CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	n Guide explains how to com	plete this form	1 Filer ID(Et	hics Commission	filers)	2 Total pages filed
3 CANDIDATE /	MS/MRS/MR	FIRST	MI		OFFICE	USE ONLY
OFFICEHOLDER	Dr.	Benjamin	L	Date	Received	
NAME	NICKNAME	LAST	SUFFIX	1	0/5/2015	
	Ben Hall	Hall	III			
4 CANDIDATE /	ADDRESS / PO BOX;	APT/SUITE #; CITY	Y; STATE; ZIP C	ODE		
OFFICEHOLDER	530 Lovett Blvd					
MAILING				Date H	and-delivered o	or Date Postmarked
ADDRESS	Houston TX 77006					
Change of address	AREA CODE	PHONE NUMBER	EXTENSION			
5 CANDIDATE /		PHONE NUMBER	EXTENSION			
OFFICEHOLDER	(713) 942-9600					
PHONE	MS/MRS/MR	FIRST	MI			A
6 CAMPAIGN	NICO/WICC		1011	Rece	•	Amount
TREASURER	Dr.	Benjamin	L.	Date	Processed	
NAME	NICKNAME	LAST	SUFFIX	Date	Imaged	
	Ben Hall	Hall	III			
7 CAMPAIGN	STREET ADDRESS (No PO Box Plea	ise);	APT/SUITE # ;	CITY;	STATE;	ZIP CODE
TREASURER	530 Little John Lane					
ADDRESS						
(Resident or business)	Houston TX 77024					
8 CAMPAIGN	AREA CODE	PHONE NUMBER	EXTENSION			
TREASURER PHONE	(713) 942-9600					
	January 15 X 30th day be	fore election	al repport (Attach C/OH	- FR) Exceede	d \$500 limit	
9 REPORT TYPE				Ϋ́ L		
	July 15 8th day befo	ore election	noff	15th day	after campaign treas	surer appointment(officeholder only)
10 PERIOD	Month Day	Year			Month Day	Year
COVERED	7/1/2015	1	THROUGH		9/24/20	015
11 ELECTION	ELECTION DATE	ELECTIO	N TYPE			
	Month Day Year					
	11/3/2015	Primary	Ku	noff	X General	Special
12 OFFICE	OFFICE HELD (if any)	I	13 ^{OF}	FICE SOUGHT (if kno	wn)	
			М	ayor		
			1			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

	FORM	C/OH
COVER	SHEET	PG 2

14 FILER NAME Benjamin L Hall

15 Filer ID (Ethics Commission Filers)

	expenditures may have	political contributions accepted or political been made without the candidate's or offic receive notice of such expenditures.			
16 NOTICE	COMMITTEE TYPE	COMMITTEE NAME			
FROM					
POLITICAL	GENERAL	COMMITTEE ADDRESS			
COMMITTEE(S)					
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER	NAME		
additional pages		COMMITTEE CAMPAIGN TREASURER	ADDRESS		
17 CONTRIBUTION		AL CONTRIBUTIONS OF \$50 O NS, OR GUARANTEES OF LOA			¢
TOTALS	1 22020, 2014				\$
	2 TOTAL POLITIC	AL CONTRIBUTIONS			\$57,859.56
	(OTHER THAN F	PLEDGES, LOANS, OR GUARA	NTEES OF LOANS)		
EXPENDITURE	3 TOTAL POLITIC	AL EXPENDITURES OF \$100 C	OR LESS, UNLESS ITEMIZE	D	
TOTALS					\$
	4 TOTAL POLITIC	AL EXPENDITURES			
					\$111,417.16
CONTRIBUTION		AL CONTRIBUTIONS MAINTAI	NED AS OF THE LAST DAY	/	
BALANCE	OF REPORTING	FPERIOD			\$758,618.25
OUTSTANDING LOAN		AL AMOUNT OF ALL OUTSTAN	NDING LOANS AS OF THE		
TOTALS	LAST DAY OF T	HE REPORTING PERIOD			\$850,000.00
18 AFFIDAVIT					
		rep	vear, or affirm, under penalty ort is true and correct and in orted by me under Title 15,	cludes all info	rmation required to be
			Ber	njamin L. Hall,	III
			Signature of	Candidate or	Officeholder
AFFIX NOT STAMP / SE	AL ABOVE				
Sworn to and subscribed	before me, by the said	i	, thi	s the	day
of	, 20	, to certify which, wit	tness my hand and seal of o	ffice.	
Signature of officer admi	nistering oath	Print name of officer adm	inistering oath	Title of officer	administering oath

SUBTOTALS - COH

FORM C/OH COVER SHEET PG 3

19 F	٦I	20 Filer ID (Ethics Commission Filers)			
21	S	CHEDULE SUBTOTALS	SUBTOTAL		
	Ν	AME OF SCHEDULE	AMOUNT		
1		SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS			
2		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS			
3		SCHEDULE B: PLEDGED CONTRIBUTIONS			
4		SCHEDULE E: LOANS			
5		SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS			
6		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS			
7		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLICITAL CONTRIBUTION	IS		
8		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 MADE FROM POLITICAL CONTRI	BUTIONS		
11		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS R	ETURNED TO FILER		

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

C/OH NAME Benjamin L Hall

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.

SCHEDUL	E A1
---------	------

The Instruction	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	l
	Cheryl Gonzales			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
7/31/2015		Kemah	TX 77565	\$50.00
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	Ltions)
N/A			N/A	
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Daysi Marin			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/1/2015		Sugar Land	TX 77498	\$50.00
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	stions)
N/A			N/A	
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Mauricio Marin			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/1/2015		Sugar Land	TX 77498	\$50.00
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
N/A			N/A	
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Gary Oradat	_		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/22/2015		Houston	TX 77043	\$1,000.00
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	Litions)
N/A			N/A	
4 Date	5 Full name of contributor	out of state	PAC(ID#)	

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

he Instruction	Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:
FILER NAME	E Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	richard johnson			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/23/2015		Houston	TX 77029	25.00
Principal of	ccupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
N/A			N/A	
Date	5 Full name of contributor Chaney Ellis	out of state F	PAC(ID#)	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/25/2015		Friendswood	TX 77546	10.00
Principal o	ccupation / Job title (See Instructions)		9 Employer (See Instruc N/A	tions)
Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Ted and Erania Ellis			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/25/2015		Friendswood	TX 77546	200.00
Principal of	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
N/A			N/A	
Date	5 Full name of contributor	out of state F	PAC(ID#)	
	richard johnson			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/27/2015		Houston	TX 77029	1,000.00
Principal o	ccupation / Job title (See Instructions)		9 Employer (See Instruc	_Lctions)
Administra	tor		St.Philip's College	
Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Kimberly Ayres			7 Amount of contributions (\$)

IONS			SCHEDULE	A1
	1			

The Instruction G	Buide explains how to complete	this form.		1 Total Pages Schedule A1:
2 FILER NAME E	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
8/29/2015	6 Contributor address;	City; Bellaire	State; Zip Code TX 77401	10.00
· ·	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Paralegal			The Kelley Law Firm	
4 Date	5 Full name of contributor Kimberly Ayres	out of state F	PAC(ID#)	7 Amount of contributions (\$)
8/29/2015	6 Contributor address;	City; Bellaire	State; Zip Code TX 77401	10.00
8 Principal occu Paralegal	upation / Job title (See Instructions)		9 Employer (See Instruc The Kelley Law Firm	tions)
4 Date	5 Full name of contributor Kimberly Ayres	out of state F	PAC(ID#)	7 Amount of contributions (\$)
8/29/2015	6 Contributor address;	City; Bellaire	State; Zip Code TX 77401	10.00
8 Principal occu	Lupation / Job title (See Instructions)		9 Employer (See Instruc	l tions)
Р			The Kelley Law Firm	
4 Date	5 Full name of contributor Kimberly Ayres	out of state F	PAC(ID#)	7 Amount of contributions (\$)
8/29/2015	6 Contributor address;	City; Bellaire	State; Zip Code TX 77401	5.00
8 Principal occu Paralegal	upation / Job title (See Instructions)		9 Employer (See Instruc The Kelley Law Firm	l tions)

The Instruction G	uide explains how to complete	this form.		1 Total Pages Schedule A1:
2 FILER NAME E	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor Anthony & Lorena Martinez	out of state F	PAC(ID#)	7 Amount of contributions (\$)
8/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77044	100.00
	I upation / Job title (See Instructions) atory Scientist/Field Leader/Certified O	Ophthal	9 Employer (See Instruct VA Medical Center/Rain	I tions) International/Greater Houston Eye Con
4 Date	5 Full name of contributor Adi Dajani	out of state F	PAC(ID#)	7 Amount of contributions (\$)
8/31/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77005	100.00
8 Principal occu Retired	pation / Job title (See Instructions)		9 Employer (See Instruct Retired	tions)
4 Date	5 Full name of contributor Summer Dajani	out of state F	PAC(ID#)	7 Amount of contributions (\$)
8/31/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77005	100.00
8 Principal occu Administrator	I upation / Job title (See Instructions)		9 Employer (See Instruct Houston Methodist Hosp	
4 Date	5 Full name of contributor Stell Uwakwem	out of state F	PAC(ID#)	7 Amount of contributions (\$)
9/5/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77096	10.00
8 Principal occu Owner	pation / Job title (See Instructions)		9 Employer (See Instruct Cool Stop Ice Cream	tions)
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	

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

The	Instruction G	uide explains how to complete	e thi	s form.		1 Total Pages Schedule A1:
2 FI	LER NAME B	enjamin L Hall				3 Filer ID (Ethics Commission filers)
		James Humphery				7 Amount of contributions (\$)
		6 Contributor address;		City;	State; Zip Code	
	9/5/2015			Houston	TX 77021	10.00
8	Principal occu	pation / Job title (See Instructions)			9 Employer (See Instruc	ctions)
	Educator and	Coach			Retired	
4	Date	5 Full name of contributor		out of state F		1
4	Dale	Clarence Douglas		out of state r	AC(ID#)	7 Amount of contributions (\$)
		Clarence Douglas				Amount of contributions (\$)
		6 Contributor address;		City;	State; Zip Code	
	9/7/2015	o contributor address,		Montgomery	TX 77356	10.00
	3/1/2013			wongomery	17 11 330	10.00
8	Principal occu	pation / Job title (See Instructions)			9 Employer (See Instruc	ctions)
•	Retired	· · · · · · · · · · · · · · · · · · ·			Retired	
4	Date	5 Full name of contributor		out of state F	PAC(ID#)	
		Marlon Heard				7 Amount of contributions (\$)
		6 Contributor address;		City;	State; Zip Code	
	9/7/2015			Katy	TX 77449	10.00
	Dringinglago	notion (Joh title (Coo Instructions)				(inc.)
8		pation / Job title (See Instructions)			9 Employer (See Instruc	cions)
	QC Inspector				Schlumberger	
4	Date	5 Full name of contributor		out of state F	PAC(ID#)	
		jed & barbara shaw				7 Amount of contributions (\$)
		6 Contributor address;		City;	State; Zip Code	
	9/8/2015			houston	TX 77057	1,000.00
8	Principal occu	pation / Job title (See Instructions)			9 Employer (See Instruc	tions)
	attorney				shaw & associates plc	
4	Date	5 Full name of contributor		out of state F	PAC(ID#)	
•						

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

The Instruction (Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
	Deniemin I Hell			3 Filer ID (Ethics Commission filers)
Z FILER NAME	Benjamin L Hall			
	Bishop I.V. and Pastor Bridget Hilliard			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/8/2015		Spring	TX 77379	1,000.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Pastor			NLC	
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Elijah Culpepper			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/9/2015		Houston	TX 77004	100.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	stions)
Engineering	Advisor		ExxonMobil	
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Melanie Martinez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/10/2015		Pasadena	TX 77505	10.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	Lions)
Paralegal			The Hall Law Firm	
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	David Maldonado			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/11/2015		Houston	TX 77009	150.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Pastor/AC			Iglesia Bautista Jesus D	
4 Date	5 Full name of contributor	out of state	PAC(ID#)	

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

The	Instruction G	uide explains how to complete	this form.		1 Total Pages Schedule A1:
2 F		Benjamin L Hall			3 Filer ID (Ethics Commission filers)
21					
		Howard Epps			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/11/2015		Hosuton	TX 77005	1,000.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instru	ctions)
	Physician			Baylor College of Medio	sine
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Abdul Karriem			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/13/2015		Houston	TX 77048	10.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instru	ctions)
	Developer			TCH Development	
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Pastor Debra Moton Brown			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	-
	9/13/2015		Houston	TX 77045	25.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instru	ctions)
	Senior Pastor			St. James United Metho	odist Church
4	Date	5 Full name of contributor	out of state I	PAC(ID#)	
		BOSE OKONEDO	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	-
	9/13/2015		RICHMOND	TX 77469	10.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instru	ctions)
	NURSE			BELLTECH	
	Date	5 Full name of contributor	out of state I	PAC(ID#)	
4					7 Amount of contributions (\$)

SCHEDULE A	1
------------	---

The Instruction G	uide explains how to complete th	is form.		1 Total Pages Schedule A1:
2 FILER NAME B	enjamin L Hall			3 Filer ID (Ethics Commission filers)
	6 Contributor address;	City;	State; Zip Code	
9/13/2015		Houston	TX 77083	5.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	l tions)
Paralegal			Tex- Mex Notary & Multi	Services
4 Date	5 Full name of contributor	out of state P	PAC(ID#)	
	Edison Oyiboke	J		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/13/2015		Sugar Land	TX 77479	10.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
Nurse			st joseph medical center	
4 Date	5 Full name of contributor	out of state P	PAC(ID#)	
	Osayande Aikhionbare	•		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/13/2015		houston	TX 77099	5.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	tions)
correction offic	cer		TDCJ	
4 Date	5 Full name of contributor	out of state P	PAC(ID#)	
	Justina Oyiboke	J		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/13/2015		Sugar Land	TX 77479	5.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	L tions)
Nurse			Seven Acres Geriatric He	ome

Th	e Instruction G	uide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 F	ILER NAME E	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Usman Raji			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/13/2015		Houston	TX 77072	10.00
8	Principal occu	I pation / Job title (See Instructions)		9 Employer (See Instruc	Ltions)
	Medical trans	portation		Camusgroup	
		-			1
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Osarobo Iyawe			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/14/2015		Houston	TX 77083	5.00
8		pation / Job title (See Instructions)		9 Employer (See Instruc	
	Corrections			Texas Department of Cr	iminal Justice
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Ramsay Elder			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/16/2015		Houston	TX 77005	100.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	Ltions)
	accountant			self-employed	
		-			1
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Naomi Hall			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/18/2015		Columbia	SC 29210	25.00
8		pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Retired			n/a	
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
1.				· · /	I

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

he Instruction	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	Tammy Peden			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/21/2015		Katy	TX 77494	500.00
Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instru	ictions)
Attorney			Self	
Date	5 Full name of contributor EVERLYN HALL-BAKER	out of state I	PAC(ID#)	7 Amount of contributions (\$)
9/22/2015	6 Contributor address;	City; WEDDINGTC	State; Zip Code	- 2,500.00
		N		_,
	cupation / Job title (See Instructions)		9 Employer (See Instru	ictions)
NOT APPLI	CABLE		NOT APPLICABLE	
Date	5 Full name of contributor Maria de Lourdes Trinidad	out of state F	PAC(ID#)	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
8/29/2015		Houston	TX 77015	5.00
Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instru	lictions)
Home Make	r			
Date	5 Full name of contributor Sherry Oradat	out of state I	PAC(ID#)	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
8/29/2015		Houston	TX 77043	20.00
Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instru	ictions)
Adminstrativ	ve Assistant			
Date	5 Full name of contributor	out of state I	PAC(ID#)	

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

The	e Instruction G	uide explains how to comple	ete this form		1 Total Pages Schedule A1:
2 F	ILER NAME E	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
		Ruben Arango			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	8/29/2015		Houston	TX 77379	10.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Realtor			Re/Max - Real Estate	
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Salvador Hurtado			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	8/29/2015		Houston	TX 77015	20.00
				9 Employer (See Instruc	tions)
8	Principal occu	pation / Job title (See Instructions)			
8	Principal occu Tuboscope	ipation / Job title (See Instructions)			,
8		5 Full name of contributor	out of state	PAC(ID#)	
	Tuboscope		out of state		7 Amount of contributions (\$)
	Tuboscope	5 Full name of contributor	out of state City;		
	Tuboscope	5 Full name of contributor J. Jesus Moncivais		PAC(ID#)	
	Tuboscope Date 8/29/2015	5 Full name of contributor J. Jesus Moncivais	LI City;	PAC(ID#) State; Zip Code	7 Amount of contributions (\$) 20.00
4	Tuboscope Date 8/29/2015 Principal occu	5 Full name of contributor J. Jesus Moncivais 6 Contributor address;	LI City;	PAC(ID#) State; Zip Code TX 77015	7 Amount of contributions (\$) 20.00
8	Tuboscope Date 8/29/2015 Principal occu	5 Full name of contributor J. Jesus Moncivais 6 Contributor address;	City; Houston	PAC(ID#) State; Zip Code TX 77015	7 Amount of contributions (\$) 20.00
8	Tuboscope Date 8/29/2015 Principal occu Senior Citizer	5 Full name of contributor J. Jesus Moncivais 6 Contributor address; upation / Job title (See Instructions) 6 Retiree Contract	City; Houston	PAC(ID#) State; Zip Code TX 77015 9 Employer (See Instruc	7 Amount of contributions (\$) 20.00
8	Tuboscope Date 8/29/2015 Principal occu Senior Citizer	 5 Full name of contributor J. Jesus Moncivais 6 Contributor address; 6 Instructions) 6 Retiree Contract 5 Full name of contributor 	City; Houston	PAC(ID#) State; Zip Code TX 77015 9 Employer (See Instruc	7 Amount of contributions (\$) 20.00
3	Tuboscope Date 8/29/2015 Principal occu Senior Citizer	 5 Full name of contributor J. Jesus Moncivais 6 Contributor address; 6 Contributor address; 6 Instructions) 6 Retiree Contract 5 Full name of contributor 6 George Corral 	City; Houston	PAC(ID#) State; Zip Code TX 77015 9 Employer (See Instruct PAC(ID#)	7 Amount of contributions (\$) 20.00
4 8 4	Tuboscope Date 8/29/2015 Principal occu Senior Citizer Date 8/29/2015	 5 Full name of contributor J. Jesus Moncivais 6 Contributor address; 6 Contributor address; 6 Instructions) 6 Retiree Contract 5 Full name of contributor 6 George Corral 	City; Houston	PAC(ID#) State; Zip Code TX 77015 9 Employer (See Instruct PAC(ID#) State; Zip Code	7 Amount of contributions (\$) 20.00 ctions) 7 Amount of contributions (\$) 2.00
4	Tuboscope Date 8/29/2015 Principal occu Senior Citizer Date 8/29/2015	 5 Full name of contributor J. Jesus Moncivais 6 Contributor address; 6 Contributor address; 9 Full name of contributor 9 George Corral 6 Contributor address; 9 Full name of contributor 9 George Corral 9 Geo	City; Houston	PAC(ID#) State; Zip Code TX 77015 9 Employer (See Instruct PAC(ID#) State; Zip Code TX 77013	7 Amount of contributions (\$) 20.00 ctions) 7 Amount of contributions (\$) 2.00
4 8 4	Tuboscope Date 8/29/2015 Principal occu Senior Citizer Date 8/29/2015 8/29/2015	 5 Full name of contributor J. Jesus Moncivais 6 Contributor address; 6 Contributor address; 9 Full name of contributor 9 George Corral 6 Contributor address; 9 Full name of contributor 9 George Corral 9 Geo	City; Houston	PAC(ID#) State; Zip Code TX 77015 9 Employer (See Instruct PAC(ID#) State; Zip Code TX 77013	7 Amount of contributions (\$) 20.00 ctions) 7 Amount of contributions (\$) 2.00

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

The Instruction Guide explains how to complete this form.				1 Total Pages Schedule A1:
2 FILER NAME B	enjamin L Hall			3 Filer ID (Ethics Commission filers)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Houston	TX 77015	1.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Housewife				
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Agustina Cervantes			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Houston	TX 77015	5.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Housekeeper				
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Zoila Ayala			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Houston	TX 77020	2.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Housewife				
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Gisela Rivera			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Spring	TX 77386	5.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	ltions)
Medical Assis	ant			

The Instruction (Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Juanita M. Chavez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Housotn	TX 77012	3.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Senior Citize	n			
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Daniel Rodriguez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Houston	TX 77023	10.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	litions)
Mechanic Ga	as & Electrical			
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Tomas Covarrubias	—		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Houston	TX 77015	2.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Maintenance			Spanish Villa Apartment	S
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Nancy Guerra			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Houston	TX 77015	12.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	Litions)
Lead Office A	Assistant			
4 Date	5 Full name of contributor	out of state	PAC(ID#)	

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

The Instruction	Guide explains how to complet	1 Total Pages Schedule A1:		
2 FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	Maria Rangel			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
8/29/2015		Houston	TX 77020	1.00
8 Principal oc	L cupation / Job title (See Instructions)		9 Employer (See Instruc	L ctions)
Amway Sale	25		Amway Co.	
4 Date	5 Full name of contributor Elvia Martinez	out of state	PAC(ID#)	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
8/29/2015		Houston	TX 77020	1.00
8 Principal oco Housewife	cupation / Job title (See Instructions)		9 Employer (See Instrue	ctions)
4 Date	5 Full name of contributor Margarita Gaytan	out of state	PAC(ID#)	7 Amount of contributions (\$)
8/29/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77015	20.00
8 Principal oco Housewife	cupation / Job title (See Instructions)		9 Employer (See Instrue	ctions)
4 Date	5 Full name of contributor Teresa Coronado	out of state	PAC(ID#)	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
8/29/2015		Houston	TX 77047	20.00
8 Principal occ Retired	Lupation / Job title (See Instructions)		9 Employer (See Instrue	L ctions)
4 Date	5 Full name of contributor Rosy Hernandez	out of state	PAC(ID#)	7 Amount of contributions (\$)

MONETARY POLI

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
2 FILER NAME Benjamin L Hall	3 Filer ID (Ethics Commission filers)

2 F	ILER NAME B	enjamin L Hall			3 Filer ID (Ethics Commission filers)
	8/29/2015	6 Contributor address;	City; La Porte	State; Zip Code TX 77571	2.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Forklift Operat	or		Exxon Refinery	
4	Date	5 Full name of contributor Janie Hernandez	out of state F	PAC(ID#)	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	8/29/2015		Houston	TX 77087	2.00
8	Principal occu Un-employed	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID#)	
		Georgina Aragon	_		7 Amount of contributions (\$)
	8/29/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77015	1.00
8	Principal occu Homemaker	I pation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor Reyna Cruz	out of state F	PAC(ID#)	7 Amount of contributions (\$)
	8/29/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77049	5.00
8	Principal occu Housekeeper	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)

The Instruction (Nide evoluine hew to complete	o this form		1 Total Dagaa Sahadula A4
The Instruction Guide explains how to complete this form.				1 Total Pages Schedule A1:
2 FILER NAME I	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Lorena Martinez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Houston	TX 77044	20.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Clinical Labo	ratory			
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Alma Alvarado		× ,	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015	,	Houston	TX 77029	2.00
0,20,2010				
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Self Employe				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Juanita Guzman	—		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Houston	TX 77012	1.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Housewife				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Victor Fuentes			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	·
8/29/2015		Houston	TX 77049	2.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	ltions)
Un-employed	I			
		0,4 -4 -4-4-		1
4 Date	5 Full name of contributor	out of state	FAG(ID#)	1

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

The Instruction	n Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:
2 FILER NAM	E Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	Maria D. Chavez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
8/29/2015		Houston	TX 77012	1.00
8 Principal of	occupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Housekee			Hilton Americas	
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Arturo Almeida			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
8/29/2015		Houston	TX 77020	1.00
B Principal of	occupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Retired				
4 Date	5 Full name of contributor Madel Carman Cano	out of state	PAC(ID#)	7 Amount of contributions (\$)
		0.14	01-1-1 7's 0-s-t-	
8/29/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77028	1.00
8 Principal of	occupation / Job title (See Instructions)		9 Employer (See Instruc	
Amway S	ales		Amway Co.	
4 Date	5 Full name of contributor Ariel R. Davila	out of state	PAC(ID#)	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
8/29/2015		Houston	TX 77015	2.00
3 Principal of	occupation / Job title (See Instructions)		9 Employer (See Instruc	L ctions)
Truck Driv	/er			
4 Date	5 Full name of contributor Susana Benitez	out of state	PAC(ID#)	7 Amount of contributions (\$)
	I			21 of 140

The Instruction Guide explains how to complete this form.				1 Total Pages Schedule A1:
2 FILER NAME Benjamin L Hall				3 Filer ID (Ethics Commission filers)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Houston	TX 77015	6.00
8 Principal occup	Dation / Job title (See Instructions)		9 Employer (See Instruct	l ions)
Homemaker				
4 Date	5 Full name of contributor	out of state P	AC(ID#)	
	Cristina Torrez	-		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Houston	TX 77015	2.00
8 Principal occup	pation / Job title (See Instructions)		9 Employer (See Instruct	l ions)
Sales Consulta	ant		Mary Kay	
4 Date	5 Full name of contributor	out of state P	AC(ID#)	
	Addys Rodriguez	-		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Houston	TX 77015	2.00
8 Principal occup	pation / Job title (See Instructions)		9 Employer (See Instruct	ions)
Sales			Walmart	
	i	1		r
4 Date	5 Full name of contributor	out of state P	PAC(ID#)	
	Tranquilino Coronado			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Houston	TX 77047	1.00
8 Principal occup	pation / Job title (See Instructions)		9 Employer (See Instruct	lions)
Retired				

The Instruction (luide eveloine how to complete	a this form		1 Total Dagaa Sahadula A4
The instruction G	Buide explains how to complete	1 Total Pages Schedule A1:		
2 FILER NAME I	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Josefina Martinez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Houston	TX 77530	5.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	l tions)
Retired				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Sandra Montelongo			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Houston	TX 77015	1.00
8 Principal occ Houston Mec	upation / Job title (See Instructions) lical Center		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Estefania Cervantes			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Houston	TX 77015	1.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Cashier				
4 Date	5 Full name of contributor April P. Lawson	out of state	PAC(ID#)	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Houston	TX 77069	20.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	Lions)
Educator				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	

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

The Instruction C	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FILER NAME I	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	Maria G. Rivas			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
8/29/2015		Dayton	TX 77535	5.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Medical Assis	stant			
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Irene Sanchez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
8/29/2015		Houston	TX 77092	1.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Worker			Laundry Mat	
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Rosie Almeida			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
8/29/2015		Houston	TX 77020	1.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Housewife				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Israel Soto			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
8/29/2015		Houston	TX 77003	20.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	L ctions)
Painter				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Delfino Lares	_		7 Amount of contributions (\$)

SCHEDULE A	1
------------	---

The Instruction G	uide explains how to complete this	1 Total Pages Schedule A1:		
2 FILER NAME B	enjamin L Hall			3 Filer ID (Ethics Commission filers)
	6 Contributor address; C	ity;	State; Zip Code	
8/29/2015	С	ypress	TX 77429	5.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	ions)
Business Man	ager Oil & Gas			
4 Date	5 Full name of contributor	out of state P	AC(ID#)	
	Socorro Monterrola			7 Amount of contributions (\$)
	6 Contributor address; C	ity;	State; Zip Code	
8/29/2015	н	ouston	TX 77015	2.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	ions)
Not Working				
4 Date	5 Full name of contributor	out of state P	AC(ID#)	
	America Gonzalez			7 Amount of contributions (\$)
	6 Contributor address; C	ity;	State; Zip Code	
8/29/2015	н	ouston	TX 77020	5.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	ions)
Teacher Assis	tant		HISD	
4 Date	5 Full name of contributor	out of state P	AC(ID#)	
	Elvira Cavazos			7 Amount of contributions (\$)
	6 Contributor address; C	ity;	State; Zip Code	
8/29/2015	н	ouston	TX 77015	3.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	ions)
Homemaker			Home	

SCHEDULE A	\1
------------	-----------

The Instruction	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor	out of state		
4 Date			FAC(ID#)	
	Asbel Escribano			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Houston	TX 77064	3.00
8 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	Lions)
Pastor			Pentecostal Church	
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Migdalia Jimenez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Houston	TX 77064	2.00
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Nurse				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Alejandro Fuentes			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Houston	TX 77084	1.00
8 Principal oco	cupation / Job title (See Instructions)		9 Employer (See Instruc	
Student				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Lazarro Gutierrez Barrios			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Houston	TX 77020	1.00
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	
Pastor	. ,			
4 Date	5 Full name of contributor	out of state	PAC(ID#)	

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

The Instruction	Guide explains how to complete	this form.		1 Total Pages Schedule A1:
2 FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	Tiffany Hernandez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Houston	TX 77039	5.00
8 Principal occ Nurse	cupation / Job title (See Instructions)		9 Employer (See Instruction North Houston Birth Cer	
4 Date	5 Full name of contributor Jose M. Cervantes	out of state	PAC(ID#)	7 Amount of contributions (\$)
8/29/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77015	7.00
8 Principal occ	cupation / Job title (See Instructions) ectrician		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor Ismael Hernandez	out of state	PAC(ID#)	7 Amount of contributions (\$)
8/29/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77078	10.00
	cupation / Job title (See Instructions) vall - Manager		9 Employer (See Instruction	tions)
4 Date	5 Full name of contributor Elena Villarreal	out of state	PAC(ID#)	7 Amount of contributions (\$)
8/29/2015	6 Contributor address;	City; Baytown	State; Zip Code TX 77520	3.00
8 Principal occ Housewife	cupation / Job title (See Instructions)		9 Employer (See Instruc	L tions)
4 Date	5 Full name of contributor Juan Manuel Gonzalez Jr.	out of state	PAC(ID#)	7 Amount of contributions (\$)

			-	
The Instruction G	Guide explains how to complete	this form.		1 Total Pages Schedule A1:
2 FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
8/29/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77061	5.00
6/29/2013		Houston		5.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
City of Houst	on		Health Department	
4 Date	5 Full name of contributor	out of state I	PAC(ID#)	
	Jessica Gonzalez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Houston	TX 77061	3.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	l tions)
Assistant Buy	/er		Greater Houston Retaile	rs
4 Date	5 Full name of contributor	out of state I	PAC(ID#)	
	Maria de Lourdes Trinidad			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Houston	TX 77015	5.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Assistant				
4 Date	5 Full name of contributor	out of state I	PAC(ID#)	
	Teodon Rodriguez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Houston	TX 77020	5.00

	8/29/2015		Houston	1X 77020	5.00
8	Principal occup	pation / Job title (See Instructions)		9 Employer (See Instruct	ions)
	Worker			Mission Foods	

The Instruction (Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
4 Date	Date 5 Full name of contributor out of state PA			-
	Apoloni Perez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Houston	TX 77028	5.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	
Owner			Landscaping Company	
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Ariel Rios			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Houston	TX 77044	5.00
8 Principal occ Auto Mechar	supation / Job title (See Instructions)		9 Employer (See Instruc	;tions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Jerome Walton			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Houston	TX 77035	15.00
3 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Security & D	river			
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Shelia Green			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/29/2015		Houston	TX 77035	5.00
3 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	
Self Employe	ed		Home Health Care	
4 Date	5 Full name of contributor	out of state	PAC(ID#)]

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

The Instruction	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	Tydamus Walton			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
8/29/2015		Houston	TX 77035	5.00
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Student			None	
4 Date	5 Full name of contributor Mauricio Marin	out of state	PAC(ID#)	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
8/29/2015		Sugarland	TX 77498	30.00
8 Principal oc Film Directo	ccupation / Job title (See Instructions)		9 Employer (See Instruct Dreams Film Studios	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	America Gonzalez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
8/29/2015		Houston	TX 77044	5.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Clerk			HISD	
4 Date	5 Full name of contributor Luis Gomez	out of state	PAC(ID#)	7 Amount of contributions (\$)
8/20/2015	6 Contributor address;	City;	State; Zip Code	20.00
8/29/2015		Houston	TX 77015	20.00
8 Principal oc Owner of In	ccupation / Job title (See Instructions)		9 Employer (See Instruct Service & Real Estate	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Bishop P.E.W. Bryant			7 Amount of contributions (\$)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 The Instruction Guide explains how to complete this form. **Total Pages Schedule A1:** 1 3 Filer ID (Ethics Commission filers) 2 FILER NAME Benjamin L Hall 6 Contributor address; City; State; Zip Code 9/3/2015 200.00 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 8 Pastor Island of Hope 4 Date 5 Full name of contributor out of state PAC(ID#) Bishop Willie A. Jenkins Amount of contributions (\$) 6 Contributor address; City; Zip Code State; 9/3/2015 300.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Church of God in Christ Minister 4 Date 5 Full name of contributor out of state PAC(ID#) Freddie Solomon Amount of contributions (\$) 6 Contributor address; City; Zip Code State; 9/3/2015 Tomball TX 77375 100.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Church of God in Christ Pastor 4 Date 5 Full name of contributor out of state PAC(ID#) Bishop J. Singleton Amount of contributions (\$) 6 Contributor address; City; State; Zip Code 9/3/2015 TX 77016 100.00 Houston 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Pastor **Christ Holy Temple**

The	Instruction G	uide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FI	LER NAME E	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
4	Date 5 Full name of contributor out of state PAC(ID#)			PAC(ID#)	
		Dr. Morris Jenkins			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/3/2015		Houston	TX 77028	100.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Pastor			Ellis Memorial	
4	Date	5 Full name of contributor	out of state l	PAC(ID#)	
		Rev. Kevin L. Childs			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/3/2015		Houston	TX 77028	50.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Pastor			Greater Love Mission	
4	Date	5 Full name of contributor	out of state I	PAC(ID#)	
		Pastor Clint Horn			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/3/2015		Houston	TX 77044	50.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	Lions)
	Business Owr	ner		Building Block Learning	Center
4	Date	5 Full name of contributor	out of state I	PAC(ID#)	
		Richard E. Brown	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/3/2015		Houston	TX 77026	100.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	l
	Pastor			New Birth Church	
4	Date	5 Full name of contributor	out of state I	PAC(ID#)	

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

The Instruction	n Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FILER NAM	E Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	Jonathon Russell, Sr.			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/3/2015		Houston	TX 77026	40.00
8 Principal o	occupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
Senior Pa	stor		Ambassadors of Opera	tor Ministries
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Edgar Flemming	_		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/3/2015		Houston	TX 77020	25.00
8 Principal c	occupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
Pastor				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	McCoy Holcomb			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/4/2015		Houston	TX 77091	10.00
8 Principal c	occupation / Job title (See Instructions)		9 Employer (See Instrue	ctions)
Pastor				
4 Date	Date 5 Full name of contributor out of state PAC(ID#)		PAC(ID#)	
	David Sanfor			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/4/2015		Houston	ТХ	5.00
8 Principal c	occupation / Job title (See Instructions)		9 Employer (See Instru-	ctions)
Pastor				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Maria Jackson			7 Amount of contributions (\$)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 The Instruction Guide explains how to complete this form. **Total Pages Schedule A1:** 1 3 Filer ID (Ethics Commission filers) 2 FILER NAME Benjamin L Hall 6 Contributor address; Zip Code City; State; 9/4/2015 5.00 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 8 Pastor 4 Date 5 Full name of contributor out of state PAC(ID#) Jessie Parks Amount of contributions (\$) 6 Contributor address; City; Zip Code State; 9/4/2015 10.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Pastor 4 Date 5 Full name of contributor out of state PAC(ID#) Pamela White Amount of contributions (\$) 6 Contributor address; City; Zip Code State; 9/4/2015 TX 77091 5.00 Houston 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Pastor 4 Date 5 Full name of contributor out of state PAC(ID#) Lubbie Owen Amount of contributions (\$) 6 Contributor address; City; State; Zip Code 9/4/2015 Houston TX 77016 5.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Pastor

The Instruction G	uide explains how to complete	1 Total Pages Schedule A1:		
2 FILER NAME E	Senjamin L Hall			3 Filer ID (Ethics Commission filers)
4 Date	Date 5 Full name of contributor out of state PAC(ID#)			
	Ruby Perez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/4/2015		Houston	TX 77088	5.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Pastor				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	[
	Don Simon		()	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/4/2015		Houston	TX 77021	5.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Pastor				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	1
	Jewel Peovy			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/4/2015		Houston	ТХ	5.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	Ltions)
Pastor				
				1
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Perkin Westmoreland			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/4/2015		Houston	TX 77088	5.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Pastor				·····
4 Date	5 Full name of contributor	out of state	PAC(ID#)	

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

The Instruction	Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:
2 FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	Roland Latin			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/8/2015		Houston	TX 77045	10.00
8 Principal oc Pastor	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Charlie Frazier	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/8/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77045	- 10.00
3 Principal oc Pastor	ccupation / Job title (See Instructions)		9 Employer (See Instrue	ctions)
4 Date	5 Full name of contributor AL Freeman	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/8/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77043	- 10.00
3 Principal oc Pastor	ccupation / Job title (See Instructions)		9 Employer (See Instrue	ctions)
4 Date	5 Full name of contributor Slovie Ray	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/8/2015	6 Contributor address;	City; Houston	State; Zip Code TX	- 10.00
3 Principal oc Pastor	ccupation / Job title (See Instructions)		9 Employer (See Instrue	L ctions)
4 Date	5 Full name of contributor Edwin Gil	out of state	PAC(ID#)	7 Amount of contributions (\$)

The Instruction C	Guide explains how to complete	this form.		1 Total Pages Schedule A1:
2 FILER NAME I	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	6 Contributor address;	City;	State; Zip Code	
9/9/2015		Humble	TX 77346	5.00
8 Principal occ Pastor	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor Jose Javier Gallisa	out of state	PAC(ID#)	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/9/2015		Houston	TX 77587	10.00
8 Principal occ Pastor	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Antonio Fernandez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/9/2015		Houston	TX 77043	5.00
8 Principal occ Pastor	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Jorge Gamboa			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/9/2015		Conroe	TX 77305	5.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	Ltions)
Pastor				

SCHEDULE A	1
------------	---

				-
The Instruction G	Buide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FILER NAME E	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Martha Campos			7 Amount of contributions (\$)
	Martha Campos			
	6 Contributor address;	City;	State; Zip Code	
9/11/2015		Houston	Texas 77017	5.00
8 Principal occu	Iupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Pastor				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Eduardo Cantu			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/11/2015				10.00
8 Principal occu	Ipation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Pastor				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Sier Cantu			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/11/2015	,		,	5.00
3/11/2013				0.00
8 Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
· · ·				
Pastor				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Jose Simon Casas			7 Amount of contributions (\$)
				(4)
	6 Contributor address:	C:++ /		
	6 Contributor address;	City;	State; Zip Code	
9/11/2015		Mexico		10.00
0 Dringing car	unotion / Job titlo (See Instructions)		9 Employer (See Instruc	*iono)
· ·	upation / Job title (See Instructions)		a Employer (See Instruc	
Pastor				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
l	1			I

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

The Instruction C	uide evoleine heur te complete	this form		1 Total Dagaa Sahadula A1
The instruction G	uide explains how to complete	e unis iorm.		1 Total Pages Schedule A1:
2 FILER NAME E	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	Ernesta Delgado			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/11/2015		Houston	Texas 77075	1.00
8 Principal occu	I Ipation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Pastor				
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Marcio Dias			7 Amount of contributions (\$)
9/11/2015	6 Contributor address;	City; Mexico	State; Zip Code	10.00
9/11/2015		Mexico		10.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Pastor				
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Maria Dorrille			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/11/2015		Houston	Texas 77075	5.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Pastor				
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Antonio Fernandez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/11/2015		Houston	Texas 77080	10.00
8 Principal occu	I Ipation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Pastor				
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Victor Flores	_		7 Amount of contributions (\$)

SCHEDULE A	1
------------	---

The Instruction	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	6 Contributor address;	City;	State; Zip Code	-
9/11/2015		Spring	Texas 77386	10.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
Music Minis	ster			
	-			- T
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Jose Javier Gallisa			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/11/2015		South Houston	Texas 77587	10.00
		riodotom		
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instru	L ctions)
Minister				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	David Garcia			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/11/2015		Houston	Texas 77036	20.00
3 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
Pastor				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
4 Duio	Edwin Castro Garcia			7 Amount of contributions (\$)
	Edwin Castro Garcia			
	6 Contributor address:	Citr <i>u</i>	State: Zin Cada	
0/44/0045	6 Contributor address;	City;	State; Zip Code	5.00
9/11/2015		Humble	Texas 77396	5.00
	ccupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
Pastor				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Jennifer Garcia		, <i>,</i>	7 Amount of contributions (\$)
	Service Surviu			

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

The Instruction G	uide explains how to complete th	iis form.		1 Total Pages Schedule A1:
2 FILER NAME E	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
9/11/2015	6 Contributor address;	City; Humble	State; Zip Code Texas 77396	5.00
0,11,2010				
8 Principal occu Pastor	upation / Job title (See Instructions)		9 Employer (See Instruct	L tions)
4 Date	5 Full name of contributor Carlos Gonzales	out of state P	AC(ID#)	7 Amount of contributions (\$)
9/11/2015	6 Contributor address;	City;	State; Zip Code	5.00
8 Principal occu Pastor	upation / Job title (See Instructions)		9 Employer (See Instruct	Lions)
4 Date	5 Full name of contributor Isidro Gonzalez	out of state P	AC(ID#)	7 Amount of contributions (\$)
0/11/2015	6 Contributor address;	City; Galena Park	State; Zip Code	5.00
9/11/2015		Galena Park	Texas 77547	5.00
8 Principal occu Pastor	I upation / Job title (See Instructions)		9 Employer (See Instruct	L tions)
4 Date	5 Full name of contributor Tiomara Gutierrez	out of state P	AC(ID#)	7 Amount of contributions (\$)
9/11/2015	6 Contributor address;	City; Houston	State; Zip Code Texas 77074	10.00
8 Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Pastor				

SCHEDULE A1

The Instruction (Guide explains how to complete	e this form		1 Total Pages Schedule A1:
2 FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor	out of state PAC(ID#)		
	Luis Larrinaga			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/11/2015		Houston	Texas 77015	100.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Pastor				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Norma Larrinaga			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/11/2015		Houston	Texas 77015	25.00
8 Principal occ	Lupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Pastor				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Carlos Marroquin			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/11/2015		Humble	Texas 77338	5.00
8 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Pastor				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Esteban Mendieta			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/11/2015		Houston	Texas 77075	5.00
8 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	l tions)
Pastor				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	

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

Th	e Instruction G	uide explains how to complete	e this form.		1 Total P	ages Schedule A1:
2 F	ILER NAME E	Benjamin L Hall			3 Filer ID (Ethi	ics Commission filers)
		Lourdes Mendieta			7	Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code		
	9/11/2015		Houston	Texas 77075		2.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	ctions)	
	Pastor					
4	Date	5 Full name of contributor	out of state	PAC(ID#)		
		Joseph Montalvo			7	Amount of contributions (\$)
			0.4	Otata: 7in Orda		
	9/11/2015	6 Contributor address;	City; Pasadena	State; Zip Code Texas 77505		10.00
	3/11/2013		i asaueria			10.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	ctions)	
	Pastor					
4	Date	5 Full name of contributor	out of state	PAC(ID#)		
		Yusimit Montalvo			7	Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code		
	9/11/2015		Pasadena	Texas 77505		10.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	ctions)	
	Pastor					
4	Date	5 Full name of contributor	out of state	PAC(ID#)		
		Joel Montes			7	Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code		
	9/11/2015	o Contributor address,	Houston	Texas 77069		20.00
	0,11,2010		houston			20.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)	
	Pastor					
4	Date	5 Full name of contributor	out of state	PAC(ID#)		
		Linda Montes			7	Amount of contributions (\$)
1					43 of 14	10

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

The Instruction	Guide explains how to complete	1 Total Pages Schedule A1:		
2 FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	6 Contributor address;	City;	State; Zip Code	
9/11/2015		Houston	Texas 77069	5.00
8 Principal oc Pastor	cupation / Job title (See Instructions)		9 Employer (See Instruc	L stions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Pablo Nsyra			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/11/2015		Houston	Texas 77089	10.00
8 Principal oc Pastor	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Sonki Nsyra			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/11/2015		Houston	Texas 77089	5.00
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Pastor				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Maria Elena Ortega			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/11/2015		Houston	Texas 77023	5.00
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	Lions)
Pastor				

SCHEDULE A1

	0			
The Instructio	on Guide explains how to complet	1 Total Pages Schedule A1:		
2 FILER NAM	1E Benjamin L Hall			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Ricardo Ortegon			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/11/2015		Houston	Texas 77023	10.00
8 Principal	occupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Pastor				
4 Date	5 Full name of contributor	out of state	PAC(ID#_)	
	Baltazar Pedroza			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/11/2015		Houston	Texas 77013	10.00
8 Principal	occupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Pastor				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Ricardo Peredo			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/11/2015		Houston	Texas 77071	5.00
	occupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Pastor				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Amelia Perez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/11/2015		Houston	Texas 77034	50.00
8 Principal	occupation / Job title (See Instructions)		9 Employer (See Instruc	stions)
Pastor				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
			- \ /	1

SCHEDULE A	1\
------------	----

The Instruction	Guide explains how to complet	e this form.		1 Total Pages Schedule A1:
2 FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	Benjamin Perez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/11/2015		Pasadena	Texas 77502	5.00
8 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instrue	ctions)
Pastor				
4 Date	5 Full name of contributor Floresmindo Ramero	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/11/2015	6 Contributor address;	City;	State; Zip Code	- 5.00
9/11/2015				5.00
8 Principal occ Pastor	cupation / Job title (See Instructions)		9 Employer (See Instrue	ctions)
4 Date	5 Full name of contributor Kelley Ramero	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/11/2015	6 Contributor address;	City;	State; Zip Code	- 5.00
8 Principal occ Pastor	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Lupita Ramos	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/11/2015	6 Contributor address;	City; Crosby	State; Zip Code Texas 77632	- 5.00
8 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instrue	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Maria Ramos			7 Amount of contributions (\$) 46 of 140

SCHEDULE A	1
------------	---

The Instruction G	uide explains how to complete t	1 Total Pages Schedule A1:		
2 FILER NAME B	enjamin L Hall	3 Filer ID (Ethics Commission filers)		
	6 Contributor address;	City;	State; Zip Code	
9/11/2015		Crosby	Texas 77632	5.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Pastor				
4 Date	5 Full name of contributor	out of state P	PAC(ID#)	
	Perez Ruben			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/11/2015		Houston	Texas 77034	50.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Pastor				
4 Date	5 Full name of contributor	out of state P	PAC(ID#)	
	Eleuteruo Saenz			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/11/2015				25.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Pastor				
4 Date	5 Full name of contributor	out of state P	PAC(ID#)	
	Marcos Urbina			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/11/2015		Houston	Texas 77075	6.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	l tions)
Pastor				

The Instruction	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Maria Urbina			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/11/2015		Houston	Texas 77075	6.00
8 Principal occ	Lupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Pastor				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Ramon Valdez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/11/2015				25.00
8 Principal occ Pastor	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Eliseo Vega			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/11/2015		Katy	Texas 77449	5.00
8 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Pastor				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Juany Vega			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/11/2015		Katy	Texas 77449	5.00
8 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
Pastor				
4 Date	5 Full name of contributor	out of state	PAC(ID#)]

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

The Instruction	Guide explains how to complete	1 Total Pages Schedule A1:		
2 FILER NAME	E Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	Hector Velasquez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/11/2015		Houston	Texas 77089	25.00
8 Principal of Pastor	ccupation / Job title (See Instructions)		9 Employer (See Instruc	L ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Jacob Velasquez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/11/2015		Houston	Texas 77080	25.00
8 Principal of Pastor	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Maricela Velasquez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/11/2015		Houston	Texas 77080	25.00
8 Principal of Pastor	ccupation / Job title (See Instructions)		9 Employer (See Instruc	L ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Javier Zuniga	_		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/11/2015		Pasadena	Texas	25.00
8 Principal of Pastor	ccupation / Job title (See Instructions)		9 Employer (See Instruc	L ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Roderick Byrd	_		7 Amount of contributions (\$)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 The Instruction Guide explains how to complete this form. Total Pages Schedule A1: 1 3 Filer ID (Ethics Commission filers) 2 FILER NAME Benjamin L Hall 6 Contributor address; Zip Code City; State; 9/19/2015 2.00 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 8 Warehouse 4 Date 5 Full name of contributor out of state PAC(ID#) Curtis Daniels Amount of contributions (\$) 6 Contributor address; Zip Code City; State; 9/19/2015 Houston Texas 1.17 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Disabled 4 Date 5 Full name of contributor out of state PAC(ID#) Michael Goode Amount of contributions (\$) 6 Contributor address; City; Zip Code State; 9/19/2015 5.00 Houston Texas Principal occupation / Job title (See Instructions) 8 9 Employer (See Instructions) Carpenter 4 Date 5 Full name of contributor out of state PAC(ID#) Eola M. Jones Amount of contributions (\$) 6 Contributor address; City; State; Zip Code

	9/19/2015		Houston	Texas 77053	5.00	
8	8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
	Corporate Con	npliance				

SCHEDULE A1

The Instruction G	Suide explains how to complete	1 Total Pages Schedule A1:		
2 FILER NAME E	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Ken Lasley			7 Amount of contributions (\$)
9/19/2015	6 Contributor address;	City;	State; Zip Code	0.92
0,10,2010				
8 Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Student				
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	John Lee			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/19/2015		Houston	Texas 77045	5.00
8 Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Teacher				
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Lillie Sanders			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/19/2015				8.00
8 Principal occu	Lupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Retired				
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	James Mclin			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/19/2015		Houston	Texas 77045	5.00
8 Principal occu	Jupation / Job title (See Instructions)		9 Employer (See Instruc	l stions)
Sales				
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	

SCHEDULE A1

The Instruction	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	Eric			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/19/2015		Houston	Texas 77057	5.00
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Technician				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Jamie Johnson			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/19/2015		Houston	Texas	2.00
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Teacher (Vi	ctory Prep)			
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Stephanie Pete			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/19/2015		Houston	Texas 77045	2.00
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Med Tech				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Betty West			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/19/2015		Houston	Texas 77053	2.00
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
House Wife				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Paola Escobar			7 Amount of contributions (\$)

SCHEDULE /	41
------------	----

The Instruction	Guide explains how to comple	te this form			1 Total Pages Schedule A1:
2 FILER NAME	Benjamin L Hall				3 Filer ID (Ethics Commission filers)
9/19/2015	6 Contributor address;	City;	State;	Zip Code	1.00
3 Principal oc	cupation / Job title (See Instructions)		9 Employ	ver (See Instruc	tions)
House Wife				,	
1 Date	5 Full name of contributor	out of state	PAC(ID#)		
	Dagene Woods				7 Amount of contributions (\$)
	6 Contributor address;	City;	State;	Zip Code	
9/19/2015		Houston	Texas		1.00
3 Principal oct Student	cupation / Job title (See Instructions)		9 Employ	ver (See Instruc	tions)
1 Date	5 Full name of contributor	out of state	PAC(ID#)		
	Pat Evans				7 Amount of contributions (\$)
	6 Contributor address;	City;	State;	Zip Code	
9/19/2015		Houston	Texas		1.00
3 Principal oc	cupation / Job title (See Instructions)		9 Employ	ver (See Instruc	tions)
Delivery Driv	ver				
1 Date	5 Full name of contributor	out of state	PAC(ID#)		
	Augustus Jones	_			7 Amount of contributions (\$)
	6 Contributor address;	City;	State;	Zip Code	
9/19/2015					1.00
3 Principal oc	cupation / Job title (See Instructions)		9 Employ	ver (See Instruc	tions)
Lineman Ce	nterpoint Energy				

SCHEDULE A1

The Instruction G	uide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FILER NAME B	enjamin L Hall			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Michael Robertson			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/19/2015			· ·	1.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Senior Citizen				
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Aryanna Davis			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/19/2015				4.47
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Student				
	E E II a second construite de la			T
4 Date	5 Full name of contributor	out of state F	AC(ID#)	
	Carl Evans			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/19/2015				25.00
			I	
	pation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Evans Insuran	ce/Investment Services			
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Claude Foster			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/19/2015				50.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Consultant	· · · · · · · · · · · · · · · · · · ·			
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	

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

The Instruction	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	Beny Remedios			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/24/2015		Bellaire	TX 77401	100.00
8 Principal of	ccupation / Job title (See Instructions)		9 Employer (See Instrue	ctions)
Oral Surge	on		Self	
4 Date	5 Full name of contributor Margarita Villalobos	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code Texas	- 10.00
8 Principal of House Wife	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Alfredo Tzuban	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code Texas	- 10.00
8 Principal of Laborer	ccupation / Job title (See Instructions)		9 Employer (See Instrue	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Fausto Garcia			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/24/2015		Houston	Texas 77057	10.00
8 Principal of Cleaner	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Marina Quiroz			7 Amount of contributions (\$)

SCHEDULE A	1
------------	---

The Instruction G	uide explains how to complete		1 Total Pages Schedule A1:	
2 FILER NAME B	enjamin L Hall			3 Filer ID (Ethics Commission filers)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77032	10.00
8 Principal occu Alterations	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor Santos Rosales	out of state F	PAC(ID#)	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code Texas 77036	10.00
8 Principal occu Painter	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor Fernando Ortega	out of state F	AC(ID#)	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code Texas 77074	5.00
8 Principal occu Construction	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor Antonio Herrera	out of state F	PAC(ID#)	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code Texas 77081	5.00
8 Principal occu Laborer	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)

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

The Instruction C	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FILER NAME I	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Juan Arias			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77081	5.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Laborer				
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Jose Ruiz			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77081	5.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Mechanic				
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Isabel Ruiz			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77081	5.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Secretary				
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Yolanda Rodriguez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77074	5.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	l tions)
House Wife				
4 Date	5 Full name of contributor	out of state F	I PAC(ID#_)	
	I		、 <i>、</i>	57 of 140

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

he Instruction	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	Franco Rodriguez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77074	5.00
Principal oc Mechanic	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Date	5 Full name of contributor Rodolfo Torres	out of state	PAC(ID#)	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77032	5.00
Principal oc Mechanic	ccupation / Job title (See Instructions)		9 Employer (See Instruc	L ctions)
Date	5 Full name of contributor Jose Hernandez	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code Texas 77057	5.00
Principal oc Laborer	ccupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Date	5 Full name of contributor Yanet Hernandez	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code Texas 77074	5.00
Principal oc House Wife	ccupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
. Date	5 Full name of contributor Jonathan Garcia	out of state	PAC(ID#)	7 Amount of contributions (\$)

SCHEDULE A	1
------------	---

The Instruction G	uide explains how to complete	1 Total Pages Schedule A1:		
2 FILER NAME E	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77036	5.00
8 Principal occu Student	I upation / Job title (See Instructions)		9 Employer (See Instruc	L
4 Date	5 Full name of contributor Luis Guzman	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code Texas 77036	5.00
8 Principal occu Laborer	I upation / Job title (See Instructions)		9 Employer (See Instruc	L
4 Date	5 Full name of contributor Daisy Pineda	out of state l	PAC(ID#)	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code Texas 77057	5.00
8 Principal occu House Wife	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor Denisse Alvarado	out of state l	PAC(ID#)	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code Texas 77035	5.00
8 Principal occu Student	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)

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

The Instruction C	Guide explains how to complet	e this form.		1 Total Pages Schedule A1:
2 FILER NAME I	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Hersson Merino			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77081	5.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	
Laborer				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Francis Guzman			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77036	5.00
8 Principal occ House Wife	upation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Diana E. Garcia			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/24/2015		Houston	Texas 77074	5.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	Lions)
House Wife				
4 Date	5 Full name of contributor Maritza Garcia	out of state	PAC(ID#)	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	•
9/24/2015		Houston	Texas 77042	5.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
Tailor				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	1

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

The Instruction	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	Alex Renteria			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas	5.00
	cupation / Job title (See Instructions) e Apartment Complex		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Maria Henriquez	out of state	PAC(ID#)	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77074	5.00
8 Principal oco House Wife	cupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
4 Date	5 Full name of contributor Jorge Lopez	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code Texas 77081	5.00
8 Principal occ Construction	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Luis A. Gomez	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code Texas 77035	5.00
8 Principal occ Driver	cupation / Job title (See Instructions)		9 Employer (See Instruc	Detions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Lauia Martinez			7 Amount of contributions (\$)

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

The Instruction (Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77036	5.00
8 Principal occ House Wife	I upation / Job title (See Instructions)		9 Employer (See Instruc	 ctions)
4 Date	5 Full name of contributor Luis Barreva	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code Texas 77084	5.00
8 Principal occ Laborer	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Rosa Guarcas			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77081	5.00
8 Principal occ House Keep	upation / Job title (See Instructions) er		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor Fany Patricia Rodriguez	out of state	PAC(ID#)	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77036	5.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	_L
House Keep	er			

SCHEDULE	E A1
----------	------

The Instruction Guide explains how to complete this form.				1 Total Pages Schedule A1:
2 FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Denis Hernandez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77081	5.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Construction				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Mario Martinez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77035	5.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Construction				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Josua Mendoza			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77036	5.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Laborer				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Fredy O. Nolasco			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77074	5.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	Litions)
Student				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	

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

The Instruction	Guide explains how to complet	te this form.		1 Total Pages Schedule A1:
2 FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	Elfida Campos			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/24/2015		Houston	Texas 77081	5.00
8 Principal of House Wife	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Blanco Rivera			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/24/2015		Houston	Texas 77074	5.00
8 Principal of House Kee	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Juan Torres			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/24/2015		Houston	Texas 77036	5.00
	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Chef				
4 Date	5 Full name of contributor Juliana Orduna	out of state	PAC(ID#)	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/24/2015		Houston	Texas 77035	5.00
8 Principal of House Wife	ccupation / Job title (See Instructions) e		9 Employer (See Instruc	L ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Ana Rapalo			7 Amount of contributions (\$)

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

The Instruction G	Guide explains how to complete	1 Total Pages Schedule A1:		
2 FILER NAME	Benjamin L Hall	3 Filer ID (Ethics Commission filers)		
	1			
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77081	5.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
House wife				
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Carlos Palanco			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77036	5.00
8 Principal occ	Lupation / Job title (See Instructions)		9 Employer (See Instruc	Ltions)
Machine Ope	rator			
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Maria E. Rios			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77063	5.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	L tions)
Cosmetology				
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Moisas Garcia	_		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77057	5.00
8 Principal occ	Lupation / Job title (See Instructions)		9 Employer (See Instruc	Ltions)
Laborer				

SCHEDULE A	1
------------	---

The Instruction	Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:
2 FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	German Herrera			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77057	5.00
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	
Laborer				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Ana K. Alavarez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77063	1.00
8 Principal occ Student	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	-
	Franklin Herrera			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77063	1.00
8 Principal oc	Lupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Laborer				
4 Date	5 Full name of contributor Eva Garcia	out of state	PAC(ID#)	7 Amount of contributions (\$)
	6 Contributor address;	Citur	State; Zip Code	-
9/24/2015		City; Houston	State; Zip Code Texas 77099	1.00
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
House Wife				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	

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

he Instruction	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	Carmen Gomez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77035	1.00
Principal oc House Wife	ccupation / Job title (See Instructions)		9 Employer (See Instruc	L ctions)
. Date	5 Full name of contributor Maria Sosa	out of state	PAC(ID#)	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/24/2015		Houston	Texas 77081	1.00
Principal oc House Wife	ccupation / Job title (See Instructions)		9 Employer (See Instruc	L ctions)
Date	5 Full name of contributor Claudia Reyes	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code Texas 77074	1.00
Principal oc House Wife	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Date	5 Full name of contributor Jose Lainez	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code Texas 77036	1.00
Principal oc Mechanic	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Date	5 Full name of contributor Evelyn Trejo	out of state	PAC(ID#)	7 Amount of contributions (\$)

The Instruction G	uide explains how to complete t	1 Total Pages Schedule A1:		
2 FILER NAME B	Benjamin L Hall	3 Filer ID (Ethics Commission filers)		
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77036	1.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
House Wife				
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Jessica Mejia			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77074	1.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
House Wife				
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Jose Arratia			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77036	1.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Laborer				
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Jennifer Flores			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77057	1.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
House Wife				

SCHEDULE A1

The Instruction G	uide explains how to complete	1 Total Pages Schedule A1:		
2 FILER NAME E	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Ana L Garcia			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77036	1.00
8 Principal occu	Iupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
House Wife	· · · · /			,
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Alba Guzman			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77036	1.00
8 Principal occu House Wife	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Andrea Sanchez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77096	1.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Student				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Bertha Quich			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77057	1.00
8 Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
House Wife	. ,			
4 Date	5 Full name of contributor	out of state	PAC(ID#)	

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

The Instruction G	uide explains how to complete	this form.		1 Total Pages Schedule A1:
2 FILER NAME B	enjamin L Hall			3 Filer ID (Ethics Commission filers)
	Marta Quich			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77057	1.00
8 Principal occu House Wife	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor Gloria Romero	out of state I	PAC(ID#)	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77042	1.00
8 Principal occu Cosmetology	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor Moises Perez	out of state I	PAC(ID#)	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code Texas 77074	1.00
8 Principal occu Painter	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor Juan Arias	out of state I	PAC(ID#)	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code Texas 77081	4.00
8 Principal occu Labor Work	pation / Job title (See Instructions)		9 Employer (See Instruc	L tions)
4 Date	5 Full name of contributor Fredy Promotor	out of state I	PAC(ID#)	7 Amount of contributions (\$)

SCH	IEDUL	LE A1

The Instruction Guide explains how to complete this form.			1 Total Pages Schedule A1:		
2 FILE	R NAME B	enjamin L Hall			3 Filer ID (Ethics Commission filers)
		6 Contributor address;	City;	State; Zip Code	
9/2	4/2015		Houston	Texas 77081	2.00
8 P	rincipal occu	Leftion / Job title (See Instructions)		9 Employer (See Instruc	L tions)
v	/elder				
4 D	ate	5 Full name of contributor	out of state F	PAC(ID#)	
		Helen Paretta			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
9/2	4/2015		Houston	Texas 77035	2.00
8 P	rincipal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	louse Keepin				
4 D	ate	5 Full name of contributor	out of state F	PAC(ID#)	
		Vanessa Vanessa			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
9/2	4/2015		Houston	Texas 77074	2.00
8 P	rincipal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	louse Wife				
4 D	ate	5 Full name of contributor	out of state F	PAC(ID#)	
		Emerita Medina			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
9/2	4/2015		Houston	Texas 77081	2.00
8 P	rincipal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	l tions)
-	rovider	· · · · · · · · · · · · · · · · · · ·			

The Instruction (Guide explains how to complet	te this form		1 Total Pages Schedule A1:
				T Total Tages Schedule AT.
2 FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
4 Date	te 5 Full name of contributor out of state PAC(ID#)		PAC(ID#)	
	Milvian Estrada			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77036	1.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Student				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	T
	Veronica Gutierrez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77074	1.00
8 Principal occ House Wife	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Maricela Tax			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77036	5.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
House Wife				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Abelardo Coc			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77036	5.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	Lctions)
Pastor				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	T

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

The Instruction	Guide explains how to complet	e this form.		1 Total Pages Schedule A1:
2 FILER NAME	E Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	Natalia Suy			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77056	5.00
8 Principal o Cashier	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Mancela Poac	out of state	PAC(ID#)	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77036	5.00
3 Principal o House Wife	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Juan Fuentes	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code Texas 77071	3.00
	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Deborah Velasquez	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code Texas 77081	1.00
3 Principal o House Wife	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ptions)
4 Date	5 Full name of contributor Aida Garay	out of state	PAC(ID#)	7 Amount of contributions (\$) 73 of 140

SCHEDULE A

Cook 4 Date 5 Full name of contributor Matilde Chan out of state PAC(ID#) 7 Amount of contributions (\$) 8/24/2015 6 Contributor address; City; State; Zip Code Houston 1.00 8 Principal occupation / Job title (See Instructions) House Wife 9 Employer (See Instructions) 7 Amount of contributions (\$) 4 Date 5 Full name of contributor Griselda Poncio out of state PAC(ID#) 7 Amount of contributions (\$) 9/24/2015 5 Full name of contributor Griselda Poncio out of state PAC(ID#) 7 Amount of contributions (\$) 8 Principal occupation / Job title (See Instructions) House Wife 9 Employer (See Instructions) 1.00 4 Date 5 Full name of contributor House Wife out of state PAC(ID#) 7 Amount of contributions (\$) 4 Date 5 Full name of contributor Halmar Avvatia out of state PAC(ID#) 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City; State; Zip Code Houston 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City; State; Zip Code Houston 1.00 <th></th> <th></th> <th></th> <th></th> <th></th>					
9/24/2015 6 Contributor address; City; State; Zip Code 8 Principal occupation / Job title (See Instructions) 0 employer (See Instructions) 7 4 Date 5 Full name of contributor out of state PAC(ID#) 7 9/24/2015 Mailide Chan 7 Amount of contributions (S) 9/24/2015 6 Contributor address; City; State; Zip Code 9/24/2015 6 Contributor address; 0 out of state PAC(ID#) 7 Amount of contributions (S) 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 7 Amount of contributions (S) 9/24/2015 6 Contributor address; City; State; Zip Code 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00 9/24/2015 6 Contributor address; City; State; Zip Code 9/24/2015 6 Contributor address; City; State; Zip Code 9	The Instruction G	uide explains how to complete	this form.		1 Total Pages Schedule A1:
9/24/2015 6 Contributor address: City; State; Zip Code 9/24/2015 6 Contributor address; 0 Employer (See Instructions) 1.00 8 Principal occupation / Job title (See Instructions) 0 at of state PAC(ID#) 7 Amount of contributions (S) 9/24/2015 6 Contributor address; City; State; Zip Code 1.00 9/24/2015 Mailide Chan 7 Amount of contributions (S) 7 Amount of contributions (S) 9/24/2015 6 Contributor address; City; State; Zip Code 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 7 Amount of contributions (S) 4 Date 5 Full name of contributor out of state PAC(ID#) 7 Amount of contributors (S) 9/24/2015 Griseida Poncio Texas 77063 1.00 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00 9/24/2015 6 Contributor address: City; State; Zip Code 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instr					
924/2015 Houston Texas 77074 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Cook Amount of contributions (\$) 7 4 Date 6 Contributor address; City: State: Zip Code 9/24/2015 6 Contributor address; City: State: Zip Code 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 7 Amount of contributions (\$) 4 Date 5 Full name of contributor out of state PAC(ID#) 7 Amount of contributions (\$) 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00 4 Date 5 Full name of contributor out of state PAC(ID#) 7 Amount of contributions (\$) 4 Date 5 Full name of contributor out of state PAC(ID#) 7 Amount of contributions (\$) 4 Date <td>2 FILER NAME B</td> <td>enjamin L Hall</td> <td></td> <td></td> <td>3 Filer ID (Ethics Commission filers)</td>	2 FILER NAME B	enjamin L Hall			3 Filer ID (Ethics Commission filers)
924/2015 Houston Texas 77074 1.00 8 Principal occupation / Job title (See Instructions) 2 Employer (See Instructions) Cook 5 Full name of contributor out of state PAC(ID#) 7 4 Date 5 Full name of contributor out of state PAC(ID#) 7 9/24/2015 6 Contributor address; City; State; Zip Code 9/24/2015 6 Contributor address; City; State; Zip Code 9/24/2015 6 Contributor address; 0 cut of state PAC(ID#) 7 Amount of contributions (\$) 4 Date 5 Full name of contributor out of state PAC(ID#) 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City; State; Zip Code 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00 4 Date 5 Full name of contributor out of state PAC(ID#) 7 Amount of contributions (\$) 4 Date 5 Full name of contributor out of st		[
8 Principal occupation / Job title (See Instructions) Cook 9 Employer (See Instructions) 4 Date 5 Full name of contributor Matilde Chan out of state PAC(ID#) 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City; State; Zip Code Houston 7 Amount of contributions (\$) 8 Principal occupation / Job title (See Instructions) House Wife 9 Employer (See Instructione) House Wife 9 Employer (See Instructione) 4 Date 5 Full name of contributor Griselda Poncio out of state PAC(ID#) 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City; State; Zip Code Houston 7 Amount of contributions (\$) 9 Principal occupation / Job title (See Instructions) House Wife 9 Employer (See Instructione) 7 Amount of contributions (\$) 4 Date 5 Full name of contributor Halmar Avvatia out of state PAC(ID#) 7 Amount of contributions (\$) 4 Date 5 Full name of contributor Halmar Avvatia out of state PAC(ID#) 7 Amount of contributions (\$) 9 24/2015 5 Full name of contributor Halmar Avvatia out of state PAC(ID#) 7 <td< td=""><td></td><td>6 Contributor address;</td><td>City;</td><td>State; Zip Code</td><td></td></td<>		6 Contributor address;	City;	State; Zip Code	
Cook 4 Date 5 Full name of contributor Matilde Chan out of state PAC(ID#) Matilde Chan 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City: State: Zip Code Houston 7 Amount of contributions (\$) 8 Principal occupation / Job title (See Instructions) House Wife 9 Employer (See Instructions) 1.00 4 Date 5 Full name of contributor Griselda Poncio out of state PAC(ID#) Griselda Poncio 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City: State: Zip Code Houston 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City: State: Zip Code Houston 1.00 8 Principal occupation / Job title (See Instructions) House Wife 9 Employer (See Instructions) 1.00 4 Date 5 Full name of contributor Halmar Avvatia out of state PAC(ID#) Halmar Avvatia 7 Amount of contributions (\$) 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 7 Amount of contributions (\$) 8/24/2015 6 Contributor address; City: State; Zip Code Houston<	9/24/2015		Houston	Texas 77074	1.00
Cook 4 Date 5 Full name of contributor Matilde Chan out of state PAC(ID#) Matilde Chan 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City: State: Zip Code Houston 7 Amount of contributions (\$) 8 Principal occupation / Job title (See Instructions) House Wife 9 Employer (See Instructions) 1.00 4 Date 5 Full name of contributor Griselda Poncio out of state PAC(ID#) Griselda Poncio 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City: State: Zip Code Houston 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City: State: Zip Code Houston 1.00 8 Principal occupation / Job title (See Instructions) House Wife 9 Employer (See Instructions) 1.00 4 Date 5 Full name of contributor Halmar Avvatia out of state PAC(ID#) Halmar Avvatia 7 Amount of contributions (\$) 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 7 Amount of contributions (\$) 8/24/2015 6 Contributor address; City: State; Zip Code Houston<	8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date 5 Full name of contributor out of state PAC(ID#) 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City: State: Zip Code 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00 1.00 4 Date 5 Full name of contributor out of state PAC(ID#) 7 Amount of contributions (\$) 9/24/2015 S Full name of contributor out of state PAC(ID#) 7 Amount of contributions (\$) 4 Date 5 Full name of contributor out of state PAC(ID#) 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City: State; Zip Code 1.00 9/24/2015 Houston Texas 77063 1.00 1.00 1.00 4 Date 5 Full name of contributor out of state PAC(ID#) 7 Amount of contributions (\$) 4 Date 5 Full name of contributor out of state PAC(ID#) 7 Amount of contributions (\$) 9/24/2015 City: State; Zip Code 1.00 1.00 9/24/2015		· · · · · · · · · · · · · · · · · · ·			
Matilde Chan 7 Amount of contributions (\$) 6 Contributor address; City; State; Zip Code 9/24/2015 Houston Texas 77036 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00 4 Date 5 Full name of contributor out of state PAC(ID#) 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City; State; Zip Code 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00 4 Date 5 Full name of contributor I out of state PAC(ID#) 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City; State; Zip Code 1.00 9/24/2015 6 Contributor address; City; State; Zip Code 1.00 9/24/2015 6 Contributor address; City;					
9/24/2015 6 Contributor address; City; State; Zip Code 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00 4 Date 5 Full name of contributor out of state PAC(ID#) 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City; State; Zip Code 7 9/24/2015 6 Contributor address; City; State; Zip Code 7 9/24/2015 6 Contributor address; City; State; Zip Code 7 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 7 Amount of contributions (\$) 4 Date 5 Full name of contributor I out of state PAC(ID#) 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City; State; Zip Code 7 9/24/2015 6 Contributor address; City; State; Zip Code 1.00 8 Principal occupation / Job title (See Instructions) 6 Contribut	4 Date	5 Full name of contributor	out of state P	PAC(ID#)	
9/24/2015 Houston Texas 77036 1.00 8 Principal occupation / Job title (See Instructions) House Wife 9 Employer (See Instructions) 4 Date 5 Full name of contributor Griselda Poncio out of state PAC(ID#) 6 Contributor address; 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City; Houston State; Very: Texas 77063 Zip Code 1.00 8 Principal occupation / Job title (See Instructions) House Wife 9 Employer (See Instructions) 7 4 Date 5 Full name of contributor Halmar Avvatia out of state PAC(ID#) 1.00 7 4 Date 5 Full name of contributor Halmar Avvatia out of state PAC(ID#) 1.00 7 9/24/2015 6 Contributor address; 2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/		Matilde Chan			7 Amount of contributions (\$)
9/24/2015 Houston Texas 77036 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 4 Date 5 Full name of contributor out of state PAC(ID#) 7 4 Date 5 Full name of contributor out of state PAC(ID#) 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City; State; Zip Code 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00 4 Date 5 Full name of contributor out of state PAC(ID#) 7 Amount of contributions (\$) 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 7 Amount of contributions (\$) 9/24/2015 5 Full name of contributor out of state PAC(ID#) 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City; State; Zip Code 1.00 9/24/2015 6 Contributor address; City; State; Zip Code 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00					
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 4 Date 5 Full name of contributor Griselda Poncio out of state PAC(ID#) 7 7 9/24/2015 6 Contributor address; City; State; Zip Code Houston 7 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00 4 Date 5 Full name of contributor Halmar Avvatia out of state PAC(ID#) Halmar Avvatia 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City; State; Zip Code Houston 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City; State; Zip Code Houston 7 Amount of contributions (\$) 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00		6 Contributor address;	City;	State; Zip Code	
House Wife 4 Date 5 Full name of contributor Griselda Poncio out of state PAC(ID#) Griselda Poncio 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City; State; Zip Code Houston 7 Amount of contributions (\$) 8 Principal occupation / Job title (See Instructions) House Wife 9 Employer (See Instructions) 1.00 4 Date 5 Full name of contributor Halmar Avvatia out of state PAC(ID#) Out of state PAC(ID#) 7 Amount of contributions (\$) 6 Contributor address; City; State; Zip Code Zip Code 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City; State; Zip Code Louston 7 Amount of contributions (\$) 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00	9/24/2015		Houston	Texas 77036	1.00
House Wife 4 Date 5 Full name of contributor Griselda Poncio out of state PAC(ID#) Griselda Poncio 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City; State; Zip Code Houston 7 Amount of contributions (\$) 8 Principal occupation / Job title (See Instructions) House Wife 9 Employer (See Instructions) 1.00 4 Date 5 Full name of contributor Halmar Avvatia out of state PAC(ID#) Out of state PAC(ID#) 7 Amount of contributions (\$) 6 Contributor address; City; State; Zip Code Zip Code 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City; State; Zip Code Louston 7 Amount of contributions (\$) 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00					
4 Date 5 Full name of contributor out of state PAC(ID#) 7 Amount of contributions (\$) 6 Griselda Poncio 7 Amount of contributions (\$) 6 9/24/2015 6 Contributor address; City; State; Zip Code 9/24/2015 6 Contributor address; City; State; Zip Code 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00 4 Date 5 Full name of contributor out of state PAC(ID#) 7 Amount of contributions (\$) 4 Date 5 Full name of contributor out of state PAC(ID#) 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City; State; Zip Code 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00	8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Griselda Poncio 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City; State; Zip Code 9/24/2015 Houston Texas 77063 1.00 8 Principal occupation / Job title (See Instructions) House Wife 9 Employer (See Instructions) 9 4 Date 5 Full name of contributor Halmar Avvatia out of state PAC(ID#) 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City; State; Zip Code 7 9/24/2015 Full name of contributor Halmar Avvatia Out of state PAC(ID#) 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City; State; Zip Code 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00	House Wife				
Griselda Poncio 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City; State; Zip Code 9/24/2015 Houston Texas 77063 1.00 8 Principal occupation / Job title (See Instructions) House Wife 9 Employer (See Instructions) 9 4 Date 5 Full name of contributor Halmar Avvatia out of state PAC(ID#) 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City; State; Zip Code 7 9/24/2015 Full name of contributor Halmar Avvatia Out of state PAC(ID#) 7 Amount of contributions (\$) 9/24/2015 6 Contributor address; City; State; Zip Code 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00					
9/24/2015 6 Contributor address; City; State; Zip Code 9/24/2015 Houston Texas 77063 1.00 8 Principal occupation / Job title (See Instructions) House Wife 9 Employer (See Instructions) 4 Date 5 Full name of contributor Halmar Avvatia out of state PAC(ID#) Halmar Avvatia 7 9/24/2015 6 Contributor address; City; State; Zip Code Houston 7 9/24/2015 6 Contributor address; City; State; Zip Code Houston 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00	4 Date	5 Full name of contributor	out of state P	PAC(ID#)	
9/24/2015 Houston Texas 77063 1.00 8 Principal occupation / Job title (See Instructions) House Wife 9 Employer (See Instructions) 4 Date 5 Full name of contributor Halmar Avvatia out of state PAC(ID#) 7 Amount of contributions (\$) 6 Contributor address; City; State; Zip Code 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00		Griselda Poncio			7 Amount of contributions (\$)
9/24/2015 Houston Texas 77063 1.00 8 Principal occupation / Job title (See Instructions) House Wife 9 Employer (See Instructions) 4 Date 5 Full name of contributor Halmar Avvatia out of state PAC(ID#) 7 Amount of contributions (\$) 6 Contributor address; City; State; Zip Code 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 1.00					
8 Principal occupation / Job title (See Instructions) House Wife 9 Employer (See Instructions) 4 Date 5 Full name of contributor Halmar Avvatia 0 ut of state PAC(ID#) 6 Contributor address; City; State; Zip Code Houston 9/24/2015 6 Contributor address; City; State; Zip Code Zip Code 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)		6 Contributor address;	City;	State; Zip Code	
House Wife 4 Date 5 Full name of contributor out of state PAC(ID#) Halmar Avvatia 7 Amount of contributions (\$) 6 Contributor address; City; State; Zip Code 9/24/2015 Houston Texas 77036 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	9/24/2015		Houston	Texas 77063	1.00
House Wife 4 Date 5 Full name of contributor out of state PAC(ID#) Halmar Avvatia 7 Amount of contributions (\$) 6 Contributor address; City; State; Zip Code 9/24/2015 Houston Texas 77036 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)					
4 Date 5 Full name of contributor out of state PAC(ID#) Halmar Avvatia 7 Amount of contributions (\$) 6 Contributor address; City; State; Zip Code 9/24/2015 Houston Texas 77036 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Halmar Avvatia 7 Amount of contributions (\$) 6 Contributor address; City; State; Zip Code 9/24/2015 Houston Texas 77036 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	House Wife				
Halmar Avvatia 7 Amount of contributions (\$) 6 Contributor address; City; State; Zip Code 9/24/2015 Houston Texas 77036 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)					
9/24/2015 6 Contributor address; City; State; Zip Code 9/24/2015 Houston Texas 77036 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	4 Date		out of state P	AC(ID#)	
9/24/2015 Houston Texas 77036 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)		Halmar Avvatia			7 Amount of contributions (\$)
9/24/2015 Houston Texas 77036 1.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)					
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)		6 Contributor address;	City;	State; Zip Code	
	9/24/2015		Houston	Texas 77036	1.00
Worker	8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Worker				

SCHEDULE /	41
------------	----

The last starts		- (1. ¹ - (
The Instruction	Guide explains how to complet	e this form.		1 Total Pages Schedule A1:
2 FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Maria F. Lainez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77026	1.00
8 Principal oco	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Stay at hom	e			
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Astrid Domingo			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77096	1.00
8 Principal oco House Keep	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Hamron Zuniga	_		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77081	3.00
8 Principal oco	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Laborer				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Manuel Mota			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	Texas 77074	3.00
8 Principal oco	cupation / Job title (See Instructions)		9 Employer (See Instruc	L tions)
Landscaping	g			
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
l	1			75 of 140

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

he Instruction	Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:
FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	Esther Garza			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	TX 77015	1.00
Principal or	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Pharmacy ⁻	Technician			
Date	5 Full name of contributor Inez Saenz	out of state	PAC(ID#)	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	TX 77029	1.00
Principal or Pastor	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Date	5 Full name of contributor Alejandra Carmona	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Baytown	State; Zip Code TX 77520	- 5.00
Principal or	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Dolex Emp	loyee			
Date	5 Full name of contributor Julieta Moreno	out of state	PAC(ID#)	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	TX 77029	1.00
Principal or House Wife	ccupation / Job title (See Instructions)		9 Employer (See Instruc	_L ctions)
Date	5 Full name of contributor	out of state	PAC(ID#)	
	Belen Gracia			7 Amount of contributions (\$)

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

The Instruction C	Guide explains how to complete	this form.		1 Total Pages Schedule A1:
2 FILER NAME I	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Channelview	TX 77530	5.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
House Wife				
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Juan P. Cavazos			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	TX 77011	1.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	L tions)
Pastor				
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Jose L. Cokenje			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	TX 77015	1.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Machine Wo	rker			
4 Date	5 Full name of contributor	out of state P	PAC(ID#)	
	Esperanza Colunja			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	TX 77015	1.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	L tions)
House Wife	. , , , ,			

The Instruction (Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Manuel Salazar			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	TX 77049	1.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
Pastor				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	SanJuana Salazar			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/24/2015		Houston	TX 77049	1.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
House Wife				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Emmanuel Sanchez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/24/2015		Channelview	TX 77530	1.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	Letters)
Pastor				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Margarita Colvera			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	TX 77029	1.00
8 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	Lions)
Bodega				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	1

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

The Instruction	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	Martha Gonzalez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/24/2015		Houston	TX 77013	1.00
8 Principal oc Supervisor	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor Guillernia Parga	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77013	- 1.00
8 Principal oc Welder	ccupation / Job title (See Instructions)		9 Employer (See Instruc	
4 Date	5 Full name of contributor Felipa Quijada	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77034	- 1.00
8 Principal oc Pastor	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ttions)
4 Date	5 Full name of contributor Irma A. Figueroa	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77034	1.00
8 Principal oc House Wife	cupation / Job title (See Instructions)		9 Employer (See Instruc	_Lctions)
4 Date	5 Full name of contributor Artone Vazquez	out of state	PAC(ID#)	7 Amount of contributions (\$)

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

The Instruction	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77049	- 1.00
B Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Driver				
4 Date	5 Full name of contributor Aurora Vazquez	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77049	1.00
3 Principal oco Nutritionist	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
1 Date	5 Full name of contributor Geraildo Salas	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77029	1.00
3 Principal oct Tooling Man	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
L Date	5 Full name of contributor Elisa Salas	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77029	1.00
3 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	L ctions)
Home				

The Instruction G	uide explains how to complete	this form.		1 Total Pages Schedule A1:
2 FILER NAME B	enjamin L Hall			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor	out of state I	PAC(ID#)	
	Debora Salas			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	TX 77029	1.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Student				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Ismael Garcia			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Houston	ТХ	1.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Escrow Accou	nting Assistant			
4 Date	5 Full name of contributor	out of state I	PAC(ID#)	
	Ana Villareal			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/23/2015		Houston	TX 77055	1.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Unemployed				
4 Date	5 Full name of contributor	out of state I	PAC(ID#)	
	Maria Valvedi			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/23/2015		Houston	TX 77092	1.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	Lions)
House Wife				
4 Date	5 Full name of contributor	out of state I	PAC(ID#)	

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

The Instruction	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	Jose Moreno			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/23/2015		Houston	TX 77055	1.00
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Student				
4 Date	5 Full name of contributor Augusto Rodriguez	out of state	PAC(ID#)	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/23/2015		Houston	TX 77061	2.00
8 Principal oc Guzma Pro	cupation / Job title (See Instructions) perty		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Jesus Cisneros	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77049	2.00
0/20/2010		Houston		2.00
8 Principal oc Operator	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Joshua Salas	out of state	PAC(ID#)	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/23/2015		Houston	TX 77084	2.00
8 Principal oc Student	cupation / Job title (See Instructions)		9 Employer (See Instruc	L ctions)
4 Date	5 Full name of contributor Adalberto Rodriguez	out of state	PAC(ID#)	7 Amount of contributions (\$)

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

The Instruction G	Guide explains how to complete	this form.		1 Total Pages Schedule A1:
2 FILER NAME E	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	l .			
	6 Contributor address;	City;	State; Zip Code	
9/23/2015		Baytown	TX 77520	5.00
8 Principal occu	Jupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Electrician				
	1			1
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Maria Medrano			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/23/2015		Houston	TX 77075	5.00
0 Dringinglagg	unation / Job title (Cae Instructions)		0 Employer (See Instrue	tione)
8 Principal occu Material Pulle	upation / Job title (See Instructions)		9 Employer (See Instruc	uons)
	31			
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Angelica Gamboa			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/23/2015		Houston	TX 77075	5.00
8 Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Stylist				
	I			
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Carmen Martinez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/23/2015		Houston	TX 77034	5.00
0 Principal acc	upation / Job title (See Instructions)		9 Employer (See Instrue	tione)
	apation / Job title (See Instructions)		9 Employer (See Instruc	uons)
House				

The lustice (a this fame		
The Instruction C	Guide explains how to complet	e this form.		1 Total Pages Schedule A1:
2 FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor	out of state PAC(ID#)		
	Jesus Nino			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/23/2015		Houston	TX 77076	5.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	L tions)
Construction				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Luis Herrera			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/23/2015		Houston	ТХ	1.00
8 Principal occ Professor	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Esther Flors			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/23/2015		Houston	ТХ	1.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	l xtions)
House Wife				
4 Date	5 Full name of contributor Ulma Hernandez	out of state	PAC(ID#)	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/23/2015		Houston	TX 77081	1.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	Lions)
House Wife				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	

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

The Instruction G	uide explains how to complete	this form.		1 Total Pages Schedule A1:
2 FILER NAME E	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	Silvia Cavazos			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/23/2015		Houston	TX 77011	1.00
8 Principal occu House Wife	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor Ester Enriquez	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77089	1.00
8 Principal occu Student	pation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Rosa Perez	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/23/2015	6 Contributor address;	City; Pasadena	State; Zip Code TX 77505	1.00
8 Principal occu House Wife	pation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4 Date	5 Full name of contributor Arthur Floyd	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX	1.00
8 Principal occu Retired	pation / Job title (See Instructions)		9 Employer (See Instruc	Lettions)
4 Date	5 Full name of contributor Lupita Tetzintla	out of state	PAC(ID#)	7 Amount of contributions (\$)

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

The Instruction G	uide explains how to complete t	1 Total Pages Schedule A1:		
2 FILER NAME B	enjamin L Hall			3 Filer ID (Ethics Commission filers)
	6 Contributor address;	City;	State; Zip Code	
9/23/2015		La Porte	ТХ	1.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
House Wife				
4 Date	5 Full name of contributor	out of state P	AC(ID#)	
	Claudia Velazquez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/23/2015		Houston	тх	1.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
House Wife				
4 Date	5 Full name of contributor	out of state P	PAC(ID#)	
	Maria Villareal			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/23/2015			ТХ	1.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	l tions)
House Wife				
4 Date	5 Full name of contributor	out of state P	PAC(ID#)	
	Marysabel Dominguez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/23/2015		Katy	тх	1.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
Accountant				

The Instructior	n Guide explains how to compl	1 Total Pages Schedule A1:		
2 FILER NAM	E Benjamin L Hall			3 Filer ID (Ethics Commission filers)
4 Date	Date 5 Full name of contributor out of state PAC(ID#)			
	Isaac Ramirez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
0/00/0045	o contributor address,	City,	State, Zip Code	
9/23/2015				1.00
8 Principal o	ccupation / Job title (See Instructions))	9 Employer (See Instr	ructions)
Furniture				
4 Date	5 Full name of contributor	out of state F		
4 Date			AC(ID#)	
	Ricardo Benavides			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/23/2015		Houston	TX 77093	1.00
8 Principal o	ccupation / Job title (See Instructions))	9 Employer (See Instr	ructions)
Machinest				
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Johnny Gay	_		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/23/2015				1.00
8 Principal o	ccupation / Job title (See Instructions))	9 Employer (See Instr	ructions)
Student		/		
Student				
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Mary Ramirez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/23/2015		Ony,		
3/23/2013				1.00
			I	
	ccupation / Job title (See Instructions))	9 Employer (See Instr	ructions)
House Wif	e			
4 Date	5 Full name of contributor	out of state F		
				l

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

_						
Th	e Instruction G	uide explains how to complete	1 Total Pages Sche	dule A1:		
2 6		enjamin L Hall			3 Filer ID (Ethics Commissi	on filers)
		Hugo Estrada			7 Amount of c	ontributions (\$)
		6 Contributor address;	City;	State; Zip Code		
	9/23/2015		Stafford	TX 77497	1	.00
				T		
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)	
	Pastor					
4	Date	5 Full name of contributor	out of state F	PAC(ID#)		
		Marceline Villareal			7 Amount of c	ontributions (\$)
		6 Contributor address;	City;	State; Zip Code		
	9/23/2015				1	.00
8	Principal occu	L pation / Job title (See Instructions)		9 Employer (See Instruc	tions)	
	House Wife					
					-	
4	Date	5 Full name of contributor	out of state F	PAC(ID#)		
		Carmen Garcia			7 Amount of c	ontributions (\$)
		6 Contributor address;	City;	State; Zip Code		
	9/23/2015				1	.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)	
	House Wife					
4	Date	5 Full name of contributor	out of state F	PAC(ID#)		
		Yolanda Patino			7 Amount of c	ontributions (\$)
		6 Contributor address;	City;	State; Zip Code		
	9/23/2015				1	.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	Lions)	
-	House Wife	· · · · · · · · · · · · · · · · · · ·				
	-					
4	Date	5 Full name of contributor	out of state F	PAC(ID#)		
		Doris Torres			7 Amount of c	ontributions (\$)
•		-			88 of 140	

The Instruction G	uide explains how to complete this form.	1 Total Pages Schedule A1:	
2 FILER NAME E	Benjamin L Hall		3 Filer ID (Ethics Commission filers)
	6 Contributor address; City;	State; Zip Code	
9/23/2015	Rosenburg	TX 77471	1.00
8 Principal occu Disabled	upation / Job title (See Instructions)	9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor out of stat	e PAC(ID#)	7 Amount of contributions (\$)
9/23/2015	6 Contributor address; City; Houston	State; Zip Code TX 77026	1.00
8 Principal occu House Wife	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor out of stat	e PAC(ID#)	7 Amount of contributions (\$)
9/23/2015	6 Contributor address; City;	State; Zip Code	1.00
8 Principal occu Driver	upation / Job title (See Instructions)	9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor out of stat	e PAC(ID#)	7 Amount of contributions (\$)
9/23/2015	6 Contributor address; City; Houston	State; Zip Code TX 77060	1.00
8 Principal occu House Wife	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)

The Instruction	Quida avalaina hay ta compl	ata thia farm		1 Total Dagas Schodula A4
The Instruction	Guide explains how to comple	1 Total Pages Schedule A1:		
2 FILER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
4 Date	Date 5 Full name of contributor out of state PAC(ID#)			
	Karen Collins			7 Amount of contributions (\$)
9/23/2015	6 Contributor address;	City;	State; Zip Code	- 1.00
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	ttions)
Home Healt	h Aid			
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Olga Chapa			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/23/2015		Houston	ТХ	1.00
8 Principal oc House Wife	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Mayra Velasquez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/23/2015		Houston	TX 77093	1.00
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Caregiver				
4 Date	5 Full name of contributor Frend Ramirez	out of state	PAC(ID#)	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/23/2015		Houston	ТХ	1.00
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	
House Wife				·
4 Date	5 Full name of contributor	out of state	PAC(ID#)	

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

The Instructior	n Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 FILER NAM	E Benjamin L Hall			3 Filer ID (Ethics Commission filers)
	Walter Martinez			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/23/2015		Houston	ТХ	1.00
3 Principal c	bccupation / Job title (See Instructions)		9 Employer (See Instru-	ctions)
Student				
1 Date	5 Full name of contributor Joshua Osime	out of stat	te PAC(ID#)	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/23/2015		Alief	TX 77411	1.00
3 Principal c Student	occupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
1 Date	5 Full name of contributor	out of sta	te PAC(ID#)	
	Murray Williams Jr.			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/23/2015				1.00
3 Principal c	bccupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
Retired				
1 Date	5 Full name of contributor	out of stat	te PAC(ID#)	
	Elizabeth Villareal			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/23/2015		Baytown	TX 77520	1.00
	occupation / Job title (See Instructions)		9 Employer (See Instru	L ctions)
1 Date	5 Full name of contributor	out of stat	te PAC(ID#)	
	Cris Tetzintla			7 Amount of contributions (\$)

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

The Instruction G	Guide explains how to complete	1 Total Pages Schedule A1:		
2 FILER NAME E	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
9/23/2015	6 Contributor address;	City;	State; Zip Code	1.00
8 Principal occu	Lupation / Job title (See Instructions)		9 Employer (See Instruc	l tions)
Pastor				
4 Date	5 Full name of contributor Perpetua Angel	out of state F	PAC(ID#)	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/23/2015		Baytown	ТХ	1.00
8 Principal occu House Wife	upation / Job title (See Instructions)		9 Employer (See Instruc	L tions)
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Rosalinda Amaya			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/24/2015		Baytown	TX 77521	5.00
8 Principal occu House wife	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	
	Patricia Navar			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
		Houston	Tx 77044	5.00
8 Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	L tions)
Realtor	. ,			

The	Instruction	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 FI	LER NAME	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Rudy Diaz			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
			Houston	Tx 77087	10.00
8	Principal occ	Lupation / Job title (See Instructions)		9 Employer (See Instruc	Lions)
	Student				
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Pedro Navar			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
			Houston	Tx 77044	5.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Self Employ	ed			
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Emilio Fuentes			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	-
			Houston	Tx 77049	5.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	Lions)
	Tax Advisor				
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Alfredo Nandin			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
			Houston	TX 77049	10.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
	Boilermaker	- Mech			
4	Date	5 Full name of contributor	out of state	PAC(ID#)	

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

The	Instruction G	uide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FI	LER NAME B	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
		Javier Amaya, Jr.			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	-
			Baytown	TX 77521	5.00
8	Principal occu Operator	upation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4	Date	5 Full name of contributor Daisy Jimenez	out of state	I PAC(ID#)	7 Amount of contributions (\$)
		6 Contributor address;	City; Deer Park	State; Zip Code TX 77536	- 5.00
8	Principal occu student	upation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4	Date	5 Full name of contributor Leo Sanchez	out of state	PAC(ID#)	7 Amount of contributions (\$)
		6 Contributor address;	City; Deer Park	State; Zip Code TX 77536	5.00
8	Principal occu Pipe Fitter	upation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4	Date	5 Full name of contributor Noemy Galicio	out of state	PAC(ID#)	7 Amount of contributions (\$)
		6 Contributor address;	City; Houston	State; Zip Code TX 77081	- 1.00
8	Principal occu House Wife	upation / Job title (See Instructions)		9 Employer (See Instruc	L ctions)
4	Date	5 Full name of contributor Noe Cortez	out of state	PAC(ID#)	7 Amount of contributions (\$)

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

The	Instruction G	uide explains how to complete	this form.		1 Total Pages Schedule A1:
2 FII	_ER NAME B	enjamin L Hall			3 Filer ID (Ethics Commission filers)
		6 Contributor address;	City; Houston	State; Zip Code TX 77081	1.00
			Tioustori		1.00
8	Principal occu House Wife	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor Enma Ponce	out of state F	AC(ID#)	7 Amount of contributions (\$)
		6 Contributor address;	City; Houston	State; Zip Code TX 77074	1.00
8	Principal occu Cashier	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor Vicente Gonzalez	out of state F	PAC(ID#)	7 Amount of contributions (\$)
		6 Contributor address;	City; Houston	State; Zip Code TX 77029	1.00
8	Principal occu Carpenter	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor Luis Aceituno	out of state F	AC(ID#)	7 Amount of contributions (\$)
		6 Contributor address;	City; Channelview	State; Zip Code TX 77530	1.00
8	Principal occu Acct.	pation / Job title (See Instructions)		9 Employer (See Instruc	Ltions)

The	In atrustian C		this forms		1 Total Damas Calendula A4
Ine	Instruction G	buide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FI	LER NAME E	Benjamin L Hall			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Santiago Moreno			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
			Houston	TX 77029	1.00
8	Principal occu	I Ipation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Unemployed				
4	Date	5 Full name of contributor	out of state	PAC(ID#)	1
		Sulma Gonzalez		- ()	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
			Houston	TX 77029	1.00
8	Principal occu	I upation / Job title (See Instructions)		9 Employer (See Instruc	ttions)
	House wife				
4	Date	5 Full name of contributor	out of state	PAC(ID#)	1
		Carmen Guerrero		- ()	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
			Houston	TX 77061	1.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Retired				
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
–	2010	Chridstian Esparza			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
			Glena Park	TX 77547	1.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	Ltions)
	Welder				
	Deta	E Full name of contribution	a		T
4	Date	5 Full name of contributor	out of state	FAG(ID#)	

SCHEDULE A	1
------------	---

The I	The Instruction Guide explains how to complete this form.						Total Pages Schedule A1:
2 FIL	ER NAME E	Benjamin L Hall				3 Fil	ler ID (Ethics Commission filers)
		Gabriela Esparza				7	Amount of contributions (\$)
		6 Contributor address;	City; Glena Park	State; TX 77547	Zip Code		1.00
	Dringinglass			lo Faralana	r (Cas lastrus		
8	Receptionist	upation / Job title (See Instructions)		9 Employe	r (See Instruct	tions)	
4	Date	5 Full name of contributor Pedro Calvillo	out of state	PAC(ID#)		7	Amount of contributions (\$)
		6 Contributor address;	City; Houston	State; TX 77587	Zip Code		1.00
8	Principal occo	upation / Job title (See Instructions)		9 Employe	r (See Instruct	tions)	
		ATTACH ADDITIO	NAL COPIES	OF THIS	SCHEDULE	E AS	S NEEDED
		If contributor is out-of-state PA	C, please see ins	truction guid	le for additio	nal re	eporting requirements

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

C	ONTRIBU	TIONS					
The	e Instruction G	uide explains how to complete	e this form.		1	Total Pages Sch	nedule A2:
2 F	ILER NAME B	enjamin L Hall			3 Fil	er ID (Ethics Commis	ssion filers)
4 T	OTAL OF UNI	TEMIZED IN-KIND POLITICA	AL CONTRIBU	FIONS	\$45,	717.00	
5	Date	6 Full name of contributor	out of state	PAC(ID#)			
0		Ron Jackson			8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code			
	8/29/2015		Houston	TX 77221		200.00	Stickers
						Check if travel outsi Schedule T	de of Texas, complete
10	Principal occu	pation / Job title (See Instructions)		11 Employer (See Instru	ictions	5)	
5	Date	6 Full name of contributor	out of state	PAC(ID#)			
		Ron Jackson			8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code			
	8/29/2015		Houston	TX 77221		250.00	Fliers
						Check if travel outsi Schedule T	de of Texas, complete
10	Principal occu	pation / Job title (See Instructions)		11 Employer (See Instru	Ictions	5)	
5	Date	6 Full name of contributor	out of state	PAC(ID#)			
		Pastor Joel Montez			8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code			
	8/29/2015		Houston	TX 77020		3000.00	Building Space
						Check if travel outsi Schedule T	de of Texas, complete
10	Principal occu	pation / Job title (See Instructions)		11 Employer (See Instru	ictions	5)	

COI	NTRIBU	TIONS					
The I	nstruction G	uide explains how to complete	this form.		1	Total Pages Sch	nedule A2:
2 FIL	ER NAME E	Benjamin L Hall			3 F	iler ID (Ethics Commis	ssion filers)
4 TO	TAL OF UN	ITEMIZED IN-KIND POLITICA	L CONTRIBU	TIONS	\$45	5,717.00	
5	Date	6 Full name of contributor	out of state	PAC(ID#)			
		Pastor Luis Larrinaga			8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code			
8	3/29/2015		Houston	TX 77015		500.00	Food
						Check if travel outsi Schedule T	de of Texas, complete
10	Principal occu	pation / Job title (See Instructions)		11 Employer (See Instru	iction	is)	
5	Date	6 Full name of contributor	out of state	PAC(ID#)			
		Gary Oradat			8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code			
8	3/29/2015		Houston	TX 77043		227.00	Food
						Check if travel outsi Schedule T	de of Texas, complete
10	Principal occu	ipation / Job title (See Instructions)		11 Employer (See Instru	iction	is)	
5	Date	6 Full name of contributor	out of state	PAC(ID#)			
		Daysi Marin			8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code			
ε	3/29/2015		Sugarland	TX 77498		75.00	Food/Condiments
						Check if travel outsi Schedule T	de of Texas, complete
10	Principal occu	pation / Job title (See Instructions)		11 Employer (See Instru	uction	is)	

CONTRI	BUTIONS					
The Instructi	on Guide explains how to comple	ete this form.		1	Total Pages Sc	hedule A2:
2 FILER NAI	ME Benjamin L Hall			3 Fi	iler ID (Ethics Commi	ssion filers)
4 TOTAL OF	F UNITEMIZED IN-KIND POLITIC	CAL CONTRIBU	TIONS	\$45	5,717.00	
5 Date	6 Full name of contributor	out of state	PAC(ID#)			
	Ruben Arango	_		8	Amount of contributions (\$)	9 In-Kind contribution description
	7 Contributor address;	City;	State; Zip Code	-		
8/29/2015	5	Houston	TX 77006		150.00	Drinks
					Check if travel outs Schedule T	ide of Texas, complete
10 Principa	al occupation / Job title (See Instructions)		11 Employer (See Instru	uction	s)	
5 Date	6 Full name of contributor	out of state	PAC(ID#)			
	Mauricio Marin			8	Amount of contributions (\$)	9 In-Kind contribution description
	7 Contributor address;	City;	State; Zip Code	-		
9/18/2015	5	Sugarland	TX 77498		1000.00	Spanish Version Website
					Check if travel outs Schedule T	ide of Texas, complete
10 Principa	al occupation / Job title (See Instructions)		11 Employer (See Instru	uction	s)	
5 Date	6 Full name of contributor	out of state	PAC(ID#)			
	Gary Oradat			8	Amount of contributions (\$)	9 In-Kind contribution description
	7 Contributor address;	City;	State; Zip Code	-		1 1 1 1
9/19/2015	5	Houston	TX 77043		50.00	Drinks
					Check if travel outs Schedule T	ide of Texas, complete
10 Principa	al occupation / Job title (See Instructions)		11 Employer (See Instru	uction	s)	

C	ONTRIBU	TIONS					
The	The Instruction Guide explains how to complete this form.					Total Pages Sc	hedule A2:
2 F	ILER NAME	Benjamin L Hall			3 Fi	ler ID (Ethics Commi	ssion filers)
4 T	OTAL OF UN	NITEMIZED IN-KIND POLITICA	L CONTRIBU	TIONS	\$45	,717.00	
5	Date	6 Full name of contributor Rodney Jones	out of state	PAC(ID#)	8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code			
	9/4/2015		Houston	TX 77077		500.00 Check if travel outs Schedule T	Ben Hall T-shirts ide of Texas, complete
10	Principal occ	upation / Job title (See Instructions)		11 Employer (See Instru	iction	s)	
5	Date	6 Full name of contributor Mohamed Allan	out of state	PAC(ID#)	8	Amount of contributions (\$)	9 In-Kind contribution description
	8/1/2015	7 Contributor address;	City; Richmond	State; Zip Code TX 77407		565.00	Women for Hall T-shirts
						Check if travel outs Schedule T	I ide of Texas, complete
10	Principal occ	upation / Job title (See Instructions)		11 Employer (See Instru	iction	s)	
5	Date	6 Full name of contributor Rashid Khalife	out of state	PAC(ID#)	8	Amount of contributions (\$)	9 In-Kind contribution description
	8/1/2015	7 Contributor address;	City; Missouri City	State; Zip Code TX 77489		750.00 Check if travel outs Schedule T	English Literature (10,000) ide of Texas, complete
10	Principal occ	upation / Job title (See Instructions)		11 Employer (See Instru	iction	s)	

СС	NTRIBU	FIONS					
The	Instruction G	e this form.		1	Total Pages Sch	nedule A2:	
2 F	LER NAME B	enjamin L Hall			3 Fil	er ID (Ethics Commis	ssion filers)
4 T(OTAL OF UNI	TEMIZED IN-KIND POLITICA	L CONTRIBUT	IONS	\$45,	717.00	
5	Date	6 Full name of contributor	out of state F	PAC(ID#)			
		Rashid Khalife			8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code			
	8/1/2015		Missouri City	TX 77489		250.00	Spanish Literature (5,000)
						Check if travel outsi Schedule T	de of Texas, complete
10	Principal occu	pation / Job title (See Instructions)		11 Employer (See Instru	ctions	3)	
5	Date	6 Full name of contributor	out of state F	PAC(ID#)			
		Rashid Khalife			8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code			
	8/1/2015		Missouri City	TX 77489		1100.00	Mail-in Ballots (Printing)
						Check if travel outsi Schedule T	de of Texas, complete
10	Principal occu	pation / Job title (See Instructions)		11 Employer (See Instru	ctions	;)	
5	Date	6 Full name of contributor	out of state F	PAC(ID#)			
		Richard Johnson			8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code			
	9/1/2015		Houston	TX 77029		1500.00	Office
						Check if travel outsi Schedule T	de of Texas, complete
10	Principal occu	pation / Job title (See Instructions)		11 Employer (See Instru	ctions	3)	

со	NTRIBU	TIONS					
The Instruction Guide explains how to complete this form.					1	Total Pages Sch	nedule A2:
2 FIL	2 FILER NAME Benjamin L Hall					iler ID (Ethics Commis	ssion filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$45	5,717.00		
5	Date 6 Full name of contributor out of state PAC(ID#)						
		Gladys House			8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code	-		
	9/23/2015		Houston	TX 77093		2000.00	Office Space
						Check if travel outsid Schedule T	de of Texas, complete
10	Principal occu	pation / Job title (See Instructions)		11 Employer (See Instr	uctior	ns)	
5	5 Date 6 Full name of contributor out of state PAC(ID#)						
		Ron Jackson			8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code	-		
	9/17/2015		Houston	TX 77221		100.00	Signs
						Check if travel outsid Schedule T	de of Texas, complete
10	Principal occu	pation / Job title (See Instructions)		11 Employer (See Instr	uctior	is)	
5	Date	6 Full name of contributor	out of state	PAC(ID#)			
		Pastor Luis Larrinaga	_		8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code	-		
	9/19/2015		Houston	TX 77015		500.00	Food
						Check if travel outsid Schedule T	de of Texas, complete
10	Principal occu	pation / Job title (See Instructions)		11 Employer (See Instr	uctior	ns)	

СС	NTRIBU	ΓIONS					
The	Instruction G	uide explains how to complete	e this form.		1	Total Pages Sch	edule A2:
2 FI	LER NAME B	enjamin L Hall		3 Filer ID (Ethics Commission filers)			
4 T(OTAL OF UNI	TEMIZED IN-KIND POLITICA	L CONTRIBUT	TIONS	\$45	5,717.00	
5	Date 6 Full name of contributor out of state PAC(ID#) Mohamed Allan			8	Amount of contributions (\$)	9 In-Kind contribution description	
	8/1/2015	7 Contributor address;	City; Richmond	State; Zip Code TX 77407		700.00 Check if travel outsic Schedule T	VIP Tickets to Delta Sorority Convention de of Texas, complete
10	Principal occu	I pation / Job title (See Instructions)		11 Employer (See Instru	luction	ls)	
5	Date	6 Full name of contributor Richard Johnson	out of state F	PAC(ID#)	8	Amount of contributions (\$)	9 In-Kind contribution description
	9/15/2015	7 Contributor address;	City; Houston	State; Zip Code TX 77029		1100.00 Check if travel outsio Schedule T	Signs de of Texas, complete
10	Principal occu	I pation / Job title (See Instructions)		11 Employer (See Instru	liction	ls)	
5	Date	6 Full name of contributor Cris Tetzintla	out of state F		8	Amount of contributions (\$)	9 In-Kind contribution description
	9/11/2015	7 Contributor address;	City; Baytown	State; Zip Code TX 77521		150.00 Check if travel outsic Schedule T	Brochures de of Texas, complete
10	Principal occu	pation / Job title (See Instructions)		11 Employer (See Instru	iction	s)	

C	ONTRIBU ⁻	TIONS							
Th	e Instruction G	uide explains how to complete		1	1 Total Pages Schedule A2:				
2 F	ILER NAME E	Benjamin L Hall			3 Fi	3 Filer ID (Ethics Commission filers)			
4 T	OTAL OF UN	ITEMIZED IN-KIND POLITICA	AL CONTRIBUT	IONS	\$45	5,717.00			
5	Date	6 Full name of contributor	out of state F	PAC(ID#)					
		Mauricio & Daysi Marin			8	Amount of contributions (\$)	9 In-Kind contribution description		
		7 Contributor address;	City;	State; Zip Code	-				
	9/22/2015		Sugarland	TX 77498		9000.00	Production of 5 Hispanic TV Commercials		
						Check if travel outs Schedule T	ide of Texas, complete		
10	Principal occu	pation / Job title (See Instructions)		11 Employer (See Instru	uction	is)			
5	Date	6 Full name of contributor	out of state F	PAC(ID#)					
		Claude Foster			8	Amount of contributions (\$)	9 In-Kind contribution description		
		7 Contributor address;	City;	State; Zip Code	-				
	9/1/2015		Missouri City	TX 77489		1500.00	Computer, Printer - Call Lists		
						Check if travel outs Schedule T	ide of Texas, complete		
10	Principal occu	pation / Job title (See Instructions)		11 Employer (See Instru	uction	is)			
5	Date	6 Full name of contributor	out of state F	PAC(ID#)					
		Claude Foster	_		8	Amount of contributions (\$)	9 In-Kind contribution description		
		7 Contributor address;	City;	State; Zip Code	-				
	9/1/2015		Missouri City	TX 77489		100.00	Radio- Office Use		
						Check if travel outs Schedule T	ide of Texas, complete		
10	Principal occu	11 Employer (See Instru	uction	is)					

СО	NTRIBU	TIONS					
The Instruction Guide explains how to complete this form.					1	Total Pages Sc	hedule A2:
2 FII	2 FILER NAME Benjamin L Hall					ler ID (Ethics Commi	ssion filers)
4 TC	DTAL OF UNI	TEMIZED IN-KIND POLITIC	AL CONTRIBUT	IONS	\$45	,717.00	
5	Date	6 Full name of contributor Claude Foster	out of state F	PAC(ID#)	8	Amount of contributions (\$)	9 In-Kind contribution description
	9/1/2015	7 Contributor address;	City; Missouri City	State; Zip Code TX 77489		100.00 Check if travel outs Schedule T	Microwave ide of Texas, complete
10	Principal occu	pation / Job title (See Instructions)		11 Employer (See Instru	ction	s)	
5	Date	6 Full name of contributor Claude Foster	out of state F	PAC(ID#)	8	Amount of contributions (\$)	9 In-Kind contribution description
	9/1/2015	7 Contributor address;	City; Missouri City	State; Zip Code TX 77489		40.00 Check if travel outs Schedule T	Coffee Pot ide of Texas, complete
10	Principal occu	pation / Job title (See Instructions)		11 Employer (See Instru	ction	s)	
5	Date	6 Full name of contributor Claude Foster	out of state F	AC(ID#)	8	Amount of contributions (\$)	9 In-Kind contribution description
	9/1/2015	7 Contributor address;	City; Missouri City	State; Zip Code TX 77489		100.00 Check if travel outs Schedule T	Internet Service (Personal Hotspot Service) ide of Texas, complete
10	Principal occu	pation / Job title (See Instructions)		11 Employer (See Instru	ction	s)	

CON	TRIBU [.]	TIONS					
The Instruction Guide explains how to complete this form.					1	Total Pages Sch	nedule A2:
2 FILER NAME Benjamin L Hall					3 F	iler ID (Ethics Commis	ssion filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS					\$45	5,717.00	
5 D	Date	6 Full name of contributor out of state PAC(ID#) Claude Foster			8	Amount of contributions (\$)	9 In-Kind contribution description
9/1	1/2015	7 Contributor address;	City; Missouri City	State; Zip Code TX 77489	-	100.00 Check if travel outsi Schedule T	Small Refrigerator de of Texas, complete
10 P	Principal occu	upation / Job title (See Instructions)		11 Employer (See Inst	ructior	lis)	
5 D	Date	6 Full name of contributor Franklin Hall	out of state P	AC(ID#)	8	Amount of contributions (\$)	9 In-Kind contribution description
9/1	9/2015	7 Contributor address;	City; Houston	State; Zip Code TX 77085	-	1000.00 Check if travel outsi Schedule T	Stage de of Texas, complete
10 P	Principal occu	pation / Job title (See Instructions)		11 Employer (See Inst	ructior	l ns)	
5 D	Date	6 Full name of contributor Franklin Hall 7 Contributor address;	Out of state P	AC(ID#) State; Zip Code	8	Amount of contributions (\$)	9 In-Kind contribution description
9/1	9/2015		Houston	TX 77085		1000.00 Check if travel outsi Schedule T	Barbecue Grill de of Texas, complete
10 P	Principal occu	pation / Job title (See Instructions)		11 Employer (See Inst	ructior	ns)	

	ON-MONE	TARY (IN-KIND) PC FIONS	LITICAL					SCHEDULE A2
	The Instruction Guide explains how to complete this form.					1	Total Pages Sc	hedule A2:
2 F	2 FILER NAME Benjamin L Hall					3 F	iler ID (Ethics Commi	ssion filers)
4 T	OTAL OF UNI	TEMIZED IN-KIND POLITIC	AL CONTRIBU	TIONS		\$45	5,717.00	
5	Date 6 Full name of contributor out of state PAC(PAC(ID#)				
		Elias & Lucy Duran				8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State;	Zip Code			
	9/24/2015		Houston	TX 77096			10000.00	Restaurant/Advertising
							Check if travel outsi Schedule T	I ide of Texas, complete
10	Principal occu	pation / Job title (See Instructions)		11 Employe	er (See Instru	ction	ls)	
5	Date	6 Full name of contributor	out of state	PAC(ID#)				
		Jerome Walton				8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State;	Zip Code			
	9/24/2015		Houston	TX 77035			500.00	Transportation/Gas
							Check if travel outsi Schedule T	de of Texas, complete
10	Principal occu	pation / Job title (See Instructions)		11 Employe	er (See Instru	ction	s)	
5	Date	6 Full name of contributor	out of state	PAC(ID#)				
		Gene Donahue				8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State;	Zip Code			
	9/24/2015		Houston	TX 77001			260.00	Gas
							Check if travel outsi Schedule T	de of Texas, complete
10	Principal occu	pation / Job title (See Instructions)		11 Employe	er (See Instrue	ction	is)	

NON-MONETARY (IN-KIND) POLITICAL CO The

CONTRIBL	JTIONS					
The Instruction	The Instruction Guide explains how to complete this form.					hedule A2:
2 FILER NAME	Benjamin L Hall			3 F	iler ID (Ethics Commi	ssion filers)
4 TOTAL OF UN	NITEMIZED IN-KIND POLITICA	L CONTRIBU	ITIONS	\$45	5,717.00	
5 Date 6 Full name of contributor out of state PAC(ID#)						
5 Date	Mauricio & Daysi Marin			8	Amount of	9 In-Kind contribution
				Ū	contributions (\$)	description
	7 Contributor address;	City;	State; Zip Code	-		
8/29/2015		Houston	TX 77498		3500.00	Video Production
					Check if travel outs Schedule T	ide of Texas, complete
10 Principal occ	cupation / Job title (See Instructions)		11 Employer (See Instr	uctior	ns)	
5 Date	6 Full name of contributor	out of state	PAC(ID#)			
	Ron Jackson			8	Amount of contributions (\$)	9 In-Kind contribution description
	7 Contributor address;	City;	State; Zip Code	-		
9/23/2015		Houston	TX 77221		100.00	Paid Employee for Block Walk
					Check if travel outs Schedule T	ide of Texas, complete
10 Principal oc	cupation / Job title (See Instructions)		11 Employer (See Instr	uctior	ns)	
5 Date	6 Full name of contributor	out of state	PAC(ID#)			
	Norma & Luis Larrinaga			8	Amount of contributions (\$)	9 In-Kind contribution description
	7 Contributor address;	City;	State; Zip Code	-		
9/19/2015		Houston	TX 77015		250.00	Food
					Check if travel outs Schedule T	ide of Texas, complete
10 Principal oc	cupation / Job title (See Instructions)		11 Employer (See Instr	uctior	ns)	

SCHEDULE A2

NON-MONETARY (IN-KIND) POLITICAL

NON-MC	NON-MONETARY (IN-KIND) POLITICAL						SCHEDULE A2
CONTRI	BUTIONS						
The Instruction Guide explains how to complete this form.					1	Total Pages Sc	hedule A2:
2 FILER NAME Benjamin L Hall					3 Fil	ler ID (Ethics Comm	ission filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$45	,717.00		
5 Date	6 Full name of contributor Cliff Edwards	out of state	PAC(ID#)		8	Amount of contributions (\$)	9 In-Kind contribution description
9/7/2015	7 Contributor address;	City; Houston	State; TX 77004	Zip Code		3500.00 Check if travel outs Schedule T	Video Production with Ben Hall ide of Texas, complete
10 Principal occupation / Job title (See Instructions)				er (See Instru			
	ATTACH ADDI						
	If contributor is out-of-state	PAC, please see in	struction guid	le for additio	nal re	eporting requireme	nts

LO	ANS						SCHEDULE E
	The	Instruction Guide explains how	to complete this	form.		1	Total Pages Schedule E:
2 FII	ER NAME Ber	njamin L Hall				3	Filer ID (Ethics Commission filers)
4	TOTAL	OF UNITEMIZED LOANS:	=> => => =	> => =	>		
5	Date of loan	7 Name of lender	out of state PAC(ID)#)			
		Benjamin L. Hall				9	Loan Amount (\$)
	1/1/2015						850,000.00
6	Is Lender a	8 Lender Address;	City;	State;	Zip Code	10	Interest rate
	Financial		Houston	тх	77024		
	Institution?					11	Maturity date
	No						
12	Principal occ	upation / Job title (See Instruct	tions)	13 Empl	oyer (See Instr	uctions)
	Attorney			Self emp	loyed		
14	Description o	f collateral		15	Check if perso (See instruction		nds were deposited into political account
	None					лт <i>э)</i>	
16	GUARANTOR	17 Name of guarantor				19	Amount Guaranteed (\$)
	INFORMATION						
		18 Guarantor address;	City;	State;	Zip Code	·	
	not applicable						
20	Principal Occu	notion		21 Emp	lover		
20		μαιιστι			oyei		
		ATTACH ADDITION		HIS SC			EDED
		If lender is out-of-state PAC, ple					

	The Instruction Guide	e explains how to o	complete this for	m
1 Total pages Schedule F1:	² FILER NAME Benjamin L	Hall		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name			1
8/24/2015	AT&T			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
302.90				
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
	(a) Calegory	Check if	travel outside of T	Fexas, complete Schedule T holder living expense
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought		office held
4 Date	5 Payee name			
9/23/2015	Metro PCS			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
150.00				
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
				Fexas, complete Schedule T holder living expense
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought		office held
4 Date	5 Payee name			
9/24/2015	AT&T			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
127.46				

8 PURPOSE OF EXPENDITURE (a) Category

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	² FILER NAME Benjamin L Ha	II	3 Filer ID (Ethics Commission filers)		
		Check if travel outside of Te			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held		
4 Date	5 Payee name				
7/1/2015	Bison Signs				
6 Amount (\$) 129.00	7 Payee address; City;	State; Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	(b) Description Check if travel outside of Te Check if Austin, TX, officeho			
 9 Complete ONLY if direct expendituree to benefit C/OH 	Candidate / Officehoder name	office sought o	ffice held		

POLITICAL EXPENDITURES

FROM POLITICAL	CONTRIBUTIONS		SCHEDULE F1			
The Instruction Guide explains how to complete this form.						
1 Total pages Schedule F1:	² FILER NAME Benjamin L	Hall	3 Filer ID (Ethics Commission filers)			
4 Date	5 Payee name					
7/10/2015	AllPrint & Office Supply, In	IC				
6 Amount (\$)	7 Payee address; City;	State; Zip Code				
795.00						
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description				
			of Texas, complete Schedule T			
			iceholder living expense			
	Advertising Expense					
9 Complete ONLY if direct	Candidate / Officehoder name	office sought	office held			
expendituree to benefit C/OH						
4 Date	5 Payee name					
8/5/2015	AllPrint & Office Supply, In)C				
6 Amount (\$)	7 Payee address; City;	State; Zip Code				
295.00						
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description				
		Check if travel outside	of Texas, complete Schedule T			
		Check if Austin, TX, off	iceholder living expense			
	Advertising Expense					
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held			
4 Date	5 Payee name					
8/7/2015	Talani, Liliana					
6 Amount (\$)	7 Payee address; City;	State; Zip Code				
250.00						

The Instruction Guide explains how to complete this form.						
1 Total pages Schedule F1:	² FILER NAME Benjamin L Ha	ll	3 Filer ID (Ethics Commission filers)			
	Advertising Expense	Check if travel outside of Te Check if Austin, TX, officeho	•			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held			
4 Date	5 Payee name					
8/19/2015	K-Ree					
6 Amount (\$) 3,500.00	7 Payee address; City;	State; Zip Code				
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	(b) Description Check if travel outside of Te Check if Austin, TX, officeho				
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held			

	CONTRIBUTIONS		
	The Instruction Guide	explains how to complete the	nis form.
1 Total pages Schedule F1:	² FILER NAME Benjamin L	Hall	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
8/24/2015	Bison Signs		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
2,110.93			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outsi	de of Texas, complete Schedule T
		Check if Austin, TX,	officeholder living expense
	Advertising Expense		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held
4 Date	5 Payee name		
8/26/2015	AllPrint & Office Supply, Ind	0	
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1,180.00			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outsi	de of Texas, complete Schedule T
		Check if Austin, TX,	officeholder living expense
	Advertising Expense		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held
4 Date	5 Payoo nama		
	5 Payee name		
7/30/2015	The Harris County Council		

	7/30/2015	The Harris Cour	nty Council		
6	Amount (\$)	7 Payee address;	City;	State;	Zip Code
	100.00				
8	PURPOSE OF EXPENDITURE	(a) Category		(b) Descriptio	on

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	² FILER NAME Benjamin L Ha	dl	3 Filer ID (Ethics Commission filers)		
		Check if travel outside of Te Check if Austin, TX, officeho			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held		
4 Date	5 Payee name				
8/21/2015	Daysi Marin				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
65.50					
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description			
	Food/Beverage Expense	Check if travel outside of Te Check if Austin, TX, officeho			
 9 Complete ONLY if direct expendituree to benefit C/OH 	Candidate / Officehoder name	office sought o	ffice held		

		avalaina haw ta	oomulata thia far		
1. Total pages Schedula E1.	The Instruction Guide		complete this for		
1 Total pages Schedule F1:	² FILER NAME Benjamin LI			3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name				
8/21/2015	Daysi Marin				
6 Amount (\$)	7 Payee address; City;	State;	Zip Code		
42.67					
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	1		
		Check if	travel outside of T	Fexas, complete Schedule T	
		Check if	Austin, TX, officel	holder living expense	
	Food/Beverage Expense				
9 Complete ONLY if direct	Candidate / Officehoder name	office sought		office held	
expendituree to benefit C/OH					
4 Date	5 Payee name				
8/21/2015	Daysi Marin				
6 Amount (\$)	7 Payee address; City;	State;	Zip Code		
26.58					
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	<u>ו</u>		
		Check if	travel outside of T	Fexas, complete Schedule T	
				holder living expense	
	Food/Beverage Expense		··· , , · · · ·	5 1 1 1	
9 Complete ONLY if direct	Candidate / Officehoder name	office sought		office held	
expendituree to benefit C/OH		5			
4 Date	5 Payee name				
8/21/2015	Daysi Marin				
6 Amount (\$)	7 Payee address; City;	State;	Zip Code		
11.79		51010,			
11.79					

8 PURPOSE OF EXPENDITURE (a) Category

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	² FILER NAME Benjamin L H	lall	3 Filer ID (Ethics Commission filers)		
	Food/Beverage Expense		of Texas, complete Schedule T ficeholder living expense		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held		
4 Date	5 Payee name				
9/11/2015	Doneraki				
6 Amount (\$) 540.96	7 Payee address; City;	State; Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description			
	Food/Beverage Expense		of Texas, complete Schedule T ficeholder living expense		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held		

	The Instruction Guide ex	xplains how to a	complete this form	m.
1 Total pages Schedule F1:	² FILER NAME Benjamin L Ha	all		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name			
7/17/2015	Antioch MBC			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
500.00				
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	1	
	Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee	Check if		exas, complete Schedule T
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought		office held
4 Date	5 Payee name			
7/20/2015	Perry Wooten			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
1,000.00				
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	1	
		Check if	travel outside of T	exas, complete Schedule T
	Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee		Austin, TX, officeł	nolder living expense
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought		office held
4 Date	5 Payee name			
8/17/2015	Vision America			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
1,500.00				

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	² FILER NAME Benjamin L Ha	all	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			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held		
4 Date	5 Payee name				
7/20/2015	Voter History				
6 Amount (\$) 5,000.00	7 Payee address; City;	State; Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description Check if travel outside of Te Check if Austin, TX, officeho			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held		

POLITICAL EXPENDITURES . ~

FROM POLITICAL			SCHEDULE F1
	The Instruction Guide e	xplains how to complete this form	۱.
1 Total pages Schedule F1:	² FILER NAME Benjamin L Ha	all	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
8/19/2015	Hall, Benjamin L. III		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1,250.00			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of T Check if Austin, TX, officeh	
	Filing Fee		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	ffice held
4 Date	5 Payee name		
7/13/2015	Dolcefino Communications		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
5,000.00			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of T	exas, complete Schedule T
		Check if Austin, TX, officeh	older living expense
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought c	ffice held
4 Date	5 Payee name		
8/4/2015	Dolcefino Communications		
1	I		

8/4/2015	Dolcefino Comm	nunications			
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code	
6,300.00					
8 PURPOSE OF EXPENDITURE	(a) Category		(b) Descripti	on	

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	² FILER NAME Benjamin L Ha	I	3 Filer ID (Ethics Commission filers)		
		Check if travel outside of Te			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name c	office sought of	ffice held		
4 Date	5 Payee name				
8/31/2015	Perry Wooten				
6 Amount (\$) 1,000.00	7 Payee address; City;	State; Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category Consulting Expense	(b) Description Check if travel outside of Te Check if Austin, TX, officeho			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name c	office sought of	ffice held		

POLITICAL EXPENDITURES

FROM POLITICAL			SCHEDULE F1
	The Instruction Guid	e explains how to complete	this form.
1 Total pages Schedule F1:	² FILER NAME Benjamin L	. Hall	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		I
9/1/2015	JPBE Consulting		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	9
2,500.00			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
			side of Texas, complete Schedule T X, officeholder living expense
	Consulting Expense		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held
4 Date	5 Payee name		
9/13/2015	Bell, Tomaro		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	9
5,000.00			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel out	side of Texas, complete Schedule T
		Check if Austin, T	X, officeholder living expense
9 Complete ONLY if direct	Candidate / Officehoder name	office sought	office held
expendituree to benefit C/OH			
4 Date	5 Payee name		
7/9/2015	Jerome C. Walton		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	}
1,000.00			

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	² FILER NAME Benjamin L H	lall	3 Filer ID (Ethics Commission filers)		
		Check if travel outside of Te			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held		
4 Date	5 Payee name				
7/14/2015	Antonio Deleon				
6 Amount (\$) 2,000.00	7 Payee address; City;	State; Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Te Check if Austin, TX, officeh			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held		

FROM POLITICAL	CONTRIBUTIONS					
The Instruction Guide explains how to complete this form.						
1 Total pages Schedule F1:	² FILER NAME Benjamin L H	Hall		3 Filer ID (Ethics Commission filers)		
4 Date	5 Payee name					
8/28/2015	Ellis, Chaney					
6 Amount (\$) 1,000.00	7 Payee address; City;	State;	Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category		f travel outside of T	exas, complete Schedule T 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					
7/9/2015	Steps of Faith & Leadership	Ministries				
6 Amount (\$) 32,500.00	7 Payee address; City;	State;	Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category		f travel outside of T	exas, complete Schedule T 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					
8/24/2015	The Island of Hone Church					

8/24/2015	The Island of Ho	pe Church		
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code
200.00				
8 PURPOSE OF EXPENDITURE	(a) Category		(b) Description	1

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	² FILER NAME Benjamin L Ha	all	3 Filer ID (Ethics Commission filers)		
		Check if travel outside of Te			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held		
4 Date	5 Payee name				
9/17/2015	Daysi Marin				
6 Amount (\$) 250.00	7 Payee address; City;	State; Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description Check if travel outside of Te Check if Austin, TX, officeho			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office 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 Benjamin L	Hall 3	Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
9/21/2015	Daughters of Liberty		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1,500.00			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Texas	, complete Schedule T
		Check if Austin, TX, officeholde	r living expense
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office	e held
4 Date	5 Payee name		
9/28/2015	Daysi Marin		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
2,500.00			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Texas	, complete Schedule T
		Check if Austin, TX, officeholde	r living expense
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office	e held
4 Date	5 Payee name		
8/21/2015	Daysi Marin	Ctoto: Zin Codo	
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
103.46			

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	² FILER NAME Benjamin L Ha	all	3 Filer ID (Ethics Commission filers)		
		Check if travel outside of Te			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held		
4 Date	5 Payee name				
9/9/2015	K-Ree				
6 Amount (\$) 1,000.00	7 Payee address; City;	State; Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description Check if travel outside of Te Check if Austin, TX, officeho			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held		

POLITICAL EXPENDITURES

FROM POLITICAL	CONTRIBUTIONS		SCHEDULE F1
	The Instruction Guid	le explains how to complete t	
1 Total pages Schedule F1:	² FILER NAME Benjamin L	. Hall	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
9/21/2015	Hope Through Grace		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
100.00			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outs	side of Texas, complete Schedule T
		Check if Austin, TX	(, officeholder living expense
9 Complete ONLY if direct	Candidate / Officehoder name	office sought	office held
expendituree to benefit C/OH			
4 Date	5 Payee name		
9/28/2015	Daysi Marin		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
200.00			
200.00			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
			side of Texas, complete Schedule T
		Check if Austin, TX	K, officeholder living expense
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held
4 Date	5 Payee name		
8/23/2015	Richard Johnson		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
2,000.00			

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	² FILER NAME Benjamin L Ha	all	3 Filer ID (Ethics Commission filers)		
		Check if travel outside of Te			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	ffice held		
4 Date	5 Payee name				
9/13/2015	Antonio Deleon				
6 Amount (\$) 1,000.00	7 Payee address; City;	State; Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description Check if travel outside of Te Check if Austin, TX, officeho			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	ffice held		

	The Instruction Guide		omplete this forr		
1 Total pages Schedule F1:	² FILER NAME Benjamin LI	Hall		3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name				
9/13/2015	Ron Jackson				
6 Amount (\$)	7 Payee address; City;	State;	Zip Code		
2,500.00					
	(1) Ontenner				
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description			
				exas, complete Schedule T 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				
9/23/2015	SHAPE				
6 Amount (\$)	7 Payee address; City;	State;	Zip Code		
605.00		,	_p		
003.00					
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description			
		Check if	travel outside of T	exas, complete Schedule T	
		Check if	Austin, TX, officeh	older living expense	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	(office held	
4 Data	E Paveo namo				
4 Date	5 Payee name				
9/28/2015	Mauricio Marin				
6 Amount (\$)	7 Payee address; City;	State;	Zip Code		
1,000.00					

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	² FILER NAME Benjamin L Ha	all	3 Filer ID (Ethics Commission filers)		
		Check if travel outside of Te			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held		
4 Date	5 Payee name				
9/10/2015	Paetec				
6 Amount (\$) 32.90	7 Payee address; City;	State; Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description Check if travel outside of Te Check if Austin, TX, officeho			
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 Benjamin L H	all	3 Filer ID (Ethics Commission filers)		
4 Date	5 Payee name		•		
8/3/2015	Paetec				
6 Amount (\$) 91.52	7 Payee address; City;	State; Zip Code			
91.02					
8 PURPOSE OF EXPENDITURE	(a) Category		of Texas, complete Schedule T riceholder living expense		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held		
4 Date	5 Payee name				
7/31/2015	JPBE Consulting				
6 Amount (\$) 2,500.00	7 Payee address; City;	State; Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category		of Texas, complete Schedule T ïceholder living expense		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held		

4 Date	5 Payee name			
8/9/2015	Richard Jones			
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code
2,500.00				
8 PURPOSE OF EXPENDITURE	(a) Category		(b) Descriptior	

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	² FILER NAME Benjamin L Ha	(II	3 Filer ID (Ethics Commission filers)	
		Check if travel outside of Te		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held	
4 Date	5 Payee name			
9/1/2015	Dolcefino Communications			
6 Amount (\$) 5,000.00	7 Payee address; City;	State; Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description Check if travel outside of Te Check if Austin, TX, officeho		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held	

	The Instruction Guid	e explains how to complete this	form.
1 Total pages Schedule F1:	² FILER NAME Benjamin L	Hall	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
7/31/2015	Dayse Marin		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1,500.00			
	(1) 0 10 10 10		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
			of Texas, complete Schedule T
		Check if Austin, TX, off	ficeholder living expense
9 Complete ONLY if direct	Candidate / Officehoder name	office sought	office held
expendituree to benefit C/OH		childe bought	
4 Date	5 Payee name		
9/13/2015	Antonio Deleon		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1,000.00			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside	of Texas, complete Schedule T
		Check if Austin, TX, off	ficeholder living expense
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held
4 Date	5 Payee name		
9/13/2015	JPBE Consulting		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
2,500.00			
	1		

8 PURPOSE OF EXPENDITURE (a) Category

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	² FILER NAME Benjamin L Ha	dl	3 Filer ID (Ethics Commission filers)	
		Check if travel outside of Te Check if Austin, TX, officeho		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held	
4 Date	5 Payee name			
8/10/2015	Online Deposit Details & Imag	ges		
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
3.00				
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Te Check if Austin, TX, officeho		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held	

POLITICAL EXPENDITURES F

1 4

6

8

9

4

6

8

9

ROM POLITICAL	CONTRIBUTIONS	SCHEDULE F1	
		e explains how to complete	this form.
Total pages Schedule F1:	² FILER NAME Benjamin L	Hall	3 Filer ID (Ethics Commission filers)
Date	5 Payee name		
8/31/2015	Online Deposit Details & In	nages	
Amount (\$)	7 Payee address; City;	State; Zip Code	
0.49			
PURPOSE OF EXPENDITURE	(a) Category		side of Texas, complete Schedule T K, officeholder living expense
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held
Date	5 Payee name		
9/9/2015	Online Deposit Details & In	nages	
Amount (\$)	7 Payee address; City;	State; Zip Code	
3.00			
PURPOSE OF EXPENDITURE	(a) Category		side of Texas, complete Schedule T <, officeholder living expense
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held

ſ	4 Date	5 Payee name			
	9/16/2015	The Hall Law Firr	m		
ľ	6 Amount (\$)	7 Payee address;	City;	State;	Zip Code
	8,000.00				
ľ	8 PURPOSE OF EXPENDITURE	(a) Category		(b) Description	1

SCHEDULE F1

	The Instruction Guide explains how to complete this form.				
1 Total pages	s Schedule F1:	² FILER NAME Benjamin	L Hall		3 Filer ID (Ethics Commission filers)
				Check if travel outside of T Check if Austin, TX, officel	exas, complete Schedule T nolder living expense
9 Complete 0 expenditure	ONLY if direct ee to benefit C/OH	Candidate / Officehoder name	office s	sought	office held
4 Date		5 Payee name			
9)/25/2015	Daysi Marin			
6 Amount (\$))	7 Payee address; City;	Sta	te; Zip Code	
	150.00				
8 PURPOSE	OF EXPENDITURE	(a) Category	(b) D	escription	
				Check if travel outside of T Check if Austin, TX, officel	exas, complete Schedule T nolder living expense
9 Complete (expenditure	ONLY if direct ee to benefit C/OH	Candidate / Officehoder name	office s	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.		
4 Date	5 Payee name	•
	Ben L. Hall	
6 Amount (\$)	7 Payee Address;	City; State; Zip Code
600.00	530 Lovett Blvd	Houston TX 77006
Reimbursement from		
political contributions		
intended		
8	(a) Category	(b) Description
PURPOSE OF EXPENDITURE	Gas	
		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