER NAME Larry Green

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

	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures.					
16 NOTICE FROM	COMMITTEE TYPE	COMMITTEE NAME				
POLITICAL COMMITTEE(S)		COMMITTEE ADDRESS				
		COMMITTEE CAMPAIGN TREASURER NAME				
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS				
17 CONTRIBUTION TOTALS		AL CONTRIBUTIONS OF \$50 OR LESS (NS, OR GUARANTEES OF LOANS), UNI		\$		
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES C	OF LOANS)	\$18,100.00		
EXPENDITURE TOTALS	3 TOTAL POLITIC	AL EXPENDITURES OF \$100 OR LESS,	UNLESS ITEMIZED	\$		
	4 TOTAL POLITIC	AL EXPENDITURES		\$29,247.65		
CONTRIBUTION BALANCE	5 TOTAL POLITIC OF REPORTING	AL CONTRIBUTIONS MAINTAINED AS (PERIOD	DF THE LAST DAY	\$125,970.13		
OUTSTANDING LOAN TOTALS	0	AL AMOUNT OF ALL OUTSTANDING LO HE REPORTING PERIOD	DANS AS OF THE	\$		
18 AFFIDAVIT				•		
		report is true	ffirm, under penalty of perjury, th and correct and includes all info ne under Title 15, Election Code	prmation required to be		
			Larry Green			
			Signature of Candidate or	Officeholder		
AFFIX NOT STAMP / SE	AL ABOVE					
	-	I		day		
of	, 20	, to certify which, witness my	hand and seal of office.			
Signature of officer admi	nistering oath	Print name of officer administering	oath Title of officer	administering oath		

SUBTOTALS - COH

FORM C/OH COVER SHEET PG 3

19 F	٦I	ER NAME Larry Green	20 Filer ID (Ethics Commission Filers)
21	S	CHEDULE SUBTOTALS	SUBTOTAL
	Ν	AME OF SCHEDULE	AMOUNT
1		SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	18,100
2	Γ	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	
3		SCHEDULE B: PLEDGED CONTRIBUTIONS	
4	Γ	SCHEDULE E: LOANS	
5	Γ	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	29,247.65
6	Γ	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	
7	Γ	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLICITAL CONTRIBUTION	NS
8	Γ	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	
9	Π	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF	F C/OH
10	Γ	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRI	BUTIONS
11	Γ	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RI	ETURNED TO FILER

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

C/OH NAME Larry Green

FORM C/OH ADDENDUM

ACCOUNT # (Ethics Commission filers)

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE	A1
----------	----

The Instructi	on Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:
FILER NA	ME Larry Green			3 Filer ID (Ethics Commission filers)
Date	5 Full name of contributor	out of state	 PAC(ID#_)	
Duto				7 Amount of contributions (f)
	Acie O Phillips			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
		Missouri City	TX 77459	\$1,000.00
Principa	I occupation / Job title (See Instructions)		9 Employer (See Instruc	
Principa				
Date	5 Full name of contributor	out of state	PAC(ID#)	
	One World Strategy Group			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
		Houston	TX 77254	\$500.00
Principa	al occupation / Job title (See Instructions)		9 Employer (See Instruc	L ctions)
Date	5 Full name of contributor	out of state	PAC(ID#)	
	Scott Burch			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
		Dallas	TX 75220	\$1,000.00
Principa	al occupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Date	5 Full name of contributor	out of state	PAC(ID#_)	
	John J Avlon		- \ /	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	•
		Charleston	SC 29401	\$5,000.00
Principa	I occupation / Job title (See Instructions)		9 Employer (See Instruc	stions)
Date	5 Full name of contributor	out of state	PAC(ID#)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE	A1
----------	----

The Instruction G	Buide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FILER NAME L	arry Green			3 Filer ID (Ethics Commission filers)
	Theldon R Branch			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/5/2015		Houston	TX 77025	2,500.00
Principal occu	upation / Job title (See Instructions)		9 Employer (See Instrue	ctions)
Date	5 Full name of contributor	out of state I	PAC(ID#)	
	Paula McHam			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
7/31/2015		Houston	TX 77095	100.00
Principal occu	upation / Job title (See Instructions)		9 Employer (See Instrue	ctions)
Date	5 Full name of contributor	out of state I	PAC(ID#)	
	Political Action Committee of Winstead PC			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/14/2015		Dallas	TX 75201	1,000.00
Principal occu	upation / Job title (See Instructions)		9 Employer (See Instrue	ctions)
Date	5 Full name of contributor	out of state I	PAC(ID#)	
	Cigna PAC			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/27/2015		Washington	DC 20004	1,000.00
Principal occu	upation / Job title (See Instructions)		9 Employer (See Instrue	ctions)
Date	5 Full name of contributor	out of state I	PAC(ID#)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE	A1
----------	----

The Instru	uction G	uide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FILER I	NAME L	arry Green			3 Filer ID (Ethics Commission filers)
		James Donatto			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	-
8/25/2	2015		Houston	TX 77004	500.00
8 Prin	cipal occu	pation / Job title (See Instructions)		9 Employer (See Instru	ctions)
4 Date	9	5 Full name of contributor ACEC Houston PAC	out of state	PAC(ID#)	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	-
8/25/2	2015		Houston	TX 77018	3,000.00
8 Prin	cipal occu	pation / Job title (See Instructions)		9 Employer (See Instru	ctions)
4 Date	e	5 Full name of contributor Raquel Olivier	out of state	PAC(ID#)	7 Amount of contributions (\$)
8/20/2	2015	6 Contributor address;	City; Houston	State; Zip Code TX 77016	- 1,000.00
8 Prin	cipal occu	pation / Job title (See Instructions)		9 Employer (See Instru-	ctions)
4 Date	e	5 Full name of contributor Jack Ricchiuto	out of state	PAC(ID#)	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	-
9/22/2	2015		Cleveland	OH 44114	1,000.00
8 Prin	cipal occu	pation / Job title (See Instructions)		9 Employer (See Instru-	ctions)
4 Date	9	5 Full name of contributor Christine Willie	out of state	PAC(ID#)	7 Amount of contributions (\$) 7 of 57

MONETAR	Y POLITICAL CONTRIBUTIO	SCHEDULE A1	
The Instruction C	Guide explains how to complete this form.		1 Total Pages Schedule A1:
2 FILER NAME	Larry Green		3 Filer ID (Ethics Commission filers)
8/10/2015	6 Contributor address; City;	State; Zip Code	500.00
8 Principal occ	upation / Job title (See Instructions)	9 Employer (See Instruc	tions)
	ATTACH ADDITIONAL COPI	ES OF THIS SCHEDULI	E AS NEEDED
	If contributor is out-of-state PAC, please see	instruction guide for additio	nal reporting requirements

NON-MONETARY (IN-KIND) POLITICAL

CO	NTRIBU ⁻	TIONS							
The	The Instruction Guide explains how to complete this form.					1	Total Pages Sch	edule A2:	
2 FIL	ER NAME L	arry Green				3 Fi	3 Filer ID (Ethics Commission filers)		
4 TC	TAL OF UN	ITEMIZED IN-KIND POLITIC	AL CONTRIBUT	TIONS		\$			
5	Date	6 Full name of contributor 7 Contributor address;	City;	PAC(ID#) State;	Zip Code	8	Amount of contributions (\$) Check if travel outsic	9 In-Kind contribution description le of Texas, complete	
10	Principal occu	pation / Job title (See Instructions)		11 Emplo	yer (See Instru	ction	Schedule T s)		
	-	ATTACH ADDITIC							
								40	
		If contributor is out-of-state PA	c, please see inst	ruction gu	ide for additio	nai re	eporting requirement	IS	

SCHEDULE A2

PL	LEDGED CONTRIBUTIONS							SCHEDULE B
The	Instruction	Guide explains how to compl	ete this form.			1	Total Pages Sche	dule B:
2 FI	_ER NAME	Larry Green				3 Filer ID (Ethics Commission filers)		
4	TOTAL C	OF UNITEMIZED PLEDGES:	=> => =>	> => => =>				
5	Date	6 Full name of pledgor 7 Pledgor address;	City;	PAC(ID#) State;	Zip Code	8	Amount of pledge (\$)	9. In-Kind contribution description
							Check if travel outsid Schedule T	de of Texas, complete
10 Principal occupation / Job title (See Instructions)			11 Employe	er (See Instru	ctior	ns)		
		ATTACH ADDIT	IONAL COPIES	OF THIS SC	HEDULE	٩S	NEEDED	
	If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements							

LO	ANS						SCHEDULE E
	The	Instruction Guide explains how	to complete this	form.		1 T	otal Pages Schedule E:
2 FI	LER NAME Lar	ry Green				3 F	iler ID (Ethics Commission filers)
4	TOTAL	OF UNITEMIZED LOANS:	=> => => =	> => =	>		
5	Date of loan	7 Name of lender	out of state PAC(IE)#)		9	Loan Amount (\$)
6	Is Lender a Financial	8 Lender Address;	City;	State;	Zip Code	10	Interest rate
	Institution?					11	Maturity date
12	Principal occu	upation / Job title (See Instruct	ions)	13 Emp	loyer (See Instru	uctions)	
14	Description o	f collateral		15	Check if perso (See instruction		ds were deposited into political account
[none						
16	GUARANTOR	17 Name of guarantor				19	Amount Guaranteed (\$)
[not applicable	18 Guarantor address;	City;	State;	Zip Code		
20 Principal Occupation 21 Employer				loyer	,		
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If lender is out-of-state PAC, please see instruction guide for additional reporting requirements						

	The Instruction Guide e	xplains how to com	plete this form.				
1 Total pages Schedule F1:	² FILER NAME Larry Green		3 Filer ID (Ethics Commission filers)				
4 Date	5 Payee name						
7/8/2015	Honey Brown Hope Founda	Honey Brown Hope Foundation					
6 Amount (\$)	7 Payee address; City;	State; Zip	o Code				
500.00	P.O. Box 1044						
	Stafford TX 77497						
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description					
		Check if trav	vel outside of Texas, complete Schedule T				
		Check if Aus	stin, TX, officeholder living expense				
	Contributions/Donations	Gal	la Donation				
	Made By Candidate/Officeholder/Politi	i					
	cal Committee						
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held				
4 Date	5 Payee name						
7/8/2015	KLM Public Affairs, LLC						
6 Amount (\$)	7 Payee address; City;	State; Zip	o Code				
750.00	2028 Buffalo Terrace						
	Houston TX 77019						
8 PURPOSE OF EXPENDITURE		(b) Description					
			vel outside of Texas, complete Schedule T				
			stin, TX, officeholder living expense				
	Consulting Expense		mpaign Consulting				
			inpugn concurring				
9 Complete ONLY if direct	Candidate / Officehoder name	office sought	office held				
expendituree to benefit C/OH		-					
4 Date	5 Payee name						
7/15/2015	Elite Change, Inc.						
6 Amount (\$)	7 Pavee address: Citv:	State: Zir	2 Code				

7/15/2015	Elite Change, Inc.	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
500.00	315 W. Alabama	
	Suite 103	
	Houston TX 77006	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F1:	² FILER NAME Larry Green		3 Filer ID (Ethics Commission filers)				
	Consulting Expense						
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought of	ffice held				
4 Date	5 Payee name						
7/23/2015	PACE Moms						
6 Amount (\$) 1,000.00	7 Payee address; City;	State; Zip Code					
8 PURPOSE OF EXPENDITURE	(a) Category Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee	(b) Description Check if travel outside of Te Check if Austin, TX, officeho Back to School Driv	older living expense				
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought of	ffice held				

		xplains how to complete this form.	
1 Total pages Schedule F1:	² FILER NAME Larry Green	3 Filer ID (Ethics Commission filers	;)
4 Date	5 Payee name		
7/15/2015	Elite Change, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
500.00	315 W. Alabama		
	Suite 103		
	Houston TX 77006		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Texas, complete Schedule T	
		Check if Austin, TX, officeholder living expense	
	Consulting Expense	Fundraising Consulting	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held	
4 Date	5 Payee name		
7/22/2015	WWGC Music Fest		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1,000.00	11415 Chimney Rock		
	Suite 201		
	Houston TX 77035		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Texas, complete Schedule T	
		Check if Austin, TX, officeholder living expense	
	Contributions/Donations	Donation	
	Made By Candidate/Officeholder/Politi		
	cal Committee		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held	
4 Date	5 Payee name		
8/18/2015	City of Houston		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1,500.00	900 Bagby		
	Houston TX 77002		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

The Instruction Guide explains how to complete this form.						
1 Total pages Schedule F1:	² FILER NAME Larry Green		3 Filer ID (Ethics Commission filers)			
	Office Overhead/Rental Expense	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense City Council Office Supplies				
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name c	ffice sought of	ffice held			
4 Date	5 Payee name					
7/27/2015	India House					
6 Amount (\$)	7 Payee address; City;	State; Zip Code				
250.00	8888 West Bellfort Houston TX 77301					
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description				
	Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee	Check if travel outside of Te Check if Austin, TX, officeho Back to School Driv	older living expense			
 9 Complete ONLY if direct expendituree to benefit C/OH 	Candidate / Officehoder name c	ffice sought of	ffice held			

			a a man la ta thia fa m	-
1 Total pages Schedule F1:	The Instruction Guide ex	plains now to	complete this form	
	² FILER NAME Larry Green			3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name			
7/27/2015	UHAA			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
250.00				
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	n	
		Check i	f travel outside of T	exas, complete Schedule T
		Check i	f Austin, TX, officeh	older living expense
	Contributions/Donations		Golf Tournament	
	Made By Candidate/Officeholder/Politi			
	cal Committee			
9 Complete ONLY if direct	Candidate / Officehoder name	office sought	(office held
expendituree to benefit C/OH				
4 Date	5 Payee name			
7/28/2015	Coalition of Black Trade Uni	onists		
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
200.00	2000 North Loop West			
	Suite 132			
	Houston TX 77018			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	n	
		Check i	f travel outside of T	exas, complete Schedule T
		Check i	if Austin, TX, officeh	older living expense
	Contributions/Donations		Annual Golf Tourn	ament & Scholarship Fundraiser
	Made By			
	Candidate/Officeholder/Politi cal Committee			
9 Complete ONLY if direct		 office sought	(office held
expendituree to benefit C/OH				
4 Date	5 Payee name			
8/10/2015	Jewish Herald Voice			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
660.00	3403 Audley St.			

Houston TX 77098

The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F1:	² FILER NAME Larry Green		3 Filer ID (Ethics Commission filers)				
	Advertising Expense	Check if travel outside of Te Check if Austin, TX, officeho Advertisement					
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held				
4 Date	5 Payee name						
8/13/2015	Madison Sports Club						
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
190.00	P.O. Box 450902 Houston TX 77425						
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description					
	Advertising Expense	Check if travel outside of Te Check if Austin, TX, officeho Advertisement					
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held				

The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F1:	² FILER NAME Larry Green	3 Filer ID (Ethics Commission filers)					
4 Date	5 Payee name						
8/16/2015	Donald Perkins						
6 Amount (\$) 1,000.00	7 Payee address; City;	State; Zip Code					
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description					
	Salaries/Wages/Contract Labor	Check if Austin, TX, officeholder living expense Campaign Signs					
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held					
4 Date	5 Payee name						
8/14/2015	Elite Change, Inc.						
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
500.00	315 W. Alabama						
	Suite 103						
	Houston TX 77006						
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description					
		Check if travel outside of Texas, complete Schedule T					
		Check if Austin, TX, officeholder living expense					
	Consulting Expense	Fundraising Consulting					
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held					
4 Date	5 Payee name						
8/24/2015	Texas Black Expo						

8/24/2015	Texas Black Ex	ρο			
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code	
1,500.00	9494 SouthWest	Freeway			
	Suite 650				
	Houston TX 770)74			
8 PURPOSE OF EXPENDITURE	(a) Category		(b) Descriptio	n	

The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F1:	² FILER NAME Larry Green		3 Filer ID (Ethics Commission filers)				
	Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee	y ate/Officeholder/Politi					
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name c	office sought of	fice held				
4 Date 8/10/2015	5 Payee name Ines Ariza						
6 Amount (\$) 300.00	7 Payee address; City;	State; Zip Code					
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description Check if travel outside of Te Check if Austin, TX, officeho Summer Band Carr	older living expense				
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name c	office sought of	fice held				

The Instruction Guide explains how to complete this form.						
1 Total pages Schedule F1:	² FILER NAME Larry Green		3 Filer ID (Ethics Commission filers)			
4 Date	5 Payee name					
8/21/2015	David Green					
6 Amount (\$)	7 Payee address; City;	State; Zip Code				
4,000.00	7 rayee address, City,					
8 PURPOSE OF EXPENDITURE	(a) Category Salaries/Wages/Contract Labor		of Texas, complete Schedule T ceholder living expense ns			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	ffice sought	office held			
4 Date	5 Payee name					
9/16/2015	Constable May Walker Law	Enforcement Scholarship	Fund			
6 Amount (\$)	7 Payee address; City;	State; Zip Code				
350.00	3810 Belgrade					
	Houston TX 77045					
8 PURPOSE OF EXPENDITURE	(a) Category Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee		of Texas, complete Schedule T ceholder living expense ent			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	ffice sought	office held			
4 Date	5 Payee name					
8/24/2015	Alpha Merit Educational Gro	up Foundation				
6 Amount (\$)	7 Payee address; City;	State; Zip Code				

The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F1:	² FILER NAME Larry Green		3 Filer ID (Ethics Commission filers)						
	Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee	Check if travel outside of Te Check if Austin, TX, officeho Laptop Drive							
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought o	ffice held						
4 Date	5 Payee name								
8/24/2015	Metro Southeast Houston Ch	apter- NWOA							
6 Amount (\$)	7 Payee address; City;	State; Zip Code							
450.00	3426 Southmore Blvd. Houston TX 77004								
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description							
	Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee	Check if travel outside of Te Check if Austin, TX, officeho Awards Lucheon							
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought o	ffice held						

POLITICAL EXPENDITURES

FROM POLITICAL	CONTRIBUTIONS	SCHEDULE F1
	The Instruction Guid	e explains how to complete this form.
1 Total pages Schedule F1:	² FILER NAME Larry Greer	a Filer ID (Ethics Commission filers)
4 Date	5 Payee name	
8/26/2015	DLW Scholarship & Char	itable Foundation, Inc.
6 Amount (\$)	7 Payee address; City;	State; Zip Code
100.00	8325 Broadway	
	Suite 202 #119	
	Pearland TX 77581	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
	Advertising Expense	Advertisement
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held
4 Date	5 Payee name	
9/2/2015	Elite Change, Inc.	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
500.00	315 W. Alabama	
	Suite 103	
	Houston TX 77006	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
	Consulting Expense	Fundraising Consulting
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held
4 Date	5 Payee name	
9/2/2015	Elite Change, Inc.	

9/2/2015	Elite Change, Inc.								
6 Amount (\$)	7 Payee address; City;	Payee address; City; State; Zip Code							
3,117.64	315 W. Alabama								
	Suite 103								
	Houston TX 77006								
8 PURPOSE OF EXPENDITURE	(a) Category (b) Description								

The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F1:	² FILER NAME Larry Green	3 Filer ID (Ethics Commission filers)							
	Consulting Expense	Check if travel outside of Te Check if Austin, TX, officeho Campaign Consulti	older living expense						
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name office sought office held								
4 Date	5 Payee name								
9/10/2015	Honesty Construction Group								
6 Amount (\$)	7 Payee address; City; State; Zip Code								
142.66	315 W. Alabama								
	Suite 104								
	Houston TX 77006								
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description							
		Check if travel outside of Te	exas, complete Schedule T						
		Check if Austin, TX, officeho	older living expense						
	Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee	Senior Constituent	Home Repair						
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held						

	The Instruction Guide ex	nlains how to	complete this form	n
1 Total pages Schedule F1:	² FILER NAME Larry Green			3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name			
9/16/2015	KPC Ladies CT. #248			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
400.00	930 Turtle Creek Dr.			
	Missouri City TX 77489			
8 PURPOSE OF EXPENDITURE	(a) Category Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee	Check if	travel outside of Te	exas, complete Schedule T older living expense
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	c	office held
4 Date	5 Payee name			
9/16/2015	Donald Perkins			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
29.95	900 Bagby			
	1st floor			
	Houston TX 77002			
8 PURPOSE OF EXPENDITURE	(a) Category Loan Repayment/Reimbursement	Check if	travel outside of Te	exas, complete Schedule T older living expense in District
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	C	office held
4 Date	5 Payee name			
9/23/2015	Donald Perkins			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
13.70	900 Bagby 1st floor Houston TX 77001			

8 PURPOSE OF EXPENDITURE (a) Category

The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F1:	² FILER NAME Larry Green		3 Filer ID (Ethics Commission filers)						
	Loan Repayment/Reimbursement	Check if travel outside of Tex Check if Austin, TX, officeho Coffe and Donuts in	lder living expense						
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought of	fice held						
4 Date	5 Payee name								
9/16/2015	Bee Busy Wellness Center								
6 Amount (\$)	7 Payee address; City;	State; Zip Code							
200.00	8785 West Bellfort Houston TX 77031								
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description							
	Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee	Check if travel outside of Tex Check if Austin, TX, officeho Turkey Giveaway							
9 Complete ONLY if direct expendituree to benefit C/OH		ffice sought of	fice held						

The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F1:	² FILER NAME Larry Green	3 Filer ID (Ethics Commission	on filers)				
4 Date	5 Payee name						
9/23/2015	Julius and Lenora Carter S	cholarship & Youth	Foundation				
6 Amount (\$)	7 Payee address; City;	State; Zip 0	Code				
750.00	P.O. Box 8346						
	Houston TX 77288						
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description					
		Check if trave	outside of Texas, complete Schedule T				
		Check if Austi	n, TX, officeholder living expense				
	Advertising Expense	Adve	rtisement				
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held				
4 Date	5 Payee name						
8/10/2015	City of Houston						
6 Amount (\$)	7 Payee address; City;	State; Zip 0	Code				
500.00	901 Bagby						
	Houston TX 77002						
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description					
		Check if trave	outside of Texas, complete Schedule T				
		Check if Austi	n, TX, officeholder living expense				
	Fees	Cam	baign Filing Fee				
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held				

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

UNPAID INCURRED OBLIGATIONS

SCHEDULE	F2
----------	----

	The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F2:	2	FILER NAME Larry	Green		3 Filer ID (Ethics Commission filers)
4	TOTAL OF UNITEMIZED UNPA	ID	INCURRED OBLIGATIONS			\$
5	Date	6	Payee name			
7	Amount (\$)	8	Payee address; Cit	ty;	Sta	ate; Zip Code
9	TYPE OF EXPENDITURE		Political			Non-Political
10	PURPOSE OF EXPENDITURE	(a) Category	(1		Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
11	Complete ONLY if direct expendituree to benefit C/OH	Ca	andidate / Officehoder name	I		office sought office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

E	XPENDITURES MA	D	ΡE	BY CREDIT CARD		SCHEDULE F4
				The Instruction Guide explains	how	to complete this form.
1	Total pages Schedule F4:	2		FILER NAME Larry Green		3 Filer ID (Ethics Commission filers)
4	TOTAL OF UNITEMIZED EXPE	NC	DITU	RES CHARGED TO A CREDIT CARE)	\$\$7,593.70
5	Date	6		Payee name		
	7/3/2015			Spec's Liquor Warehouse		
7	Amount (\$)	8		Payee address; City;	St	ate; Zip Code
	19.31					
				Houston TX		
9	TYPE OF EXPENDITURE		Х	Political	Π	Non-Political
10	PURPOSE OF EXPENDITURE			ttegory (See Categories listed at the top of this	(b)	Description
		SCI	hedul	e)	Г	Check if travel outside of Texas, complete Schedule T
					╎┝	Check if Austin, TX, officeholder living expense
				Food/Beverage Expense	L	Campaign Staff Lunch
				i oou develage Expelise		

	The Instruction Quide evolution how to complete this form						
	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F4:	² FILER NAME Larry Green	3 Filer ID (Ethics Commission filers)				
4	TOTAL OF UNITEMIZED EXPE	ENDITURES CHARGED TO A CREDIT CARE	\$\$7,593.70				
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held				
7	Date 7/6/2015 Amount (\$) 50.32	 6 Payee name Buc-ee's 8 Payee address; City; State; Zip Code 4080 East Fwy Baytown TX 77521 					
9	TYPE OF EXPENDITURE	X Political	Non-Political				
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Fuel costs				
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held				
5	Date	6 Payee name					
	7/6/2015	Buc-ee's					
7	Amount (\$)	8 Payee address; City;	State; Zip Code				
0	13.34 TYPE OF EXPENDITURE	4080 East Fwy Baytown TX 77521	Non-Political				
9							
10	PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Supplies				
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held				

			BY CREDIT CARD	SCHEDULE F
			The Instruction Guide explains	now to complete this form.
1	Total pages Schedule F4:	2	FILER NAME Larry Green	3 Filer ID (Ethics Commission filers)
4	TOTAL OF UNITEMIZED EXPE	NDIT	JRES CHARGED TO A CREDIT CARD	\$\$7,593.70
5	Date	6	Payee name	
	7/6/2015		Le Peep Restaurant	
7	Amount (\$)	8	Payee address; City;	State; Zip Code
	32.98			
			Houston TX	
9	TYPE OF EXPENDITURE	X	Political	Non-Political
10	PURPOSE OF EXPENDITURE	1 Y /	ategory (See Categories listed at the top of this	(b) Description
		sched	ule)	Check if travel outside of Texas, complete Schedule T
				Check if Austin, TX, officeholder living expense
			Food/Doverne Evenence	Officeholder lunch
			Food/Beverage Expense	
11	Complete ONLY if direct	Cano	lidate / Officehoder name	office sought office held
	expendituree to benefit C/OH			J.
5	Date	6	Payee name	
	8/4/2015		WorldPay	
7	Amount (\$)	8	Payee address; City;	State; Zip Code
	9.95			
9	TYPE OF EXPENDITURE	x	Political	Non-Political
10	PURPOSE OF EXPENDITURE	(a) C	ategory (See Categories listed at the top of this	(b) Description
		sched		Check if travel outside of Texas, complete Schedule T
			_	Check if Austin, TX, officeholder living expense
			Fees	Online Donation Fees
11	Complete ONLY if direct	Can	lidate / Officehoder name	office sought office held
	expendituree to benefit C/OH			once sought Once held
5	Date	6	Payee name	
J				
7	7/6/2015		Benjy's on Washington	State: Zip Code
'	Amount (\$)	8	Payee address; City;	State; Zip Code

E	EXPENDITURES MADE BY CREDIT CARD SCHEDULE							
		The Instruction Guide explains	s how	to complete this form.				
1	Total pages Schedule F4:	2 FILER NAME Larry Green		3 Filer ID (Ethics Commission filers)				
4	TOTAL OF UNITEMIZED EXPE	NDITURES CHARGED TO A CREDIT CAR	D	\$\$7,593.70				
	142.45	5922 Washington						
		Houston TX 77007						
9	TYPE OF EXPENDITURE	X Political		Non-Political				
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) [escription				
		,		Check if travel outside of Texas, complete Sched	lule T			
				Check if Austin, TX, officeholder living expense				
		Food/Beverage Expense		Officeholder lunch				
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name		office sought offic	ce held			
	Data							
5	Date	6 Payee name						
-	7/6/2015	Public Storage	0.14					
7		8 Payee address; City;	Sta	te; Zip Code				
	51.00	3555 South Loop West						
		Houston TX 77025						
9	TYPE OF EXPENDITURE	X Political		Non-Political				
		(a) Category (See Categories listed at the top of this	(b) [escription				
		schedule)						
				Check if travel outside of Texas, complete Schec	lule I			
				Check if Austin, TX, officeholder living expense				
		Office Overhead/Rental Expense		Rental Storage Unit				
11	Complete ONLY if direct	Candidate / Officehoder name		office sought offic	ce held			
	expendituree to benefit C/OH			·				
5	Date	6 Payee name						
	7/7/2015	USPS						
7	Amount (\$)	8 Payee address; City;	Sta	te; Zip Code				
	29.40							
		Houston TX						

	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F4:	2 FILER NAME Larry Green 3 Filer ID (Ethics Commission filers)						
4	TOTAL OF UNITEMIZED EXPE	NDITURES CHARGED TO A CREDIT CARD \$\$7,593.70						
9	TYPE OF EXPENDITURE	X Political Non-Political						
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
		Check if travel outside of Texas, complete Schedule T						
		Check if Austin, TX, officeholder living expense						
		Event Expense Invitations						
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name office sought office held						
5	Date	6 Payee name						
	7/7/2015	Antone's Import Co.						
7	Amount (\$)	8 Payee address; City; State; Zip Code						
	11.39							
		Houston TX						
9	TYPE OF EXPENDITURE	X Political Non-Political						
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this (b) Description						
		schedule) Check if travel outside of Texas, complete Schedule T						
		Check if Austin, TX, officeholder living expense						
		Food/Beverage Expense Officeholder lunch						
11	Complete ONLY if direct	Candidate / Officehoder name office sought office held						
	expendituree to benefit C/OH							
5	Date	6 Payee name						
	7/7/2015	WorldPay						
7	Amount (\$)	8 Payee address; City; State; Zip Code						
	9.95							
9	TYPE OF EXPENDITURE	X Political Non-Political						
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this (b) Description						
		schedule) Check if travel outside of Texas, complete Schedule T						

	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F4:	2 FILER NAME Larry Green			3 Filer ID (Ethics Commission filers)		
4	TOTAL OF UNITEMIZED EXPE	NDITURES CHARGED TO A CREDIT CAR			D \$\$7,593.70		
			Fees		Check if Austin, TX, officeholder living exper Online Donation Fees	nse	
11	Complete ONLY if direct expendituree to benefit C/OH	Car	ndidate / Officehoder name	1	office sought	office held	
5	Date	6	Payee name				
	7/7/2015		WorldPay				
7	Amount (\$)	8	Payee address; City;	Sta	ate; Zip Code		
	39.95						
9	TYPE OF EXPENDITURE	X	< Political		Non-Political		
10	PURPOSE OF EXPENDITURE	I \ /	Category (See Categories listed at the top of this dule)	(b) [Description		
			Fees		Check if travel outside of Texas, complete S Check if Austin, TX, officeholder living exper Online Donation Fees		
11	Complete ONLY if direct expendituree to benefit C/OH	Car	ndidate / Officehoder name		office sought	office held	

	The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F4:	FILER NAME Larry Green		3 Filer ID (Ethics Commission filers)		
4	TOTAL OF UNITEMIZED EXPE	NDI	TURES CHARGED TO A CREDIT CARE)	\$\$7,593.70	
5	Date	6	Payee name			
	7/7/2015		WorldPay			
7	Amount (\$)	8	Payee address; City;	Sta	te; Zip Code	
	100.95					
9	TYPE OF EXPENDITURE	X	C Political		Non-Political	
10	PURPOSE OF EXPENDITURE	1 1	Category (See Categories listed at the top of this dule)	(b) [Description	
		SCILE	uuie)		Check if travel outside of Texas, complete Schedule T	
					Check if Austin, TX, officeholder living expense	
			Fees		Online Donation Fees	
11	Complete ONLY if direct expendituree to benefit C/OH	Car	ndidate / Officehoder name	1	office sought office held	
5	Date	6	Payee name			
	7/8/2015		Artista			
7	Amount (\$)	8	Payee address; City;	Sta	tte; Zip Code	
	58.80		800 Bagby			
			Houston TX 77002		1	
9	TYPE OF EXPENDITURE	X			Non-Political	
10	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this dule)	(b)	Description	
					Check if travel outside of Texas, complete Schedule T	
					Check if Austin, TX, officeholder living expense	
			Food/Beverage Expense		Officeholder lunch	
11	Complete ONLY if direct expendituree to benefit C/OH	Car	ndidate / Officehoder name		office sought office held	
5	Date	6	Payee name			
	7/9/2015		Pappas Bar-B-Q			
7	Amount (\$)	8	Payee address; City;	Sta	tte; Zip Code	

E	XPENDITURES MA	ADE BY CREDIT CARD	SCHEDULE F4
		The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F4:	2 FILER NAME Larry Green 3 Filer ID (Ethics Commission filers)	
4	TOTAL OF UNITEMIZED EXPE	ENDITURES CHARGED TO A CREDIT CARD \$\$7,593.70	
	29.90	Houston TX	
9	TYPE OF EXPENDITURE	X Political Non-Political	
10	PURPOSE OF EXPENDITURE	E (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas, complete Schedu Check if Austin, TX, officeholder living expense Food/Beverage Expense Officeholder lunch	le T
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name office sought office	e held
5	Date	6 Payee name	
	7/9/2015	Техасо	
7	Amount (\$)	8 Payee address; City; State; Zip Code	
	20.11	Houston TX	
9	TYPE OF EXPENDITURE	X Political Non-Political	
10	PURPOSE OF EXPENDITURE	E (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas, complete Schedu Check if Austin, TX, officeholder living expense Travel in District Gas for Campaigning	le T
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name office sought office	e held
5	Date	6 Payee name	
	7/10/2015	Whataburger	
7	Amount (\$) 10.79	8 Payee address; City; State; Zip Code	
		Houston TX	

ſ

	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F4:	2 FILER NAME Larry Green 3 Filer ID (Ethics Commission filers)					
4	TOTAL OF UNITEMIZED EXPE	NDITURES CHARGED TO A CREDIT CARD \$\$7,593.70					
9	TYPE OF EXPENDITURE	X Political Non-Political					
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Officeholder living expense Food/Beverage Expense Officeholder lunch Candidate / Officehoder name office sought office held					
5	Date 8/4/2015	6 Payee name WorldPay					
7	Amount (\$)	8 Payee address; City; State; Zip Code					
	39.95						
9	TYPE OF EXPENDITURE	X Political Non-Political					
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description (c) Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Online Donation Fees					
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name office sought office held					
5	Date	6 Payee name					
	8/5/2015	Pappadeaux Seafood Kitchen					
7	Amount (\$)	8 Payee address; City; State; Zip Code					
	150.06	Houston TX					
9	TYPE OF EXPENDITURE	X Political Non-Political					
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
		Check if travel outside of Texas, complete Schedule T					

	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F4:	2	PILER NAME Larry Green		3 Filer ID (Ethics Commission filers)		
4	TOTAL OF UNITEMIZED EXPE	ENDITURES CHARGED TO A CREDIT CARE			\$\$7,593.70		
			Food/Beverage Expense		Check if Austin, TX, officeholder living expe	ense	
11	Complete ONLY if direct expendituree to benefit C/OH	Cano	lidate / Officehoder name	<u> </u>	office sought	office held	
5	Date	6	Payee name				
	8/5/2015		Public Storage				
7	Amount (\$)	8	Payee address; City;	Sta	ate; Zip Code		
	51.00		3555 South Loop West				
			Houston TX 77025				
9	TYPE OF EXPENDITURE	X	Political		Non-Political		
10	PURPOSE OF EXPENDITURE	(a) C	ategory (See Categories listed at the top of this ule)	(b) [Description		
					Check if travel outside of Texas, complete	Schedule T	
					Check if Austin, TX, officeholder living expe	ense	
			Office Overhead/Rental Expense		Rental Storage Unit		
11	Complete ONLY if direct expendituree to benefit C/OH	Cano	lidate / Officehoder name	1	office sought	office held	

	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F4:	2	FILER NAME Larry Green		3 Filer ID (Ethics Commission filers)			
4	TOTAL OF UNITEMIZED EXPE	NDIT	URES CHARGED TO A CREDIT CARE)	\$\$7,593.70			
5	Date	6	Payee name					
	8/6/2015		Universoul Circus					
7	Amount (\$)	8	Payee address; City;	Sta	ate; Zip Code			
	2,196.00							
9	TYPE OF EXPENDITURE	X	Political		Non-Political			
10	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the top of this	(b) [Description			
		sched	ule)	╎┌	Check if travel outside of Texas, complete Schedule T			
				∣⊢	Check if Austin, TX, officeholder living expense			
			Contributions/Donations		Donation of Tickets			
			Made By					
			Candidate/Officeholder/Politi cal Committee					
11	Complete ONLY if direct	Can	didate / Officehoder name		office sought office held			
	expendituree to benefit C/OH							
5	Date	6	Payee name					
	8/7/2015		Universoul Circus					
7	Amount (\$)	8	Payee address; City;	Sta	ate; Zip Code			
	204.00							
9	TYPE OF EXPENDITURE	X	Political	Π	Non-Political			
10	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this	(b) [Description			
		sched	uie)	Iг	Check if travel outside of Texas, complete Schedule T			
					Check if Austin, TX, officeholder living expense			
			Contributions/Donations		Donation of Tickets			
			Made By					
			Candidate/Officeholder/Politi cal Committee					
11	Complete ONLY if direct	Can	didate / Officehoder name		office sought office held			
	expendituree to benefit C/OH							
5	Date	6	Payee name					
	8/10/2015		Loretta's Floral					
7	Amount (\$)	8	Payee address; City;	Sta	ate; Zip Code			

		The Instruct	ion Guide explains	how to	complete this form.	
1	Total pages Schedule F4:		Larry Green		Filer ID (Ethics Commission	n filers)
4	TOTAL OF UNITEMIZED EXPE					
-				Ψ	\$7,593.70	
	94.50	1909 Blodget	t			
		Houston TX	77004			
9	TYPE OF EXPENDITURE	X Political		N	Ion-Political	
10	PURPOSE OF EXPENDITURE	(a) Category (See Categor schedule)	ries listed at the top of this	(b) Des	scription	
				Пc	heck if travel outside of Texas, c	omplete Schedule T
				H c	heck if Austin, TX, officeholder li	ving expense
		Event Expens	se		Decoration	
		Evont Expont				
11	Complete ONLY if direct	Candidate / Officehode	r name	C	office sought	office held
	expendituree to benefit C/OH				-	
5	Date	6 Payee name				
	8/17/2015	Balloonscap				
7	Amount (\$)	8 Payee address;	City;	State	; Zip Code	
ľ		-	-	Olaic	, <i>Zip</i> 0000	
	338.10	6234 Edenbro	JOK			
		Sugarland T	X //4/9			
9	TYPE OF EXPENDITURE	X Political			lon-Political	
10	PURPOSE OF EXPENDITURE	(a) Category (See Categor schedule)	ies listed at the top of this	(b) Des	scription	
				Сс	heck if travel outside of Texas, c	omplete Schedule T
				С	heck if Austin, TX, officeholder li	ving expense
		Event Expens	se		Decoration	
11	Complete ONLY if direct	Candidate / Officehode	r name	c	office sought	office held
	expendituree to benefit C/OH					
5	Date	6 Payee name				
	8/17/2015	Public Stora	ge			
7	Amount (\$)	8 Payee address;	City;	State	; Zip Code	
	···	,			•	
	21 6/	3555 South I	oon West			
	21.64	3555 South L	oop West			

	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F4:	2 FILER NAME Larry Green 3 Filer ID (Ethics Commission filers)					
4	TOTAL OF UNITEMIZED EXPE	NDITURES CHARGED TO A CREDIT CARD \$\$7,593.70					
9	TYPE OF EXPENDITURE	X Political Non-Political	-				
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
		Check if travel outside of Texas, complete Schedule T					
		Check if Austin, TX, officeholder living expense					
		Office Overhead/Rental Rental Storage Unit					
		Expense					
11	Complete ONLY if direct	Candidate / Officehoder name office sought office held					
	expendituree to benefit C/OH						
5	Date	6 Payee name					
	8/17/2015	Chili's					
7	Amount (\$)	8 Payee address; City; State; Zip Code					
	45.87	7408 S Sam Houston Pkwy W					
		Houston TX 77085					
9	TYPE OF EXPENDITURE	X Political Non-Political					
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
		Check if travel outside of Texas, complete Schedule T					
		Check if Austin, TX, officeholder living expense					
		Food/Beverage Expense Officeholder lunch					
11		Candidate / Officehoder name office sought office held					
	expendituree to benefit C/OH						
5	Date	6 Payee name					
	8/17/2015	Chevron					
7	Amount (\$)	8 Payee address; City; State; Zip Code					
	47.41						
		Houston TX					
9	TYPE OF EXPENDITURE	X Political Non-Political					
10	PURPOSE OF EXPENDITURE						
		schedule) Check if travel outside of Texas, complete Schedule T					
1							

	The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F4:	2	FILER NAME Larry Green	n filers)					
4	TOTAL OF UNITEMIZED EXPE	NDITU	JRES CHARGED TO A CREDIT CARE)	\$\$7,593.70				
			Travel in District		Check if Austin, TX, officeholder I Fuel costs	iving expense			
11	Complete ONLY if direct expendituree to benefit C/OH	Cand	lidate / Officehoder name		office sought	office held			
5	Date	6	Payee name						
	8/17/2015		Our Legends Cigar Bar						
7	Amount (\$)	8	Payee address; City;	Sta	te; Zip Code				
	56.70		5312 Almeda						
			Houston TX 77004						
9	TYPE OF EXPENDITURE	X	Political		Non-Political				
10	PURPOSE OF EXPENDITURE	(a) C	ategory (See Categories listed at the top of this	(b) C	escription				
			····)		Check if travel outside of Texas, o	complete Schedule T			
					Check if Austin, TX, officeholder I	iving expense			
			Food/Beverage Expense		Meeting w/ Potential	Donor			
11	Complete ONLY if direct expendituree to benefit C/OH	Cand	lidate / Officehoder name		office sought	office held			

			The Instruction Guide explains	how to complete this form.
1	Total pages Schedule F4:	2	FILER NAME Larry Green	3 Filer ID (Ethics Commission filers)
4	TOTAL OF UNITEMIZED EXPE	NDI	ITURES CHARGED TO A CREDIT CARE	D \$\$7,593.70
5	Date	6	Payee name	
	8/17/2015		Escalante's	
7	Amount (\$)	8	Payee address; City;	State; Zip Code
	48.14			
			Houston TX	
)	TYPE OF EXPENDITURE		X Political	Non-Political
0	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this edule)	(b) Description
				Check if travel outside of Texas, complete Schedule T
				Check if Austin, TX, officeholder living expense
			Food/Beverage Expense	Officeholder lunch
11	Complete ONLY if direct expendituree to benefit C/OH	Ca	ndidate / Officehoder name	office sought office held
	•			
_				
5	Date	6	Payee name	
_	8/19/2015		Olive Garden	
1	Amount (\$)	8	Payee address; City;	State; Zip Code
	19.13			
•		 	Houston TX X Political	Non-Political
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE			(b) Description
10	FURFUSE OF EXPENDITURE		Category (See Categories listed at the top of this edule)	
				Check if travel outside of Texas, complete Schedule T
				Check if Austin, TX, officeholder living expense
			Food/Beverage Expense	Officeholder lunch
11	Complete ONLY if direct	0	ndidate / Officehoder name	office sought office held
	expendituree to benefit C/OH			
5	Date	6	Payee name	
	8/20/2015		Barnaby's Café	
	0/20/2013	1	Darnaby 3 Oale	

		DE BY CREDIT CARD			SCHEDULE	
		The Instruction Guide explains	s how	-		
1	Total pages Schedule F4:	² FILER NAME Larry Green		3 Filer ID (Ethics Commission filers)		
4	TOTAL OF UNITEMIZED EXPE	NDITURES CHARGED TO A CREDIT CAR	D	\$\$7,593.70		
	35.18	1801 Binz				
		Houston TX 77004				
9	TYPE OF EXPENDITURE	X Political		Non-Political		
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) [Description		
				Check if travel outside of Texas, complete Schedu	lle T	
				Check if Austin, TX, officeholder living expense		
		Food/Beverage Expense		J Officeholder lunch		
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name		office sought office	e held	
	expendituree to benefit 6/011					
5	Date	6 Payee name				
	8/21/2015	Glazed The Doughnut Café				
7	Amount (\$)	8 Payee address; City;	Sta	ate; Zip Code		
	16.17	1333 Old Spanish Trail				
		Houston TX 77054				
9	TYPE OF EXPENDITURE	X Political		Non-Political		
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) [Description		
				Check if travel outside of Texas, complete Schedu	lle T	
				Check if Austin, TX, officeholder living expense		
		Food/Beverage Expense		Officeholder lunch		
11	Complete ONLY if direct	Candidate / Officehoder name		office sought office	e held	
	expendituree to benefit C/OH					
5	Date	6 Payee name				
	8/21/2015	Kroger Fuel				
7	Amount (\$)	8 Payee address; City;	Sta	ate; Zip Code		
	52.50					
		Houston TX				

	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F4:	2 FILER NAME Larry Green 3 Filer ID (Ethics Commission filers)					
4	TOTAL OF UNITEMIZED EXPE	IDITURES CHARGED TO A CREDIT CARD \$\$7,593.70					
9	TYPE OF EXPENDITURE	X Political Non-Political					
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this (b) Description					
		schedule) Check if travel outside of Texas, complete Schedule T					
		Check if Austin, TX, officeholder living expense					
		Travel in District Fuel costs					
11	Complete ONLY if direct	Candidate / Officehoder name office sought office held					
	expendituree to benefit C/OH						
5	Date	6 Payee name					
	8/24/2015	Gloria's					
7	Amount (\$)	8 Payee address; City; State; Zip Code					
	36.37	2616 Louisiana St #101					
		Houston TX 77006					
9	TYPE OF EXPENDITURE	X Political Non-Political					
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this (b) Description					
		Schedule) Check if travel outside of Texas, complete Schedule T					
		Check if Austin, TX, officeholder living expense					
		Food/Beverage Expense Officeholder lunch					
11	Complete ONLY if direct	Candidate / Officehoder name office sought office held					
	expendituree to benefit C/OH						
5	Date	6 Payee name					
	8/24/2015	Reef Restaurant					
7	Amount (\$)	8 Payee address; City; State; Zip Code					
	139.75	2600 Travis St					
	139.75						
		Houston TX 77006					
9	TYPE OF EXPENDITURE	X Political Non-Political					
3 10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this (b) Description					
	I GIT OGE OF EXPENDITURE	schedule)					
		Check if travel outside of Texas, complete Schedule T					

	The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F4:	2	FILER NAME Larry Green		3 Filer ID (Ethics Commission file	ers)			
4	TOTAL OF UNITEMIZED EXPE	ND	DITURES CHARGED TO A CREDIT CAR	D	\$\$7,593.70				
			Food/Beverage Expense		Check if Austin, TX, officeholder living Officeholder lunch	expense			
11	Complete ONLY if direct expendituree to benefit C/OH	Ca	andidate / Officehoder name		office sought	office held			
5	Date	6	Payee name						
	8/27/2015		Davis Street Restaurant						
7	Amount (\$)	8	Payee address; City;	St	ate; Zip Code				
	67.00		5925 Almeda Road, Suite A						
			Houston TX 77004						
9	TYPE OF EXPENDITURE		X Political		Non-Political				
10	PURPOSE OF EXPENDITURE	1 \ /) Category (See Categories listed at the top of this hedule)	(b) [Description				
				ΙΓ	Check if travel outside of Texas, comp	lete Schedule T			
					Check if Austin, TX, officeholder living	expense			
			Food/Beverage Expense		Officeholder lunch				
11	Complete ONLY if direct expendituree to benefit C/OH	Ca	andidate / Officehoder name		office sought	office held			

			The Instruction	on Guide explains	how	to complete this form.		
1	Total pages Schedule F4:	2	FILER NAME	Larry Green		3 Filer ID (Ethics Commission	ilers)	
4	TOTAL OF UNITEMIZED EXPE	NDI	TURES CHARGED T	O A CREDIT CARE)	\$\$7,593.70		
5	Date	6	Payee name					
	9/4/2015		WorldPay					
7	Amount (\$)	8	Payee address;	City;	Sta	ate; Zip Code		
	9.95							
9	TYPE OF EXPENDITURE	×	Political			Non-Political		
10	PURPOSE OF EXPENDITURE		Category (See Categorie	es listed at the top of this	(b) [Description		
		SUIC				Check if travel outside of Texas, cor	nplete Schedule T	
						Check if Austin, TX, officeholder livin	ng expense	
			Fees			Online Donation Fees		
11	Complete ONLY if direct expendituree to benefit C/OH	Car	ndidate / Officehoder	name	1	office sought	office held	
	experial large to benefit C/OH							
5	Date	6	Payee name					
	9/4/2015		WorldPay					
7	Amount (\$)	8	Payee address;	City;	Sta	ate; Zip Code		
	30.07							
1		1						

9	TYPE OF EXPENDITURE		X Political			Non-Political	
10	PURPOSE OF EXPENDITURE	1 1	Category (See Categories listed at the top of this	s ((b) C	escription	
		sche	Fees			Check if travel outside of Check if Austin, TX, office Online Donatio	
11	Complete ONLY if direct expendituree to benefit C/OH	Ca	ndidate / Officehoder name			office sought	office held
5	Date	6	Payee name				
	9/4/2015		WorldPay				
7	Amount (\$)	8	Payee address; City;		Sta	te; Zip Code	

			The Instruction Guide explains	how	to complete this form.	
1	Total pages Schedule F4:	2	FILER NAME Larry Green		3 Filer ID (Ethics Commission filers)	
4	TOTAL OF UNITEMIZED EXPE		URES CHARGED TO A CREDIT CARI	2	\$\$7,593.70	
	39.95					
9	TYPE OF EXPENDITURE	X	Political		Non-Political	
10	PURPOSE OF EXPENDITURE	(a) C	Category (See Categories listed at the top of this stule)	(b) [Description Check if travel outside of Texas, complete Sched Check if Austin, TX, officeholder living expense Online Donation Fees	ule T
11	Complete ONLY if direct expendituree to benefit C/OH	Can	didate / Officehoder name		office sought offic	e held
5	Date	6	Payee name			
	9/4/2015		Public Storage			
7	Amount (\$)	8	Payee address; City;	Sta	ate; Zip Code	
	51.00		3555 South Loop West			
			Houston TX 77025			
9	TYPE OF EXPENDITURE	X	Political		Non-Political	
10	PURPOSE OF EXPENDITURE	(a) C	Category (See Categories listed at the top of this tule) Office Overhead/Rental Expense	(b) [Description Check if travel outside of Texas, complete Sched Check if Austin, TX, officeholder living expense Rental Storage Unit	ule T
11	Complete ONLY if direct expendituree to benefit C/OH	Can	didate / Officehoder name		office sought offic	ze held
5	Date	6	Payee name			
	9/8/2015		Season's 52			
7	Amount (\$)	8	Payee address; City;	Sta	ate; Zip Code	
	178.98		4410 Westheimer			
			Houston TX 77027			

	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F4:	2 FILER NAME Larry Green 3 Filer ID (Ethics Commission filers)						
4	TOTAL OF UNITEMIZED EXPE	NDITURES CHARGED TO A CREDIT CARD \$\$7,593.70						
9	TYPE OF EXPENDITURE	X Political Non-Political						
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Officeholder lunch						
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name office sought office held						
5	Date	6 Payee name						
	9/11/2015	Autism Speaks Inc.						
7	Amount (\$)	8 Payee address; City; State; Zip Code						
	100.00	1 E 33rd St						
		4th floor						
		New York NY 10016						
9	TYPE OF EXPENDITURE	X Political Non-Political						
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this (b) Description						
		Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee						
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name office sought office held						
5	Date	6 Payee name						
	9/14/2015	Our Legends Cigar Bar						
7	Amount (\$)	8 Payee address; City; State; Zip Code						
	11.09	5312 Almeda						
		Houston TX 77004						
9	TYPE OF EXPENDITURE	X Political Non-Political						
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this (b) Description schedule)						
		Check if travel outside of Texas, complete Schedule T						

E	KPENDITURES MA	DE BY CREDIT CARD	SCHEDULE F4
		The Instruction Guide explains	how to complete this form.
1	Total pages Schedule F4:	2 FILER NAME Larry Green	3 Filer ID (Ethics Commission filers)
4	TOTAL OF UNITEMIZED EXPE	NDITURES CHARGED TO A CREDIT CARE	\$\$7,593.70
		Food/Beverage Expense	Check if Austin, TX, officeholder living expense Meeting w/ Potential Donor
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held
5	Date	6 Payee name	
	9/14/2015	Kroger Fuel	
7	Amount (\$)	8 Payee address; City;	State; Zip Code
	48.12	Houston TX	
9	TYPE OF EXPENDITURE	X Political	Non-Political
10		(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
		Travel in District	Fuel costs
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held

ſ

E	KPENDITURES MA	۱C)E	BY CREDIT CARD			SCH	EDULE F4
				The Instruction Guide explains	hov	v to complete this form.		
1	Total pages Schedule F4:	2		FILER NAME Larry Green		3 Filer ID (Ethics Commission	filers)	
4	TOTAL OF UNITEMIZED EXPE	N	DITI	JRES CHARGED TO A CREDIT CARI	C	\$\$7,593.70		
5	Date	6		Payee name				
	9/14/2015			Cool Stop Ice Cream				
7	Amount (\$)	8		Payee address; City;	S	tate; Zip Code		
	6.33			8875 W Bellfort St				
				Houston TX 77031				
9	TYPE OF EXPENDITURE		Х	Political		Non-Political		
10	PURPOSE OF EXPENDITURE		a) C	ategory (See Categories listed at the top of this	(b)	Description		
		SC	neut	11 .	Г	Check if travel outside of Texas, co	omplete Schedule T	
						Check if Austin, TX, officeholder liv	ing expense	
				Contributions/Donations		Donation for constitue	nt	
				Made By Candidate/Officeholder/Politi				
				cal Committee				
11	Complete ONLY if direct expendituree to benefit C/OH	С	and	lidate / Officehoder name		office sought	office held	
5	Date	6		Payee name				
	9/14/2015			Alpha Merit Group Education				
7	Amount (\$)	8		Payee address; City;	S	tate; Zip Code		
	313.24			P.O. Box 88318				
				Houston TX 77288		_		
9	TYPE OF EXPENDITURE		Х	Political		Non-Political		
10	PURPOSE OF EXPENDITURE		a) C	ategory (See Categories listed at the top of this ule)	(b)	Description		
					Ιſ	Check if travel outside of Texas, co	omplete Schedule T	
						Check if Austin, TX, officeholder liv	ing expense	
				Contributions/Donations		Donation		
				Made By Candidate/Officeholder/Politi				
				cal Committee				
11	Complete ONLY if direct expendituree to benefit C/OH	C	and	lidate / Officehoder name		office sought	office held	
	Data			Davies as me				
5	Date	6		Payee name				
<u> </u>	9/16/2015	-		Holley's Seafood and Oyster				
1	Amount (\$)	8		Payee address; City;	S	tate; Zip Code		

			The Instruction Guide explains	how	to complete this form	
	Tatal pages Cabadula E4	2	-	now	3 Filer ID (Ethics Commission filers)	
	Total pages Schedule F4:		FILER NAME Larry Green			
4			RES CHARGED TO A CREDIT CARE)	\$\$7,593.70	
	40.47		3201 Louisiana			
			Houston TX 77006			
9	TYPE OF EXPENDITURE	X	Political		Non-Political	
10	PURPOSE OF EXPENDITURE	(a) Ca	tegory (See Categories listed at the top of this	(b) [escription	
		Sonedun	.,	Γ	Check if travel outside of Texas, complete Sched	lule T
				$ \vdash$	Check if Austin, TX, officeholder living expense	
			Food/Beverage Expense		Officeholder lunch	
11	Complete ONLY if direct	Candi	date / Officehoder name		office sought offic	ce held
	expendituree to benefit C/OH					
	_					
5	Date	6	Payee name			
	9/17/2015		Keep Houston Beautiful			
7	Amount (\$)	8	Payee address; City;	Sta	te; Zip Code	
	1,500.00		3000 Richmond			
			Houston TX 77098			
9	TYPE OF EXPENDITURE	x	Political		Non-Political	
10	PURPOSE OF EXPENDITURE	(a) Ca	tegory (See Categories listed at the top of this	(b) [lescription	
		schedul	e)	ſ	Check if travel outside of Texas, complete Sched	lule T
				$ \vdash$	Check if Austin, TX, officeholder living expense	
			Contributions/Donations	L	Donation	
			Contributions/Donations Made By		Donation	
			Candidate/Officeholder/Politi cal Committee			
11	Complete ONLY if direct	Candi	date / Officehoder name		office sought offic	ce held
	expendituree to benefit C/OH				onio ought onic	
5	Date	6	Payee name			
	9/22/2015		Grace's On Kirby			
7		8	Payee address; City;	Sta	te; Zip Code	
	33.30		3111 Kirby			
	00.00					
			Houston TX 77098			
1		1	1003011 1 / / / 030			

	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F4:	2 FILER NAME Larry Green 3 Filer ID (Ethics Commission filers)					
4	TOTAL OF UNITEMIZED EXPE	NDITURES CHARGED TO A CREDIT CARD \$\$7,593.70					
9	TYPE OF EXPENDITURE	X Political Non-Political					
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this (b) Description					
		schedule) Check if travel outside of Texas, complete Schedule T					
		Check if Austin, TX, officeholder living expense					
		Food/Beverage Expense Officeholder lunch					
		1 000/Deverage Expense					
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name office sought office held					
5	Date	6 Payee name					
	9/23/2015	El Tiempo Cantina					
7	Amount (\$)	8 Payee address; City; State; Zip Code					
	48.73	1308 Montrose Blvd					
		Houston TX 77019					
9	TYPE OF EXPENDITURE	X Political Non-Political					
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
		Check if travel outside of Texas, complete Schedule T					
		Check if Austin, TX, officeholder living expense					
		Food/Beverage Expense Officeholder lunch					
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name office sought office held					
5	Date	6 Payee name					
	9/23/2015	Brentwood Baptist Church					
7	Amount (\$)	8 Payee address; City; State; Zip Code					
	550.00	3802 Brookston					
		Houston TX 77045					
9	TYPE OF EXPENDITURE	X Political Non-Political					
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
		Check if travel outside of Texas, complete Schedule T					
1							

	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F4:	2	FILER NAME Larry Green		3 Filer ID (Ethics Commission filers)		
4	TOTAL OF UNITEMIZED EXPE	NDIT	URES CHARGED TO A CREDIT CARD	D \$\$7,593.70			
			Contributions/Donations		Check if Austin, TX, officeholder living exp Donation	ense	
			Made By Candidate/Officeholder/Politi cal Committee				
11	Complete ONLY if direct expendituree to benefit C/OH	Cano	didate / Officehoder name		office sought	office held	
5	Date	6	Payee name				
	9/21/2015		Loews Madison Hotel				
7	Amount (\$)	8	Payee address; City;	Sta	te; Zip Code		
	126.70		1177 15th St NW				
			Washington DC 20005				
9	TYPE OF EXPENDITURE	X	Political		Non-Political		
10	PURPOSE OF EXPENDITURE	(a) C	Category (See Categories listed at the top of this	(b) [Description		
				Γ	Check if travel outside of Texas, complete	Schedule T	
					Check if Austin, TX, officeholder living exp	ense	
			Food/Beverage Expense		Officeholder dinner		
11	Complete ONLY if direct expendituree to benefit C/OH	Cano	didate / Officehoder name		office sought	office held	

	(PENDITURES MA				
				The Instruction Guide explains h	iow to complete this form.
1	Total pages Schedule F4:	2		FILER NAME Larry Green	3 Filer ID (Ethics Commission filers)
4	TOTAL OF UNITEMIZED EXPE	INE	DITUF	RES CHARGED TO A CREDIT CARD	\$\$7,593.70
5	Date	6		Payee name	
	9/3/2015			Doubletree Hilton Lafayette	
7	Amount (\$)	8		Payee address; City;	State; Zip Code
	66.77			1521 W Pinhook Rd	
				Lafayette LA 70503	
9	TYPE OF EXPENDITURE	T	Х	Political	Non-Political
0	PURPOSE OF EXPENDITURE	1			(b) Description
		sc	chedule)	Check if travel outside of Texas, complete Schedule T
					Check if Austin, TX, officeholder living expense
				Food/Beverage Expense	Officeholder lunch
				1 000/Develage Expense	
11	Complete ONLY if direct	c	andic	late / Officehoder name	office sought office held
	expendituree to benefit C/OH				
5	Date	6		Payee name	
	9/9/2015			Embroidery and Screen Printin	ng Unlimited
7	Amount (\$)	8		Payee address; City;	State; Zip Code
	98.94				
				3262 Westheimer Rd #252	
				3262 Westheimer Rd #252	
				3262 Westheimer Rd #252 Houston TX 77098	
9	TYPE OF EXPENDITURE				Non-Political
	TYPE OF EXPENDITURE		X a) Cat	Houston TX 77098 Political egory (See Categories listed at the top of this ((b) Description
			X	Houston TX 77098 Political egory (See Categories listed at the top of this (
			X a) Cat	Houston TX 77098 Political egory (See Categories listed at the top of this ((b) Description
			X a) Cat	Houston TX 77098 Political regory (See Categories listed at the top of this ()	(b) Description Check if travel outside of Texas, complete Schedule T
			X a) Cat	Houston TX 77098 Political egory (See Categories listed at the top of this ((b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
			X a) Cat	Houston TX 77098 Political regory (See Categories listed at the top of this ()	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
10	PURPOSE OF EXPENDITURE	SC	X a) Cat	Houston TX 77098 Political regory (See Categories listed at the top of this ()	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
9 10 11	PURPOSE OF EXPENDITURE	SC	X a) Cat	Houston TX 77098 Political regory (See Categories listed at the top of this () Event Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Tablecloths for event
10	PURPOSE OF EXPENDITURE	SC	X a) Cat	Houston TX 77098 Political regory (See Categories listed at the top of this () Event Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Tablecloths for event
10	PURPOSE OF EXPENDITURE	SC	X a) Cat chedule	Houston TX 77098 Political regory (See Categories listed at the top of this () Event Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Tablecloths for event
10	PURPOSE OF EXPENDITURE	C	X a) Cat chedule	Houston TX 77098 Political regory (See Categories listed at the top of this () Event Expense late / Officehoder name	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Tablecloths for event

			E BY CREDIT CARD The Instruction Guide explains	how to complete this form
1	Total pages Schedule F4:	2	-	3 Filer ID (Ethics Commission filers)
			FILER NAME Larry Green	
4				D \$\$7,593.70
	25.00			
9	TYPE OF EXPENDITURE	X	Political	Non-Political
10	PURPOSE OF EXPENDITURE	I \ /	Category (See Categories listed at the top of this	(b) Description
		sche	dule)	Check if travel outside of Texas, complete Schedule T
				Check if Austin, TX, officeholder living expense
			Fees	Travel fees
			Lee2	
11	Complete ONLY if direct	Car	didate / Officehoder name	office sought office held
	expendituree to benefit C/OH			Ŭ
5	Date	6	Payee name	
	8/11/2015		United Airlines	
7	Amount (\$)	8	Payee address; City;	State; Zip Code
	25.00			
	20.00			
9	TYPE OF EXPENDITURE		Political	Non-Political
-			Category (See Categories listed at the top of this	(b) Description
10		sche		
				Check if travel outside of Texas, complete Schedule T
				Check if Austin, TX, officeholder living expense
			Fees	Travel fees
11	Complete ONLY if direct expendituree to benefit C/OH	Car	didate / Officehoder name	office sought office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE G

PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

	TO A BUSINESS OF C/OH								
	The Instruction Guide explains how to complete this form.								
1	Total Pages Schedule H:	² FILER NAME Larry Green	3 Filer ID (Ethics Commission filers)						
4	Date	5 Business name							
6	Amount (\$)	7 Business address;	City; State; Zip Code						
8	PURPOSE OF EXPENDITURE	(a) Category	(b) Description						
			Check if travel outside of Texas, complete Schedule T Check if Austin, TX, office holder living expense						
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officehoder name	Office sought Office held						
F	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED								

	NON-POLITICAL	SCHEDULE I									
	MADE FROM POLITICAL CONTRIBUTIONS										
	The Instruction Guide explains how to complete this form.										
1	1 Total Pages Schedule I: 2 FILER NAME Larry Green 3 ACCOUNT # (Ethics Commission filers)										
4	Date	5 Payee name									
6	Amount (\$)	7 Payee address;	City;	State;	Zip Code						
8	8 PURPOSE OF EXPENDITURE (a) Category (b) Description (See instructions regarding type of										
		ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS NEE	DED							